## Form 990

### **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.

Open to Public Inspection

OMB No. 1545-0047

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

Α	For th	e 2020 calendar year, or tax year beginning	and	lending		
В	Check if applicab	C Name of organization		-	D Employer identi	fication number
	Addre					
F	Name				47-103600	8
	Initial		elivered to street address)	Room/suite	E Telephone numb	er
	Final return	6889 ROWLAND ROAD	,		952-540-405	
	termin		I ZIP or foreign postal code		G Gross receipts \$	2,298,874,861.
	Amen	ded EDEN DEATETE MN 55344	ÿ .		H(a) Is this a group	return
	Applic	F Name and address of principal officer: FAGE	BUSCH		for subordinate	
	pendi	6889 ROWLAND ROAD, EDEN PRAIRIE, M	IN 55344		H(b) Are all subordinates	
1	Tax-ex	empt status: X 501(c)(3) 501(c) (	) ◀ (insert no.) 4947(a)(1)	or 527		a list. See instructions
J	Websi	te: WWW.MACPHILANTHROPIES.ORG			H(c) Group exempt	ion number
K	Form o	organization; X Corporation Trust	Association Other	L Year	of formation: 2014	M State of legal domicile: MN
P	art I	Summary				
e	1	Briefly describe the organization's mission or mos OR ALL DESIGNATED SUPPORTED ORGANIZATION		ABLE GRAN	TTMAKING TO SOME	
Activities & Governance	2	Check this box I if the organization disco		sed of more	than 25% of its not a	ceate
Veri	3	Number of voting members of the governing body	(T) 11 (1) 4 1		3	5
Ö	4	Number of independent voting members of the go				4
50	5	Total number of individuals employed in calendar				
i i	6	Total number of volunteers (estimate if necessary)				
Σţ	7 a	Total unrelated business revenue from Part VIII, co				100.010
Ă	b	Net unrelated business taxable income from Form				
					Prior Year	Current Year
4	8	Contributions and grants (Part VIII, line 1h)			0	. 0.
nu	9	Program service revenue (Part VIII, line 2g)			0	. 0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4			231,030,834	432,268,518.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8d	c, 9c, 10c, and 11e)		669,816	-41,640,188.
	12	Total revenue - add lines 8 through 11 (must equa	l Part VIII, column (A), line 12)		231,700,650	. 390,628,330.
	13	Grants and similar amounts paid (Part IX, column	(A), lines 1-3)		154,658,814	. 128,707,710.
	14	Benefits paid to or for members (Part IX, column (	A), line 4)		0	. 0.
9	15	Salaries, other compensation, employee benefits			13,535,952	. 15,181,194.
Expenses	16a	Professional fundraising fees (Part IX, column (A),	line 11e)		0	. 0.
XDe	b	Total fundraising expenses (Part IX, column (D), lin		0.		
ш	17	Other expenses (Part iX, column (A), lines 11a-11c			14,530,138	
	18	Total expenses. Add lines 13-17 (must equal Part			182,724,904	+
	19	Revenue less expenses. Subtract line 18 from line	: 12		48,975,746	
SOF				Ве	ginning of Current Year	
Sset	20	Total assets (Part X, line 16)			4,468,703,325	
et A	20 21 22	Total liabilities (Part X, line 26)	t		104,866,827	
P	art II	Net assets or fund balances. Subtract line 21 from Signature Block	1 line 20		4,303,030,430	4,710,234,044.
$\overline{}$		alties of perjury, I declare that I have examined this return	including accompanying schedule	c and etateme	ante and to the heet of n	ny knowledge and helief it is
		ct, and complete. Declaration of preparer (other than office				ny kilowicago ana boliot, it is
	, 00110	DAMAN I LUNGON	/ sary to bacoo off an intormation of w	mon proparor	1 1 1	2021
Sig	ın	Signature of officer			Date	
He		NAOMI HORSAGER, CFO				
		Type or print name and title				
		Print/Type preparer's name	Preparer's signature	[	Date Check	PTIN
Pai	d	ANNE FULTON	Preparer's signature, United Tutton		11/8/21   if   self-empl	P00941863
Pre	parer	Firm's name DELOITTE TAX, LLP			Firm's EIN ▶	86-1065772
Use	Only	Firm's address 50 SOUTH SIXTH STREET,	SUITE 2800			
_		MINNEAPOLIS, MN 55402			Phone no.61	2-397-4000
		RS discuss this return with the preparer shown ab				X Yes No
032	001 12-2	3-20 LHA For Paperwork Reduction Act Not	ice, see the separate instruction	ons.		Form <b>990</b> (2020)

orm	990 (2020) ANNE RAY FOUNDATION	47-1036008	Page 2
Pai	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	PROVIDE MEANINGFUL SUPPORT TO SOME OR ALL DESIGNATED SUPPORTED		
	ORGANIZATIONS TO MAKE A MEASURABLE AND SUSTAINABLE DIFFERENCE ON OUR		
	SHARED PRIORITY PROBLEMS.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
_	prior Form 990 or 990-EZ?	Ye	s 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?	Ye	s 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 expenses	S.
	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	\$	)
			· · · · · ·
	SEE SCHEDULE O		
4b	(Code:) (Expenses \$) (Revenue	\$	)
łc	(Code:) (Expenses \$) (Revenue	\$	)
łd	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	

4e Total program service expenses

Form **990** (2020)

141,791,327.

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
-	similar amounts as defined in Revenue Procedure 98-19? 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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0		8		х
9	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	J		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		х
40	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		х
4.4	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		A.
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X		14.4	
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	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		v	
	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		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			ŕ
	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	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? 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	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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX column (A) line 1? If "Ves " complete Schedule I, Parts Land II	21	Х	

I al	Checkist of nequired schedules (continued)			
00	Distribution of the second of		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete			
	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 complete	ĺ		
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		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 employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):		P	
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			x
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	28c		Х
29	"Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
50	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
02	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	-		
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				[V]
	Check if Schedule O contains a response or note to any line in this Part V			X
	5		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  13	-	0.1	
b	Enter the manuel of Forms w-2d moldded in line 1a. Enter of involutione			44
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4-		
02222	(gambling) winnings to prize winners? 4 12-23-20	1c Form	990	(2020)
00200	7 IE-CV-CV	1 0111		(-UZU)

47-1036008

Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filled for the calendar year ending with or within the year covered by this return.    Fill all basts on its reported on line 22, did the organization file all required federal employment tax returns?   Note: If the sum of lines 1s and 2 is ignetate than 250, you may be required to _effe (see instructions)   San Did the organization have unleaded business gross income of \$1,000 or more during the year?   San Did the organization have unleaded business gross income of \$1,000 or more during the year?   San Did the organization have unleaded business gross income of \$1,000 or more during the year?   San Viria Christian	Par	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
filled for the calendary avan ending with or within the year covered by this return  Note: If the sum of lines is a and 2a is greater than 250, you may be required to g-dig see instructions)  8				Yes	No
If at least one is reported on line 2a, did the organization file at required federal employment tax returns?  30 bit the organization have unified the units of the provision o	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-rise (see instructions)  a Did the organization have united business greas income of \$1,000 or more during the year?  b if "Yes," has it filed a Form 990-T for this year? if "No" to fire 3b, provide an explanation on Schedule O  de X  A at any time during the calendar year, did the organization have an interest is, or a signature or other authority over, a financial account? (account in a foreign country (such as a bark account, securities account, or other financial account)?  b if "Yes," enter the name of the foreign country (such as a bark account, securities account, or other financial accounts (FBAR).  See instructions for filing requirements for Finc10 Form 1114, Report of Foreign Bank and Financial Accounts (FBAR).  50 West the organization as party to a prohibited tax shelter transaction at any time during the tax year?  51 West to line 6a or 5b, did the organization file Form 8888-17  52 No Death organization shelf were not tax deductible as charitable contributions?  53 Death organization include with every solicitation an express statement that such contributions or gifts were not tax deductible on the even organization and explanation and explanation and explanation shelf than year explanation and explanation explanation and explanation and explanation and explanation and explanation and explanation and explanation explanation and explanation explanation and explanation and explanation and explanation explanation and explanation and explanation explanation and explanation and explanation and exp		filed for the calendar year ending with or within the year covered by this return	0		
3a Du the organization have unrelated business gross income of \$1,000 or more during the year?  5b if 1'Yes, 'has it filed a Form 990-Tor fith is year? 'yea' to the 3b, yourside an exploration on Schedule O  5ch if 1'Yes,' and it filed a Form 990-Tor fith is year? 'yea' to the 3b, yourside an exploration on Schedule O  5ch if 1'Yes,' and it filed a Form 990-Tor fith is year? 'yea' to the 3b, yourside an exploration on Schedule O  5ch if 1'Yes,' and it filed a Form 990-Tor fith is year?  5ch if 1'Yes' a filed promise of the organization is explicit of the year to the filed and your post year of the year to line 5 are 5b, if it is explicitly an explicit of the year to line 5 are 5b, if it is explicitly an explicit of the year to line 5 are 5b, if it is explicitly an explicit on any contributions of the organization the organization file form 88872.  6c if 'wes' to line 5a or 5b, did the organization file from 888672.  6d if 'wes' to line 5a or 5b, did the organization file from 888672.  6d if 'wes' to line 5a or 5b, did the organization the organization file form 88873.  6d if 'wes' to line 5a or 5b, did the organization file from 88873.  6d if 'wes' to line 5a or 5b, did the organization file from 88873.  6d if 'wes' indicate the number of the organization file from 88873.  6d if 'wes' indicate the number of Forms 8282 filed during the year.  6d if 'wes' indicate the number of Forms 8282 filed during the year.  7d if 'wes' indicate the number of Forms 8282 filed during the year.  8d if 'wes' indicate the number of Forms 8282 filed during the year.  9 bid the organization exceived an contribution of qualified intelectual property, did the organization file Form 88873.  8d if 'wes' indicate the number of Forms 8282 filed during the year.  9 bid the organization for year year.  10 bid the organization samilatining donor advised funds. Did adonor advised fund anniationed by the sponsoring organizations make a dis	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
3a Du the organization have unrelated business gross income of \$1,000 or more during the year?  5b if 1'Yes, 'has it filed a Form 990-Tor fith is year? 'yea' to the 3b, yourside an exploration on Schedule O  5ch if 1'Yes,' and it filed a Form 990-Tor fith is year? 'yea' to the 3b, yourside an exploration on Schedule O  5ch if 1'Yes,' and it filed a Form 990-Tor fith is year? 'yea' to the 3b, yourside an exploration on Schedule O  5ch if 1'Yes,' and it filed a Form 990-Tor fith is year?  5ch if 1'Yes' a filed promise of the organization is explicit of the year to the filed and your post year of the year to line 5 are 5b, if it is explicitly an explicit of the year to line 5 are 5b, if it is explicitly an explicit of the year to line 5 are 5b, if it is explicitly an explicit on any contributions of the organization the organization file form 88872.  6c if 'wes' to line 5a or 5b, did the organization file from 888672.  6d if 'wes' to line 5a or 5b, did the organization file from 888672.  6d if 'wes' to line 5a or 5b, did the organization the organization file form 88873.  6d if 'wes' to line 5a or 5b, did the organization file from 88873.  6d if 'wes' to line 5a or 5b, did the organization file from 88873.  6d if 'wes' indicate the number of the organization file from 88873.  6d if 'wes' indicate the number of Forms 8282 filed during the year.  6d if 'wes' indicate the number of Forms 8282 filed during the year.  7d if 'wes' indicate the number of Forms 8282 filed during the year.  8d if 'wes' indicate the number of Forms 8282 filed during the year.  9 bid the organization exceived an contribution of qualified intelectual property, did the organization file Form 88873.  8d if 'wes' indicate the number of Forms 8282 filed during the year.  9 bid the organization for year year.  10 bid the organization samilatining donor advised funds. Did adonor advised fund anniationed by the sponsoring organizations make a dis		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	tie		E A L
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly over, a financial accountly over, a financial accountly over, a financial accountly over, a financial account in a foreign country where the common of the foreign country where the security of the financial accounts (FBAR).  5b If Yes,* enter the name of the foreign country where the security of the property of Foreign Bank and Financial Accounts (FBAR).  5c Was the organization apparty to a prohibited tax shelter transaction at any time during the tax year?  5c If Yes to line 5a or 5b, did the organization file Form 88617?  5c If Yes to line 5a or 5b, did the organization file Form 88617?  5d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  5d If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions and partly for goods and services provided to the payor?  7d Organizations that may receive deductible contributions under section 170(c).  8 If Yes,* indicate that may receive deductible contributions under section 170(c).  9 If Yes,* indicate the organization notify the donor of the value of the goods or services provided?  7 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to tile Form 8882?  8 If Yes,* indicate the number of Forms 8282 filed during the year  9 If the organization deceived a contribution of cushified intellectual property, did the organization file a Form 1098-07  7b A Yes,* indicate the number of Forms 8282 filed during the year  9 If the organization received a contribution of cushified intellectual property, did the organization file a Form 1098-07  8 Sponsoring organization sell, exchange to the property of the organization file form 1	За		_	Х	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly over, a financial accountly over, a financial accountly over, a financial accountly over, a financial account in a foreign country where the common of the foreign country where the security of the financial accounts (FBAR).  5b If Yes,* enter the name of the foreign country where the security of the property of Foreign Bank and Financial Accounts (FBAR).  5c Was the organization apparty to a prohibited tax shelter transaction at any time during the tax year?  5c If Yes to line 5a or 5b, did the organization file Form 88617?  5c If Yes to line 5a or 5b, did the organization file Form 88617?  5d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  5d If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions and partly for goods and services provided to the payor?  7d Organizations that may receive deductible contributions under section 170(c).  8 If Yes,* indicate that may receive deductible contributions under section 170(c).  9 If Yes,* indicate the organization notify the donor of the value of the goods or services provided?  7 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to tile Form 8882?  8 If Yes,* indicate the number of Forms 8282 filed during the year  9 If the organization deceived a contribution of cushified intellectual property, did the organization file a Form 1098-07  7b A Yes,* indicate the number of Forms 8282 filed during the year  9 If the organization received a contribution of cushified intellectual property, did the organization file a Form 1098-07  8 Sponsoring organization sell, exchange to the property of the organization file form 1	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X	
b if "Yes," either the name of the foreign country					
See instructions for filing requirements for FinCEN Form 114. Report of Foreign Bank and Financial Accounts (FBAR).  8 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  8 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  8 Does the organization has annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charatable contributions?  8 If Yeas, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  9 Organizations that many receive deductible contributions under section 170(c).  9 Did the organization receive a payment in excess of \$75 made party as a contribution of property for which it was required to the payor?  10 Did the organization necelve any general property of the property for which it was required to the Form 8282?  11 Feys," indicate the number of Forms 8282 filed during the year  12 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098 C?  13 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098 C?  14 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098 C?  15 Did the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxabile distributions under section 4966?  15 Did the sponsoring organization make any taxabile distributions under section 4966?  16 Did the sponsoring organization make any taxabile distributions under section 4966?  17 Section 501(C)17 organizations. Enter:  18 Section 501(C)17 organizations make any taxabile distributions under section 4968?  19 Section 501(C)17 organizations. Enter:  19 Did the sponsoring organization make any		financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "Yes" to line Sa or Sb, did the organization file Form 88861?  5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  5c A  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly sa a contribution and partly for goods and services provided to the payor?  5 b If "Yes," indicate the number of Forms 8282 filed during the year  6 b If "Yes," indicate the number of Forms 8282 filed during the year  7 c D If "Yes," indicate the number of Forms 8282 filed during the year  8 b If If Yes, "indicate the number of Forms 8282 filed during the year  9 b If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  10 if the organization raceived a contribution of qualified intellectual property, did the organization file Form 8899 as required?  11 if the organization have excess business holdings at any time during the year?  12 Sponsoring organization make any taxable distributions unders section 4966?  13 Sponsoring organization make any taxable distributions unders section 4966?  14 Section 501(c)(12) organizations. Enter:  15 Indicate sponsoring organization make any taxable distributions unders section 4966?  16 Gross receive from them.)  17 Section 501(c)(12) organizations. Enter:  18 Indicate the amount of tex exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  19 Section 501(c)(12) organizations. Enter:  19 Gro	b	If "Yes," enter the name of the foreign country SEE SCHEDULE O			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelfer transaction?  6 If "Yes" to line 5a or 5b, did the organization file Form 8886F17  6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 Did the organization network a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 Did the organization network a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 Did the organization network a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282?  7 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282?  7 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7 Exposure of the organization, during the year, pay premiums, directly or indirectly, to pay personal benefit contract?  7 Did the organization creaved a contribution of cars, boats, simplense, or other vehicles, did the organization flae Form 1098-C?  8 Sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization sall excitations and payments for more organization flae and capital contributions in		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		LEE!	
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7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7		were not tax deductible?	6b		
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b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  c Enter the amount of reserves on hand  13c  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  14b  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  15 X  If "Yes," see instructions and file Form 4720, Schedule N.	9				18
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  c Enter the amount of reserves on hand  13c  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  14b  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  15 X  If "Yes," see instructions and file Form 4720, Schedule N.	а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a 5 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b 15 Fyes," enter the amount of tax-exempt interest received or accrued during the year 12b 15 Section 501(c)(29) qualified nonprofit health insurance issuers. a 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. 15 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13c 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X 15 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X	b		-4		
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If "Yes," see instructions and file Form 4720, Schedule N.  16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  16 X		excess parachute payment(s) during the year?	15		X
	16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
			188		

Form 990 (2020)
ANNE RAY FOUNDATION
47-1036008 Pag
Part VI Governance, Management, and Disclosure
For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Sec	tion A. Governing Body and Management	· · · · · · · · · · · · · · · · · · ·					
-	don'th do to ming body and management					Yes	No
12	Enter the number of voting members of the governing body at the end of the tax year	1a		5	- E 110	163	140
164	If there are material differences in voting rights among members of the governing body, or if the governing	10					
	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	16		4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	_		,	133		
~					2	Х	
2	officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the			oion			
3					2		x
	of officers, directors, trustees, or key employees to a management company or other person?				3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9						X
5	Did the organization become aware during the year of a significant diversion of the organization's ass				5	Х	Α
6	Did the organization have members or stockholders?				6	Λ	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or approximately a second of the				_	v	
	more members of the governing body?				7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					17	
	persons other than the governing body?				7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by t	he following	<b>]</b> :	24.17		
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read						
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenu	e Code.)				
						Yes	
	Did the organization have local chapters, branches, or affiliates?				10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apte	rs, affiliate:	S,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	y bef	ore filing th	ie form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to co	nflicts?		12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? $\ensuremath{\mathit{If}}$ "Y	Yes, "	describe				
	in Schedule O how this was done				12c	X	
13	Did the organization have a written whistleblower policy?				13	X	
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 approva	al by i	ndepende	nt			1
	$persons, \ comparability \ data, \ and \ contemporaneous \ substantiation \ of the \ deliberation \ and \ decision?$					118	(Tab)
а	The organization's CEO, Executive Director, or top management official				15a	Х	
b	Other officers or key employees of the organization		·		15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				3.00		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment	with a			4/5	
	taxable entity during the year?				16a	Х	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its	participati	on			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nizatio	on's				
	exempt status with respect to such arrangements?				16b	Х	
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶MN						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 99	00-T (Section	on 501(c)(3)	s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website Another's website X Upon request Other (explain	n on S	Schedule C	O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co			,	d finan	cial	
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks a	nd records	· •			
	NAOMI HORSAGER - 952-540-4053						

20	State the name, address, and telephone number of the person who possesses the organization's books and records	
	NAOMI HORSAGER - 952-540-4053	
	6889 ROWLAND ROAD, EDEN PRAIRIE, MN 55344	

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

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

X

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, 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 instructions for the order in which to list the persons above.

Check this box if neither the organization	n nor any related	orga	niza	tion	con	nper	nsat	ted any current officer, di	rector, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	itior more	than	one	Reportable	Reportable	Estimated
	hours per week	box	, unle	ss pe	rson i	is boti or/trus	h an	compensation	compensation from related	amount of other
	(list any	10				T	Ė	the	organizations	compensation
	hours for	direc				P		organization	(W-2/1099-MISC)	from the
	related	66 01	stee			nsate		(W-2/1099-MISC)	(** = ** * * * * * * * * * * * * * * * *	organization
	organizations	trust	nal tru		оуее	adwo				and related
	below	Individual trustee or director	Institutional trustee	rer	Key employee	Highest compensated employee	Former			organizations
	line)	Ind	Isul	Officer	Key	Hig	For			
(1) CHRISTINE MORSE	7.00									
BOARD CHAIR	6.00	Х		<u> </u>	_	_		66,500.	56,500.	0.
(2) PAUL BUSCH	50.00									
DIRECTOR/PRES & CEO		X		X		_		0.	1,295,780.	155,210.
(3) RIGHT REVEREND JOHN CHANE	4.00									
DIRECTOR	3.00	X						51,500.	37,500.	0.
(4) WIN NEUGER	3.00									
DIRECTOR	3.00	Х						39,000.	41,000.	0.
(5) STUART TOBISMAN	4.00									
DIRECTOR	3.00	X						0.	0.	0.
(6) NAOMI HORSAGER	50.00									
TREASURER/CFO				X				0.	547,002.	113,362.
(7) HEATHER KUKLA	50.00									
SECRETARY/VP & GEN COUNSEL				X				0.	546,739.	111,908.
(8) TERRENCE MEERSMAN	50.00									
VP OF PROGRAMS					Х			0.	568,436.	103,392.
(9) SHAWN WISCHMEIER	50.00									
CHIEF INVESTMENT OFFICER					Х			0.	1,501,714.	245,056.
(10) MICHAEL RUETZ	50.00									
DEPUTY CIO/INVESTMENT DIR.	-					X		0.	836,558.	151,856.
(11) MATTHEW MINNIS	50.00									
INVESTMENT DIRECTOR						X		0.	611,964.	114,619.
(12) RODNEY OVERCASH	50.00									
INVESTMENT DIRECTOR						Х		0.	711,491.	134,401.
(13) TRICIA SCRIVNER	50.00						1			
INVESTMENT DIRECTOR						х		0.	701,266.	121,780.
(14) CHRISTOPHER VOGT	50.00									
INVESTMENT DIRECTOR						Х		0.	691,353.	133,399.
		Т								
		1								
		-								
		-								
E'	1	1	<u> </u>			<u> </u>		1		

Par	t VII Section A. Officers, Directors, Trus	tees Key Emr	dov	200	and	l Hi	ahes	t C	omnensated Employee	(continued)			
	(A)	(B)	,,,			) ()	91100		(D)	(E)		(F)	
	Name and title	Average			Pos		1		Reportable	Reportable		timate	
	Name and title	hours per					than o		compensation	compensation		nount	
		week					r/trus		from	from related	ai	other	Oi
		(list any	tor						the	organizations	com	pensa	tion
		hours for	direc				-0		organization	(W-2/1099-MISC)		om th	
		related	36 OF	stee			Sate		(W-2/1099-MISC)	()		anizat	
		organizations	ruste	at tru		yee	mpe		(**************************************		_	d relat	
		below	dual	ution	_	mplo	st co	50			orga	anizati	ons
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former					
								ļ					
							-						
					-	_							
	Subtotal								157,000.	8,147,303.	1,	384,	
С	Total from continuation sheets to Part VII	, Section A		· 1					0.	0.			0.
d	Total (add lines 1b and 1c)								157,000.	8,147,303.	1,	384,	983.
2	Total number of individuals (including but no	ot limited to the	ose	liste	d ab	ove	) wh	o re	ceived more than \$100,	000 of reportable			
	compensation from the organization		_										0
												Yes	No
3	Did the organization list any former officer,			ey e	mpl	oye	e, or	higl	hest compensated empl	oyee on			
	line 1a? If "Yes," complete Schedule J for se										3		Х
4	For any individual listed on line 1a, is the su			•						0			- 2
	and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	dule	J fo	or such individual		4	Х	
5	Did any person listed on line 1a receive or a	ccrue compen	satio	on fr	om :	any	unre	elate	d organization or individ	lual for services	1.00		9.
	rendered to the organization? If "Yes." com	olete Schedule	J.fc	or st	ich r	ers	on .				5		Х
Sec	tion B. Independent Contractors												

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

(A) Name and business address	(B) Description of services	(C) Compensation
MARGARET A. CARGILL FOUNDATION		
6889 ROWLAND ROAD, EDEN PRAIRIE, MN 55344	SHARED SERV EXP REIMBURSEMENT	23,246,755.
CHILTON INVESTMENT COMPANY, LLC		
1290 E MAIN STREET, STAMFORD, CT 06902	INVESTMENT MANAGEMENT	1,144,954.
RECORD CURRENCY MGMT, MORGAN HOUSE MADEIRA		
WALK, WINDSOR, UNITED KINGDOM SL4 1EP	INVESTMENT MANAGEMENT	843,718.
FISHER ASSET MANAGEMENT LLC		
5525 NW FISHER CREEK DRIVE, CAMAS, WA 98607	INVESTMENT MANAGEMENT	733,735.
BLACKROCK		
400 HOWARD STREET, SAN FRANCISCO, CA 94105	INVESTMENT MANAGEMENT	584,052.
2 Total number of independent contractors (including but not limited	to those listed above) who received more than	PART PART
\$100,000 of compensation from the organization	20	
The state of the s		000

Form 990 (2020) ANNE RAY FO

			Check if Schedule O contains a response of	or note to any line	e in this Part VIII			
			Cricol ii Coricadio O Coritaino a response t	or mote to any line	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded
						function revenue	business revenue	from tax under sections 512 - 514
		_						360110113 312 - 314
Contributions, Gifts, Grants and Other Similar Amounts	1		Federated campaigns 1a					
Gra			Membership dues 1b					
ts, An			Fundraising events 1c					
ia i			Related organizations 1d					
ıs,			Government grants (contributions) 1e					
ti S		f	All other contributions, gifts, grants, and					
ibu			similar amounts not included above 1f					
dit		g	Noncash contributions included in lines 1a-1f 1g \$					
<u>S E</u>		h	Total. Add lines 1a-1f					
				Business Code				
ø	2	а						
Ž.		b						
Se		С						
am		d						
Program Service Revenue		е						
Pro		f	All other program service revenue					
			Total. Add lines 2a-2f	<b></b>			CONTRACTOR	
	3		Investment income (including dividends, interes					
			other similar amounts)		67,180,937.		660,531.	66,520,406.
	4		Income from investment of tax-exempt bond pr					
	5		Royalties	1 1				
			(i) Real	(ii) Personal	resemble se	MRS THE WITH	15545501	rnivales Early
	6	2	Gross rents 6a	(.,)				
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)  Gross amount from sales of (i) Securities	(ii) Other	Estimpendonio			
	-	а	0.000 0.110 0.110 0.110 0.110	(ii) Other				
			accord cards train inventory					
4)			Less: cost or other basis and sales expenses 7b 1908246531.					
Other Revenue								
eve					265 007 501		4 212 920	360 073 743
ä			Net gain or (loss)		365,087,581.		4,213,839.	360,873,742.
the	8		Gross income from fundraising events (not					
0			including \$ of					
			contributions reported on line 1c). See				美电荷性 顶	
			Part IV, line 18					
	1		Less: direct expenses 8b				HWITH ASSET	
	l.		Net income or (loss) from fundraising events		The second second			
	9	а	Gross income from gaming activities. See			A A STATE OF THE S		
			Part IV, line 19					
		b	Less: direct expenses 9b					
		С	Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10a				1.75	
		b	Less: cost of goods sold 10b					
			Net income or (loss) from sales of inventory	<b>&gt;</b>				
"				Business Code				
one	11	а	OTHER INCOME	900099	-41,640,188.		-4,447,058.	-37,193,130.
Miscellaneous Revenue		b						
ella		С						
lisc		d	All other revenue					
2			Total. Add lines 11a-11d		-41,640,188.	Malakasan Itali		
	12		Total revenue. See instructions	<b>&gt;</b>	390,628,330.	0.	427,312.	390,201,018.

# Form 990 (2020) ANNE RAY FOUNDATION Part IX Statement of Functional Expenses

Check if Schedule O contains a responsion not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
		expenses	general expenses	expenses
<ol> <li>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</li> </ol>	128,707,710.	128,707,710.		
2 Grants and other assistance to domestic	120,101,110.	120,707,710.		
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors,				
	1,600,671.	1,207,814.	392,857.	
trustees, and key employees  Compensation not included above to disqualified	1,000,071.	1,207,014.	372,037.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and				
narrana described in eastion (OCO/a)/O)/D)				
persons described in section 4958(c)(3)(B)	10,292,408.	5,766,866.	4,525,542.	
7 Other salaries and wages	10,272,400.	3,700,000.	4,323,342.	
Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	3,288,115.	2,065,812.	1 222 202	•
9 Other employee benefits	3,200,115.	2,005,012.	1,222,303.	
0 Payroll taxes				
1 Fees for services (nonemployees):				
a Management	500 640	101 255	200 002	
b Legal	509,648.	121,355.	388,293.	
c Accounting	161,852.	66,795.	95,057.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17		A PSTERNISHED TOTAL		
f Investment management fees	7,076,148.		7,076,148.	
g Other. (If line 11g amount exceeds 10% of line 25,				
column (A) amount, list line 11g expenses on Sch O.)	2,984,193.	1,311,164.	1,673,029.	
2 Advertising and promotion				
3 Office expenses	99,975.	78,311.	21,664.	
4 Information technology	388,015.	310,859.	77,156.	
5 Royalties				
6 Occupancy	1,597,248.	1,206,893.	390,355.	
7 Travel	136,695.	68,666.	68,029.	
8 Payments of travel or entertainment expenses				
for any federal, state, or local public officials				
9 Conferences, conventions, and meetings	129,169.	108,693.	20,476.	
0 Interest				
1 Payments to affiliates				
2 Depreciation, depletion, and amortization				
3 Insurance	89,415.	69,455.	19,960.	
Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
amount, list line 24e expenses on Schedule O.)  a GRANT DISCOUNT	359,403.	359,403.		
DUDG & GUDGGDTDWTGNG	277,555.	172,809.	104,746.	
DECRUTATIO	150,579.	129,845.	20,734.	
	90,673.	127,043.	90,673.	
	50,466.	38,877.	11,589.	
e All other expenses	157,989,938.	141,791,327.		
Total functional expenses. Add lines 1 through 24e	131,303,330.	141,/31,321.	16,198,611.	
Joint costs. Complete this line only if the organization				
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720)				

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year Cash - non-interest-bearing 1 26,214,910. 14,492,974. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 30,286. 458,649. Accounts receivable, net 4 4 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 Assets Inventories for sale or use 8 5,326. 935,000. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 44,637. basis. Complete Part VI of Schedule D 10a 44,637. 0. b Less: accumulated depreciation 10b 10c 569,480,736. 580,807,420. Investments - publicly traded securities 11 11 3,871,602,826. 4,226,278,228. 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 940,878. 15 Other assets. See Part IV, line 11 15 4,468,703,325. 4,822,543,908. Total assets. Add lines 1 through 15 (must equal line 33) 16 16 13,639,714. 14,201,966. 17 Accounts payable and accrued expenses 17 91,227,113. 90,087,298. 18 Grants payable 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, 22 Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 104,866,827. 104,289,264. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 4,363,836,498. 4.718.254.644. 27 Net assets without donor restrictions 27 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 30 30 Retained earnings, endowment, accumulated income, or other funds 31 31 4,718,254,644. 4,363,836,498. 32 Total net assets or fund balances 32 4,468,703,325. 4,822,543,908. Total liabilities and net assets/fund balances

Form 990 (2020)

Form	1990 (2020) ANNE RAY FOUNDATION	47-103	36008	Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	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	390	628,	330.
2	Total expenses (must equal Part IX, column (A), line 25)	2	157	989,	938.
3	Revenue less expenses. Subtract line 2 from line 1	3	232	638,	392.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,363	836,	498.
5	Net unrealized gains (losses) on investments	5	95	493,	379.
6	Donated services and use of facilities	6			
7	Investment expenses	7	15	728,	247.
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	10	558,	128.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	4,718	254,	644.
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		3.5		TIS:
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule (	Э.	724	MIL	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			8-3
	separate basis, consolidated basis, or both:		7100		37
	Separate basis Consolidated basis Both consolidated and separate basis		7972		
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			1
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				1845
C	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	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.		1	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or guidite, evoluin why on Schodule O and describe any stone taken to undergo such audite		26		1

Form **990** (2020)

### SCHEDULE A

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

### **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

Open to Public Inspection

Employer identification number

ANNE RAY FOUNDATION 47-1036008 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). X 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. X Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. X Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations 16 Provide the following information about the supported organization(s) (iv) is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) ARC NATIONAL 53-0196605 Х 24,115,500, 0. 7 41-0711603 Х 1,665,000. 0. 2 0. BEREA COLLEGE 61-0444650 X 15,977,246. IDYLLWILD 95-1801279 2 Х 2,740,000. 0. KPBS 33-0373293 X 2,060,000. 0. 131,141,928. 0. Total

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	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						
1	Takat Add Gara 4 Abarrach 2						
5	The portion of total contributions					=3,2=1,2,1,1,1,5	
5	by each person (other than a						
	governmental unit or publicly				T 0-1		
	supported organization) included		ASSET IN BASE	A WALLEY			
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
c							
$\overline{}$	Public support. Subtract line 5 from line 4.						
	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4	(4) 2010	(2) 2017	(0) 2010	(4) 2010	(0) 2020	(i) rotal
	Gross income from interest,						
0							
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
_	Net income from unrelated business						
9							
	activities, whether or not the						
40	business is regularly carried on				-		
10	Other income. Do not include gain						
	or loss from the sale of capital						
44	assets (Explain in Part VI.)		KILLEY I. EVILLE			DOLLY/APRILL LE	
11		eta (aga instructi	200			12	
12	First 5 years. If the Form 990 is for the	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	fourth or fifth tox			
13	organization, check this box and stop						
Sec	ction C. Computation of Publi						
	Public support percentage for 2020 (I			column (fl)		14	%
	Public support percentage from 2019					15	%
	33 1/3% support test - 2020. If the						
	stop here. The organization qualifies						
Ŀ	33 1/3% support test - 2019. If the						
	and stop here. The organization qual						
17:	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te					9	
L	10% -facts-and-circumstances test	0				17a and line 15 is 1	
í.							0,0 01
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
1Ω	Private foundation. If the organization						
10	Treate touridation. If the organization	ni giù not check a	DOX OIT INTO TO, TO	a, 100, 17a, 01 17		adula A (Form 990	

# Schedule A (Form 990 or 990-EZ) 2020 ANNE RAY FOUNDATION 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that	-					
0	are not an unrelated trade or bus-						
	iness under section 513						
А	Tax revenues levied for the organ-						
4							
	ization's benefit and either paid to						
-	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons					1	
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
C	Add lines 7a and 7b						
	Public support, (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨 📗	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income		-				
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						-
	or loss from the sale of capital						
12	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					5047.70	
14	First 5 years. If the Form 990 is for the	a organization s til	rst, secona, tnira,	fourth, or fifth tax y	year as a section :	out(c)(3) organizatio	n,
Sac	check this box and stop here ction C. Computation of Public	c Support Per	centage		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
				(6)		45	0/
	Public support percentage for 2020 (lin			:Olumn (1))		15	%
	Public support percentage from 2019 ction D. Computation of Inves				<u> </u>	16	%
				10 (0)		47	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
19a	a 33 1/3% support tests - 2020. If the	-					' is not
	more than 33 1/3%, check this box an						
t	33 1/3% support tests - 2019. If the						nd
	line 18 is not more than 33 1/3%, chec						
20	Private foundation. If the organization	n did not check a	box on line 14, 19:	a, or 19b, check th	nis box and see in	structions	

Page 4

### Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

- 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")? |f "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?
- 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

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

- T	Yes	N
1	Х	55
		Į
2	T Fail	X
За		X
3b		
3с		
4a	T. Ta	X
44		
4b		
		V
4c		
5a	968	Х
5b		
5c	2018	
	411	v
6		X
7		X
14 2		Ž.
8		Х
Oc		X
9a		
9b	45,743	Х
9с		Х
		100
10a_	Х	5.0
10b		X

Pa	rt IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		in the	Tell,
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and		- 16	
	11c below, the governing body of a supported organization?	11a		X
	A family member of a person described in line 11a above?	11b		Х
C	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	J. 7774		10
Soo	detail in Part VI. tion B. Type I Supporting Organizations	11c		Х
360	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)	L.EV		
	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	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  Did the organization operate for the benefit of any supported organization other than the supported	Value de	1000	WH 1
-	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	200		
	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	U-1121		
	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	River.		
	the supported organization(s).	1		
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		385	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	dev =		
	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?	11	Х	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	o de la		
	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		Х
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			4
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	-	х	718
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3	Λ.	
1				
a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions  The organization satisfied the Activities Test. Complete line 2 below.	}.		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	etruction	c)	
2	Activities Test. Answer lines 2a and 2b below.	Struction	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1 3040		Line I
	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,			5
	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 in 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	with.		
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			18
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			ALT.
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	W. C.		100
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			EV
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

- T	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orgar	nizations	rage o
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust on	Nov. 20, 1970 ( explain in Pa	rt VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must c	omplete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	30,012,797.	0.
2	Recoveries of prior-year distributions	2	1,908,408.	0.
3	Other gross income (see instructions)	3	137,585,392.	0.
4	Add lines 1 through 3.	4	169,506,597.	0.
5	Depreciation and depletion	5	0.	0.
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6	73,598,687.	0.
7	Other expenses (see instructions)	7	0.	0.
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	95,907,910.	0.
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	LOT.		
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a	1,434,398,616.	0.
	Average monthly cash balances	1b	80,188,998.	0.
	Fair market value of other non-exempt-use assets	1c	2,659,915,766.	0.
	Total (add lines 1a, 1b, and 1c)	1d	4,174,503,380.	0.
	Discount claimed for blockage or other factors	TATAL		
	(explain in detail in Part VI):	193		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	0.	0.
3	Subtract line 2 from line 1d.	3	4,174,503,380.	0.
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4	62,617,551.	0.
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	4,111,885,829.	0.
6	Multiply line 5 by 0.035.	6	143,916,004.	0.
7	Recoveries of prior-year distributions	7	1,908,408.	0.
8	Minimum Asset Amount (add line 7 to line 6)	8	145,824,412.	0.
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		95,907,910.
2	Enter 0.85 of line 1.	2		81,521,724.
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		145,824,412.
4	Enter greater of line 2 or line 3.	4		145,824,412.
5	Income tax imposed in prior year	5		0.
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		145,824,412.
7	Check here if the current year is the organization's first as a non-functionally	integrat	ed Type III supporting organiz	ation (see
	instructions).	-		

Schedule A (Form 990 or 990-EZ) 2020

	dule A (Form 990 or 990-EZ) 2020 ANNE RAY FOUNDATION	(a)(2) Cumparting Overage			-1036008	Page 1
Par		(a)(3) Supporting Organ	ilzations (contin	ued)		
	on D - Distributions				Current Ye	
1	Amounts paid to supported organizations to accomplish exe			1	131,1	41,928
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2	11 5	11 027
	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		3	11,5	11,837
	Amounts paid to acquire exempt-use assets			4		
	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
	Other distributions (describe in Part VI). See instructions.			6	140 6	F2 765
7	Total annual distributions. Add lines 1 through 6.			7	142,0	53,765
8	Distributions to attentive supported organizations to which the	ne organization is responsive			121 1	41 000
	(provide details in Part VI). See instructions.			8		41,928
9	Distributable amount for 2020 from Section C, line 6			9	145,8	24,412
10	Line 8 amount divided by line 9 amount			10		89.93
Section	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	ns	(iii) Distributal Amount for :	
1	Distributable amount for 2020 from Section C, line 6		AVERY HELD AND	8-14 <b>-</b> 8	145,8	24,412
	Underdistributions, if any, for years prior to 2020 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2020		With the William			
а	From 2015					F2 1 / / 3
b	From 2016					
С	From 2017					
d	From 2018					
е	From 2019 70,322,908.				ESTATION OF	
f	Total of lines 3a through 3e	70,322,908.				
q	Applied to underdistributions of prior years					
h	Applied to 2020 distributable amount			AG	70,3	22,908
i	Carryover from 2015 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			- 5V, .		2 //
4	Distributions for 2020 from Section D,		e gurana			
	line 7: \$ 142,653,765.			2: 24		
а	Applied to underdistributions of prior years			18	n steller	
b	Applied to 2020 distributable amount			37.03	75,5	01,504
С	Remainder. Subtract lines 4a and 4b from line 4.	67,152,261.		- 1		
5	Remaining underdistributions for years prior to 2020, if					
	any. Subtract lines 3g and 4a from line 2. For result greater			19		
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2020. Subtract lines 3h			(1)/9/		
	and 4b from line 1. For result greater than zero, explain in			Circ.		
	Part VI. See instructions.					
7	Excess distributions carryover to 2021. Add lines 3j		dvery, seil.		NEW HELE	
	and 4c.	67,152,261.				
8	Breakdown of line 7:					
а	Excess from 2016		1511 TEPHS			Mile.
	Excess from 2017					
	Excess from,2018					to tel
	Excess from 2019					u= 31
	Excess from 2020 67,152,261.	Turis 252 ustable H	S. Free Parent	3 114 1	Sesso per la	GIETTE !

Schedule A (Form 990 or 990-EZ) 2020

SCHEDULE A, PART IV, SECTION D, LINE 2

ANNE RAY FOUNDATION'S PRIMARY CHARITABLE ACTIVITY IS SUPPORTING ITS

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
DESIGNATED SUPPORTED ORGANIZATIONS, AS STATED IN ITS ARTICLES. THE
OFFICERS AND DIRECTORS OF ANNE RAY FOUNDATION MAINTAIN A CLOSE AND
CONTINUOUS WORKING RELATIONSHIP WITH THE OFFICERS, DIRECTORS OR
TRUSTEES OF THE DESIGNATED SUPPORTED ORGANIZATIONS. THIS IS DONE, IN
PART, BY ANNUAL MEETINGS THAT ANNE RAY FOUNDATION'S CEO AND CFO HAVE
WITH THEIR COUNTERPARTS AT EACH OF THE DESIGNATED SUPPORTED
ORGANIZATIONS. ADDITIONALLY, ANNE RAY FOUNDATION PROGRAM STAFF
COMMUNICATE ON A REGULAR BASIS WITH THEIR COUNTERPARTS AT THE
DESIGNATED SUPPORTED ORGANIZATIONS THROUGHOUT THE YEAR, FURTHER
SUPPORTING THE CLOSE AND CONTINUOUS WORKING RELATIONSHIP.
INFORMATION FROM ALL OF THESE COMMUNICATION CHANNELS, INCLUDING BOTH
CEO AND CFO VISITS, IS DOCUMENTED AND SIGNIFICANT UPDATES ARE SHARED
AMONG ANNE RAY FOUNDATION'S STAFF AND BOARD MEMBERS THROUGHOUT THE YEAR
ON A FORMAL AND INFORMAL BASIS.
SCHEDULE A, PART IV, SECTION D, LINE 3
THE DESIGNATED SUPPORTED ORGANIZATIONS ARE IN REGULAR AND CONTINUOUS
CONTACT WITH THE REPORTING ORGANIZATION. FOR EXAMPLE, THE DESIGNATED
SUPPORTED ORGANIZATIONS PROVIDE PERIODIC UPDATES DURING THE YEAR THAT
HIGHLIGHT THEIR CURRENT PRIORITIES AND UPCOMING SHORT-TERM AND
LONG-TERM NEEDS. THE DESIGNATED SUPPORTED ORGANIZATIONS ARE ASKED TO
PROVIDE INPUT ON OPPORTUNITIES TO IMPROVE THE EFFECTIVENESS OF THE
GRANTMAKING PRACTICES AT THE REPORTING ORGANIZATION AND TO SHARE
OPPORTUNITIES FOR FUNDING IN AREAS OF MUTUAL INTEREST THAT ARE EXPECTED
TO HAVE THE BEST POSSIBLE IMPACT ON THE COMMUNITIES SERVED BY THE
DESIGNATED SUPPORTED ORGANIZATIONS.

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
IN ADDITION TO HEARING FROM THE DESIGNATED SUPPORTED ORGANIZATIONS ON
THEIR STRATEGIC PRIORITIES AND CURRENT NEEDS, ANNE RAY FOUNDATION
SHARES RELEVANT INFORMATION ON IMPORTANT ASPECTS OF ANNE RAY
FOUNDATION'S OPERATIONS WITH EACH OF THE DESIGNATED SUPPORTED
ORGANIZATIONS. ANNUALLY, ANNE RAY FOUNDATION SHARES A SUMMARY
INVESTMENT POLICY STATEMENT AND AN INVESTMENT PERFORMANCE REPORT WITH
THE SUPPORTED ORGANIZATIONS TO PROVIDE INFORMATION ON THE KEY
INVESTMENT POLICIES THAT GOVERNED THE MANAGEMENT OF INVESTED FUNDS FOR
ANNE RAY FOUNDATION AND TO PROVIDE TRANSPARENCY AROUND HOW INVESTMENTS
ARE MANAGED. ANNE RAY FOUNDATION ALSO PROVIDES A COPY OF THE MOST
RECENTLY FILED FORM 990 AND AUDITED FINANCIAL STATEMENTS TO THE
DESIGNATED SUPPORTED ORGANIZATIONS ON AN ANNUAL BASIS ALONG WITH OTHER
RELEVANT ANNE RAY FOUNDATION DOCUMENTS.
INFORMATION SHARED BY ANNE RAY FOUNDATION GOES BEYOND WHAT IS REQUIRED
FOR THE NOTIFICATION REQUIREMENT AND IS INTENDED TO PROVIDE INFORMATION
TO SUPPORT THE SIGNIFICANT VOICE THAT THE DESIGNATED SUPPORTED
ORGANIZATIONS HAVE WITH RESPECT TO ANNE RAY FOUNDATION'S OPERATIONS,
GRANTMAKING, AND INVESTMENTS. ANNE RAY FOUNDATION ALSO PROACTIVELY ASKS
FOR INPUT FROM THE DESIGNATED SUPPORTED ORGANIZATIONS AS PART OF ITS
CLOSE AND CONTINUOUS WORKING RELATIONSHIP WITH EACH ORGANIZATION.
ANNE RAY FOUNDATION STRIVES TO ADDRESS THE NEEDS OF THE DESIGNATED
SUPPORTED ORGANIZATIONS IN A WAY THAT ALIGNS WITH ITS PHILANTHROPIC
MISSION AND INTENDS TO BE A RESOURCE TO THE DESIGNATED SUPPORTED
ORGANIZATIONS BOTH NOW AND INTO THE FUTURE.

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART IV, SECTION D, LINE 8
ANNE RAY FOUNDATION SEEKS TO ESTABLISH ATTENTIVENESS THROUGH
GRANTMAKING THAT IS SIGNIFICANT, EITHER ON A RELATIVE OR AN ABSOLUTE
BASIS, AND FOLLOWS INTERNALLY DEVELOPED GUIDELINES FOR ESTABLISHING
ATTENTIVENESS. ANNE RAY FOUNDATION PROVIDES FUNDING EARMARKED FOR A
SPECIFIC PROJECT OR PROGRAM THAT IS ALIGNED WITH ANNE RAY FOUNDATION'S
MISSION AND VALUES.
ADDITIONALLY, ANNE RAY FOUNDATION IS THE SINGLE LARGEST PRIVATE DONOR
TO MOST, IF NOT ALL, OF ITS DESIGNATED SUPPORTED ORGANIZATIONS. ANNE
RAY FOUNDATION REQUESTS WRITTEN CONFIRMATION FROM THE SUPPORTED
ORGANIZATIONS THAT ONE OR MORE EARMARKED PROGRAMS OR ACTIVITIES WOULD
CEASE OR BE MATERIALLY IMPACTED IF THERE WAS A CHANGE IN ANNE RAY
FOUNDATION'S FUNDING FOR THE PROGRAM OR ACTIVITY.

zation (iv) Is the organiz	ing supported organizations (conzation (v) Amount of monetary	(vi) Amount of
listed in your governing docum Yes N	nent?	other support
х	935,000.	
х	16,200,182.	
Х	1,760,000.	
x	22,700,000.	
Х	545,000.	
X	5,127,000.	
x	862,000.	
X	5,565,000.	
X	1,650,000.	
Х	27,045,000.	
х	2,195,000.	
_		
		4
	201/	
		84,584,182.

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

ANNE RAY FOUNDATION

Employer identification number 47-1036008

Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the					
	organization answered "Yes" on Form 990, Part IV, line 6.		,			
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2						
3	A					
4						
5		nat the assets held in donor advis	ed funds			
	are the organization's property, subject to the organization's exclusiv	e legal control?	Yes No			
6						
	for charitable purposes and not for the benefit of the donor or donor	advisor, or for any other purpose	conferring			
	impermissible private benefit?		Yes No			
Pa	art II Conservation Easements. Complete if the organization	n answered "Yes" on Form 990, I	Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization (chec	k all that apply).				
	Preservation of land for public use (for example, recreation or e	ducation) Preservation of	a historically important land area			
	Protection of natural habitat	Preservation of	a certified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualified cons	servation contribution in the form	of a conservation easement on the last			
	day of the tax year.		Held at the End of the Tax Year			
a	a Total number of conservation easements		2a			
b						
С	c Number of conservation easements on a certified historic structure in	cluded in (a)	2c			
d	d Number of conservation easements included in (c) acquired after 7/25	5/06, and not on a historic structu	ire			
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, released, e	xtinguished, or terminated by the	organization during the tax			
	year >					
4	Number of states where property subject to conservation easement is	s located >				
5	Does the organization have a written policy regarding the periodic mo	nitoring, inspection, handling of				
	violations, and enforcement of the conservation easements it holds?	***************************************				
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	of violations, and enforcing cons	servation easements during the year			
	<u> </u>					
7		iolations, and enforcing conserva	tion easements during the year			
	<b>&gt;</b> \$					
8	, , , , , , , , , , , , , , , , , , , ,					
	and section 170(h)(4)(B)(ii)?					
9	3	•				
	balance sheet, and include, if applicable, the text of the footnote to the	ne organization's financial stateme	ents that describes the			
Da	organization's accounting for conservation easements.  art III   Organizations Maintaining Collections of Art, H	listorical Treasures or Ot	her Similar Assets			
ra	Complete if the organization answered "Yes" on Form 990, Pa		nei Jilliai Assets.			
			ad balance about weeks			
18	a If the organization elected, as permitted under FASB ASC 958, not to of art, historical treasures, or other similar assets held for public exhibit					
	service, provide in Part XIII the text of the footnote to its financial state		,			
h	b If the organization elected, as permitted under FASB ASC 958, to rep					
D						
	art, historical treasures, or other similar assets held for public exhibiti	on, education, or research in furti	rerance of public service,			
	provide the following amounts relating to these items:		•			
	(i) Revenue included on Form 990, Part VIII, line 1		\$			
0	(ii) Assets included in Form 990, Part X  If the organization received or held works of art, historical treasures, a					
2			r gain, provide			
_	the following amounts required to be reported under FASB ASC 958  Beverye included on Form 990 Part VIII. line 1	9	<b>*</b>			
h	Revenue included on Form 990, Part VIII, line 1     Assets included in Form 990, Part X					
12						

Sche	edule D (Form 990) 2020 ANNE RAY F	OUNDATION				47-10360	0.8	Page 2
Pa	rt III Organizations Maintaining C	ollections of Ar	t, Historical T	reasures, or Othe	er Similar	Assets	(continu	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of th	e following that make	significant u	se of its		
	collection items (check all that apply):							
а	Public exhibition	(	Loan or e	xchange program				
b	Scholarly research	6	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further	the organization's exe	empt purpos	e in Part XII	l.	
5	During the year, did the organization solicit of	r receive donations	of art, historical tre	asures, or other simila	ar assets			
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's	collection?			/es	No
Pai	rt IV Escrow and Custodial Arran	gements. Compl	ete if the organizat	tion answered "Yes" o	n Form 990,	Part IV, line	9, or	
	reported an amount on Form 990, Pa	t X, line 21.				_		
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contribution	ons or other assets not	t included			
	on Form 990, Part X?					.,	/es	No
b	If "Yes," explain the arrangement in Part XIII							
						A	mount	
С	Beginning balance				1c			
d	Additions during the year	************			1d			
е	Distributions during the year	***********			1e			
f	Ending balance		,		1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or	custodial account liab	oility?	\	⁄es	No
	If "Yes," explain the arrangement in Part XIII.							
Pai	t V Endowment Funds. Complete	f the organization ar	swered "Yes" on	Form 990, Part IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three ye	ears back (	e) Four y	ears back
1a	0 0							
b	Contributions				-			
C	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs				1			
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column	(a)) held as:				
a	Board designated or quasi-endowment		%					
	Permanent endowment	%						
С	Term endowment	%						
	The percentages on lines 2a, 2b, and 2c sho							
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held	and administered for t	the organiza	tion		
	by:					Г		es No
	(i) Unrelated organizations			,,,,,,,,,	,,,		3a(i)	
							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization			?		L	3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Pal	t VI Land, Buildings, and Equipm			0. 5				
	Complete if the organization answere				-			
	Description of property	(a) Cost or o		, ,	Accumulate	d (d	l) Book	value
		basis (investr	nent) bas	is (other) d	epreciation			
	Land			102/4				
	Buildings							
	Leasehold improvements							
	Equipment		4 637		4.4.7	27		
	Other		4,637.		44,6	551.		0.

Schedule D (Form 990) 2020

Complete if the organization answered "Yes  (a) Description of security or category (including name of security)  1) Financial derivatives  2) Closely held equity interests  3) Other  (A) EQUITY FUNDS  (B) PRIVATE EQUITY FUNDS  (C) REAL ASSET FUNDS  (D) CREDIT FUNDS	(b) Book value -5,562,284.	(c) Method of valuation: Cost or en	nd-of-year market value
2) Closely held equity interests  3) Other  (A) EQUITY FUNDS  (B) PRIVATE EQUITY FUNDS  (C) REAL ASSET FUNDS		END-OF-YEAR MARKET VALUE	
2) Closely held equity interests  3) Other  (A) EQUITY FUNDS  (B) PRIVATE EQUITY FUNDS  (C) REAL ASSET FUNDS	1 377 532 999		
(A) EQUITY FUNDS (B) PRIVATE EQUITY FUNDS (C) REAL ASSET FUNDS	1 377 532 999		
(B) PRIVATE EQUITY FUNDS (C) REAL ASSET FUNDS	1 377 532 999		
(C) REAL ASSET FUNDS	_,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	END-OF-YEAR MARKET VALUE	
197	507,092,572.	END-OF-YEAR MARKET VALUE	
(D) CREDIT FUNDS	827,786,826.	END-OF-YEAR MARKET VALUE	
	1,251,773,400.	END-OF-YEAR MARKET VALUE	
(E) PRIVATE CREDIT FUNDS	267,654,715.	END-OF-YEAR MARKET VALUE	
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	4,226,278,228.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes	on Form 990, Part IV, line 1		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	·	ta ay alem y few lent militin	
Part IX Other Assets.			
Complete if the organization answered "Yes		1d. See Form 990, Part X, line 15.	
(a	n) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990. Part X. col. (B) lin	ne 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25	
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			1
(5)			
(6)			
(7)			
(8)			
_ (~)			
(9)			

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

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1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
	Total revenue, gains, and other support per audited financial statements	. 1	498,620,210.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ELE	
а	Net unrealized gains (losses) on investments 2a 95,493,37	9.	
b	Donated services and use of facilities 2b	550	
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	95,493,379.
	Subtract line 2e from line 1		403,126,831.
	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 15,728,24	7.	
b	Other (Describe in Part XIII.)  4b -28, 226, 74	8.	
	Add lines 4a and 4b	4c	-12,498,501.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	390,628,330.
Par	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses pe	r Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	. 1	144,202,064.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a	3417	
b	Prior year adjustments 2b	132	
	Other losses 2c		
	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	144,202,064.
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 15,728,24	7.	
b	Other (Describe in Part XIII.)  4b -1,940,37	3.	
	Add lines 4a and 4b	4c	13,787,874.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)		157,989,938.
	t XIII Supplemental Information.		
Provid	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, lin	e 4; Part X,	line 2; Part XI,
lines 2	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
PART	X, LINE 2:		
	4		
	X, LINE 2:  RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT		
ANNE	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT		
ANNE	4		
ANNE	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE		
ANNE	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT		
FROM	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE		
ANNE FROM	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE		
ANNE FROM AND,	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE  IS SUBJECT TO TAXES ON UNRELATED TRADE OR BUSINESS INCOME. ANNE RAY		
ANNE FROM AND,	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE		
ANNE FROM AND, RAY	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE  IS SUBJECT TO TAXES ON UNRELATED TRADE OR BUSINESS INCOME. ANNE RAY  ADOPTED GUIDANCE REGARDING THE RECOGNITION OF UNCERTAIN TAX POSITIONS.		
ANNE FROM AND, RAY	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE  IS SUBJECT TO TAXES ON UNRELATED TRADE OR BUSINESS INCOME. ANNE RAY		
ANNE FROM AND, RAY HAS	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE  IS SUBJECT TO TAXES ON UNRELATED TRADE OR BUSINESS INCOME. ANNE RAY  ADOPTED GUIDANCE REGARDING THE RECOGNITION OF UNCERTAIN TAX POSITIONS.  RAY BELIEVES IT HAS APPROPRIATE SUPPORT FOR UNRELATED TRADE OR		
ANNE FROM AND, RAY HAS	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE  IS SUBJECT TO TAXES ON UNRELATED TRADE OR BUSINESS INCOME. ANNE RAY  ADOPTED GUIDANCE REGARDING THE RECOGNITION OF UNCERTAIN TAX POSITIONS.		
ANNE FROM AND, RAY HAS ANNE BUSI	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE  IS SUBJECT TO TAXES ON UNRELATED TRADE OR BUSINESS INCOME. ANNE RAY  ADOPTED GUIDANCE REGARDING THE RECOGNITION OF UNCERTAIN TAX POSITIONS.  RAY BELIEVES IT HAS APPROPRIATE SUPPORT FOR UNRELATED TRADE OR  NESS POSITIONS AND, AS A RESULT, DOES NOT HAVE UNCERTAIN TAX POSITIONS		
ANNE FROM AND, RAY HAS ANNE BUSI	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE  IS SUBJECT TO TAXES ON UNRELATED TRADE OR BUSINESS INCOME. ANNE RAY  ADOPTED GUIDANCE REGARDING THE RECOGNITION OF UNCERTAIN TAX POSITIONS.  RAY BELIEVES IT HAS APPROPRIATE SUPPORT FOR UNRELATED TRADE OR		
ANNE FROM AND, RAY HAS ANNE BUSI	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE  IS SUBJECT TO TAXES ON UNRELATED TRADE OR BUSINESS INCOME. ANNE RAY  ADOPTED GUIDANCE REGARDING THE RECOGNITION OF UNCERTAIN TAX POSITIONS.  RAY BELIEVES IT HAS APPROPRIATE SUPPORT FOR UNRELATED TRADE OR  NESS POSITIONS AND, AS A RESULT, DOES NOT HAVE UNCERTAIN TAX POSITIONS		
ANNE FROM AND, RAY HAS ANNE BUSI	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE  IS SUBJECT TO TAXES ON UNRELATED TRADE OR BUSINESS INCOME. ANNE RAY  ADOPTED GUIDANCE REGARDING THE RECOGNITION OF UNCERTAIN TAX POSITIONS.  RAY BELIEVES IT HAS APPROPRIATE SUPPORT FOR UNRELATED TRADE OR  NESS POSITIONS AND, AS A RESULT, DOES NOT HAVE UNCERTAIN TAX POSITIONS		
ANNE FROM AND, RAY HAS ANNE BUSI	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE  IS SUBJECT TO TAXES ON UNRELATED TRADE OR BUSINESS INCOME. ANNE RAY  ADOPTED GUIDANCE REGARDING THE RECOGNITION OF UNCERTAIN TAX POSITIONS.  RAY BELIEVES IT HAS APPROPRIATE SUPPORT FOR UNRELATED TRADE OR  NESS POSITIONS AND, AS A RESULT, DOES NOT HAVE UNCERTAIN TAX POSITIONS		
ANNE FROM AND, RAY HAS ANNE BUSI THAT	RAY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT  INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE  ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAX. HOWEVER, ANNE  IS SUBJECT TO TAXES ON UNRELATED TRADE OR BUSINESS INCOME. ANNE RAY  ADOPTED GUIDANCE REGARDING THE RECOGNITION OF UNCERTAIN TAX POSITIONS.  RAY BELIEVES IT HAS APPROPRIATE SUPPORT FOR UNRELATED TRADE OR  NESS POSITIONS AND, AS A RESULT, DOES NOT HAVE UNCERTAIN TAX POSITIONS  HAVE A MATERIAL IMPACT ON THE CONSOLIDATED FINANCIAL STATEMENTS.		

Schedule D (Form 990) 2020 ANNE RAY FOUNDATION		47-1036008	Page 5
Schedule D (Form 990) 2020 ANNE RAY FOUNDATION  Part XIII   Supplemental Information (continued)			
INCOME	-176,486,086.		
INCOME FROM FLOWTHROUGH PASSIVE INVESTMENTS	148,259,338.		
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-28,226,748.		
PART XII, LINE 4B - OTHER ADJUSTMENTS:			
OTHER BOOK-TAX ADJUSTMENTS TO OTHER EXPENSES	-1,940,373.		
PART VIII, LINE 1			
BOOK VALUE OF FINANCIAL DERIVATIVES REFLECTS THE END	OF YEAR VALUE OF		
DODLIAN GUDDING DOGLETONG WALL BY BUT DEPORTING OF A	ANTGARTON		
FOREIGN CURRENCY POSITIONS HELD BY THE REPORTING ORGA	ANIZATION.		
<u></u>			

### SCHEDULE F (Form 990)

### Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Form 990, Part IV, line 14b.

Employer identification number

OMB No. 1545-0047

ANNE RAY FOUNDATION 47-1036008

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

agents, and in the region of in the region of in the region of in the region of independent contractors in the region of service(s) in the reg	United States.					
offices in the region offices in the region in the region of service(s) in the region of	3 Activities per Region. (T	he following Part	I, line 3 table ca	an be duplicated if additional space is r	needed.)	
PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA, 0 1 SERVICES SITE VISITS 5,2:  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 8 SERVICES SITE VISITS 54,4:  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 1 SERVICES SITE VISITS  CENTRAL AMERICAN AND THE CARIBBEAN 0 VALUE OF INVESTED ASSETS N/A 14121800:  EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BUMMA, CAMBODIA, 0 VALUE OF INVESTED ASSETS N/A 49,295,4:  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 VALUE OF INVESTED ASSETS N/A 243,392,4:  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3:  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	(a) Region	offices	employees, agents, and independent contractors	(by type) (such as, fundraising, program services, investments, grants to	is a program service, describe specific type	expenditures
BRUNEI, BURMA, CAMADOIA, O 1 SERVICES SITE VISITS 5,2:  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM O 8 SERVICES SITE VISITS 54,4:  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES O 1 SERVICES SITE VISITS 54,4:  CENTRAL AMERICAN AND THE CARIBBEAN O 0 VALUE OF INVESTED ASSETS N/A 14121800:  EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMADOIA, CAMADOIA, CAMADOIA, O 0 VALUE OF INVESTED ASSETS N/A 49,295,4:  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM O 0 VALUE OF INVESTED ASSETS N/A 243,392,4:  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES O 0 VALUE OF INVESTED ASSETS N/A 60,947,3: EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM O 0 VALUE OF INVESTED ASSETS N/A 60,947,3: EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	EAST ASIA AND THE					
CAMBODIA, 0 1 SERVICES SITE VISITS 5.2: EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 8 SERVICES SITE VISITS 54,41 NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 1 SERVICES SITE VISITS  CENTRAL AMERICAN AND THE CARIBBEAN 0 0 VALUE OF INVESTED ASSETS N/A 14121800: EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA, 0 0 VALUE OF INVESTED ASSETS N/A 49,295,41 EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 243,392,41 NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3 EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3 EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	PACIFIC - AUSTRALIA,					
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 8 SERVICES SITE VISITS 54,41 NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 1 SERVICES SITE VISITS  CENTRAL AMERICAN AND THE CARIBBEAN 0 0 VALUE OF INVESTED ASSETS N/A 14121800: AUSTRIA, BURMA, CAMBODIA, CAMBODIA	BRUNEI, BURMA,			PROGRAM & INVESTMENT		
TCELAND & GREENLAND)  - ALBANIA, ANDORRA, AUSTRIA, BELGIUM  0  8 SERVICES  SITE VISITS  54,41  NORTH AMERICA  CANADA AND MEXICO, BUT NOT THE UNITED  STATES  0  1 SERVICES  SITE VISITS  54,41  CENTRAL AMERICAN AND  THE CARIBBEAN  0  0 VALUE OF INVESTED ASSETS  N/A  14121800:  EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,  0  0 VALUE OF INVESTED ASSETS  N/A  49,295,41  EUROPE (INCLUDING ICELAND & GREENLAND)  - ALBANIA, ANDORRA, AUSTRIA, BELGIUM  0  0 VALUE OF INVESTED ASSETS  N/A  243,392,41  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED  STATES  0  0 VALUE OF INVESTED ASSETS  N/A  60,947,3  EUROPE (INCLUDING ICELAND & GREENLAND)  - ALBANIA, ANDORRA,  INVESTMENT MANAGEMENT	CAMBODIA,	0	1	SERVICES	SITE VISITS	5,210.
- ALBANIA, ANDORRA, AUSTRIA, BELGIUM  0 8 SERVICES SITE VISITS 54,41  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES  0 1 SERVICES SITE VISITS  54,41  PROGRAM & INVESTMENT  SITE VISITS  SITE VISITS  54,41  PROGRAM & INVESTMENT  SITE VISITS  SITE VISITS  SITE VISITS  54,41  PROGRAM & INVESTMENT  SITE VISITS  SITE VISITS  SITE VISITS  54,41  PROGRAM & INVESTMENT  SITE VISITS  SITE VISITS  SITE VISITS  SITE VISITS  SITE VISITS  14,41  PROGRAM & INVESTMENT  SITE VISITS  S	EUROPE (INCLUDING					
AUSTRIA, BELGIUM 0 8 SERVICES SITE VISITS 54,44 NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 1 SERVICES SITE VISITS  CENTRAL AMERICAN AND THE CARIBBEAN 0 0 VALUE OF INVESTED ASSETS N/A 141218009 EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA, 0 0 VALUE OF INVESTED ASSETS N/A 49,295,44 EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 243,392,44 NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3 EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	ICELAND & GREENLAND)					
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES  0 1 SERVICES SITE VISITS  CENTRAL AMERICAN AND THE CARIBBEAN 0 0 VALUE OF INVESTED ASSETS N/A 14121800:  EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA, 0 0 VALUE OF INVESTED ASSETS N/A 49,295,40  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 243,392,40  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	- ALBANIA, ANDORRA,			PROGRAM & INVESTMENT		
CANADA AND MEXICO, BUT NOT THE UNITED  STATES  0 1 SERVICES  SITE VISITS  CENTRAL AMERICAN AND THE CARIBBEAN 0 0 VALUE OF INVESTED ASSETS N/A  EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA, CAMBODIA, CAMBODIA, O 0 VALUE OF INVESTED ASSETS N/A  49,295,44  CELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A  AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A  243,392,44  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED  STATES 0 0 0 VALUE OF INVESTED ASSETS N/A  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA,  INVESTMENT MANAGEMENT	AUSTRIA, BELGIUM	0	8	SERVICES	SITE VISITS	54,483.
BUT NOT THE UNITED  STATES  0  1  SERVICES  SITE VISITS  CENTRAL AMERICAN AND THE CARIBBEAN  0  0  0  VALUE OF INVESTED ASSETS  N/A  14121800:  EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,  CAMBODIA,  CUROPE (INCLUDING ICELAND & GREENLAND)  - ALBANIA, ANDORRA, AUSTRIA, BELGIUM  NORTH AMERICA  CANADA AND MEXICO, BUT NOT THE UNITED  STATES  0  0  VALUE OF INVESTED ASSETS  N/A  243,392,4:  0  VALUE OF INVESTED ASSETS  N/A  243,392,4:  0  VALUE OF INVESTED ASSETS  N/A  243,392,4:  10  10  10  10  10  10  10  10  10  1	NORTH AMERICA -					
CENTRAL AMERICAN AND THE CARIBBEAN  O  O  VALUE OF INVESTED ASSETS  N/A  141218009  EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,  CAMBODIA,  O  O  VALUE OF INVESTED ASSETS  N/A  49,295,49  EUROPE (INCLUDING ICELAND & GREENLAND)  - ALBANIA, ANDORRA, AUSTRIA, BELGIUM  O  O  VALUE OF INVESTED ASSETS  N/A  243,392,49  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED  STATES  O  O  VALUE OF INVESTED ASSETS  N/A  60,947,3  EUROPE (INCLUDING ICELAND & GREENLAND)  - ALBANIA, ANDORRA,  INVESTMENT MANAGEMENT	CANADA AND MEXICO,					
CENTRAL AMERICAN AND THE CARIBBEAN  0	BUT NOT THE UNITED			PROGRAM & INVESTMENT		
THE CARIBBEAN 0 0 VALUE OF INVESTED ASSETS N/A 141218009  EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA, 0 0 VALUE OF INVESTED ASSETS N/A 49,295,49  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 243,392,49  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED  STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	STATES	0	1	SERVICES	SITE VISITS	40.
THE CARIBBEAN 0 0 VALUE OF INVESTED ASSETS N/A 141218009  EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA, 0 0 VALUE OF INVESTED ASSETS N/A 49,295,49  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 243,392,49  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED  STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT						
THE CARIBBEAN 0 0 VALUE OF INVESTED ASSETS N/A 141218009  EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA, 0 0 VALUE OF INVESTED ASSETS N/A 49,295,49  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 243,392,49  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED  STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT						
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,  EUROPE (INCLUDING ICELAND & GREENLAND)  - ALBANIA, ANDORRA, AUSTRIA, BELGIUM  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED  STATES  0 0 VALUE OF INVESTED ASSETS  N/A  49,295,41  40,200  4	CENTRAL AMERICAN AND					
PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA, CAMBODIA, CAMBODIA  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM O VALUE OF INVESTED ASSETS N/A  243,392,4  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES O O VALUE OF INVESTED ASSETS N/A  60,947,3  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	THE CARIBBEAN	0	0	VALUE OF INVESTED ASSETS	N/A	1412180097.
BRUNEI, BURMA,  CAMBODIA,  EUROPE (INCLUDING  ICELAND & GREENLAND)  - ALBANIA, ANDORRA,  AUSTRIA, BELGIUM  NORTH AMERICA -  CANADA AND MEXICO,  BUT NOT THE UNITED  STATES  0 VALUE OF INVESTED ASSETS  N/A  49,295,40  49,295,40  43,392,40  0 VALUE OF INVESTED ASSETS  N/A  60,947,3  EUROPE (INCLUDING  ICELAND & GREENLAND)  - ALBANIA, ANDORRA,  INVESTMENT MANAGEMENT	EAST ASIA AND THE					
CAMBODIA, 0 0 VALUE OF INVESTED ASSETS N/A 49,295,44  EUROPE (INCLUDING ICELAND & GREENLAND)  - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 243,392,44  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED  STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3  EUROPE (INCLUDING ICELAND & GREENLAND)  - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	PACIFIC - AUSTRALIA,					
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 243,392,4  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	BRUNEI, BURMA,					
ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 243,392,4 NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3 EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	CAMBODIA,	0	0	VALUE OF INVESTED ASSETS	N/A	49,295,463.
- ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 243,392,4 NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3 EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	EUROPE (INCLUDING					
AUSTRIA, BELGIUM 0 0 VALUE OF INVESTED ASSETS N/A 243,392,49  NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED  STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3  EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	ICELAND & GREENLAND)					
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3 EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	- ALBANIA, ANDORRA,					
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3 EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	AUSTRIA BELGIUM	0	0	VALUE OF INVESTED ASSETS	N/A	243,392,499.
BUT NOT THE UNITED  STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3  EUROPE (INCLUDING  ICELAND & GREENLAND)  - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT						
BUT NOT THE UNITED  STATES 0 0 VALUE OF INVESTED ASSETS N/A 60,947,3  EUROPE (INCLUDING  ICELAND & GREENLAND)  - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	CANADA AND MEXICO.					
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	•					
EUROPE (INCLUDING  ICELAND & GREENLAND)  - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	STATES	0	0	VALUE OF INVESTED ASSETS	N/A	60,947,339.
ICELAND & GREENLAND) - ALBANIA, ANDORRA, INVESTMENT MANAGEMENT	EUROPE (INCLUDING					
- ALBANIA, ANDORRA, INVESTMENT MANAGEMENT		}		-		
				INVESTMENT MANAGEMENT		
	AUSTRIA, BELGIUM	0	1	SERVICES	N/A	843,718.
		0	11	HILE-TANDYS, POTEN BANGARES		1766718849.
b Total from continuation				Special Control of the		US
		0	2			23,700.
c Totals (add lines 3a				NEWS THE RESIDENCE OF STREET		8
	·	0	13			1766742549.

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

Schedule F (Form 990) 2020

edule F (Form 990), Part I, line Activities conducted in region (by type) (i.e., fundraising, program services, grants to ipients located in the region)  TIONAL SERVICES  TMENT SERVICES	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	
		23,400.
TMENT SERVICES	N/A	300,
		1

Totals

23,700.

ANNE RAY FOUNDATION

Schedule F (Form 990) 2020 ANNE RAY FOUNDATION

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				_				
					_			
2 Enter total number of recipient organizations listed a exempt 501(c)(3) organization by the IRS, or for which the total number of other organizations or entities.	recipient organization inization by the IRS, or other organizations or	s listed above that are re r for which the grantee o entities	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. Enter total number of other organizations or entities	oreign country, r ion 501(c)(3) equ	ecognized as a tax ivalency letter	<b>A A</b>		
							Sched	Schedule F (Form 990) 2020

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Page 3

ANNE RAY FOUNDATION

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Schedule F (Form 990) 2020

Part III can be duplicated if additional space is needed.

od of on MV, other)				П	
(h) Method of valuation (book, FMV, appraisal, other)					
(g) Description of noncash assistance					
(f) Amount of noncash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients			41		·
(b) Region					
(a) Type of grant or assistance					

Schedule F (Form 990) 2020

"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2020

Yes X No

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

2020	Open to Public	Inspection
	600	- 0

OMB No. 1545-0047

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

Name of the organization  ANNE RAY FOUNDATION	DATION						Employer Identification number 47-1036008
Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	o substantiate the stance?	amount of the grants o	or assistance, the g	grantees' eligibility	for the grants or assis	stance, and the selection	on X Yes No
2 Describe in Part IV the organization's procedures for monitoring	cedures for monit	oring the use of grant f	the use of grant funds in the United States	States.			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.	Domestic Organiz	ations and Domestic		omplete if the orga	nization answered "Y	Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	5,000. Part II can	be duplicated if additio	nal space is neede	ed.			
1 (a) Name and address of organization or government	( <b>b</b> ) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AMERICAN NATIONAL RED CROSS							SUPPORT FOR DISASTER
2025 E STREET NW							CYCLE SERVICES READINESS
WASHINGTON, DC 20006	53-0196605	501(C)(3)	600,000.	0			INITIATIVE
AMERICAN NATIONAL RED CROSS 2025 E STREET NW		đ					COVID-19 EMERGENCY
WASHINGTON, DC 20006	53-0196605	501(C)(3)	5,000,000.	0			RESPONSE SUPPORT
C							
ET	L	-	6	•			2 H
WASHINGTON, DC 20006	53-0196605	501(C)(3)	,000,000	5			DISASTERS IN THE MIDWEST
AMERICAN NATIONAL RED CROSS							
2025 E STREET NW							SUPPORT FOR INNOVATION
WASHINGTON, DC 20006	53-0196605	501(C)(3)	1,500,000.	0.			LAB PROJECT
AMERICAN NATIONAL RED CROSS							
2025 E STREET NW							SUPPORT FOR THE MEASLES
WASHINGTON, DC 20006	53-0196605	501(C)(3)	3,200,000.	0.			AND RUBELLA INITIATIVE
AMERICAN NATIONAL RED CROSS							STIPPORT FOR COASTAL.
2025 E STREET NW							DISASTER RISK REDUCTION
WASHINGTON, DC 20006	53-0196605	501(C)(3)	880,000.	0			PROGRAM IN BANGLADESH
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government orc	anizations listed in the	line 1 table				16.
	I etted in the line	table					
1	I I Sted III in the III to	lable					

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

Schedule I (Form 990) 2020

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Schedule I (Form 990) ANNE RAY FOUNDATION	DATION						47-1036008 Page 1
Part II Continuation of Grants and Other Assistance to Domestic	Assistance to Dor	nestic Organizations	Organizations and Domestic Governments	vernments (Sche	(Schedule I (Form 990), Part II.)	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN NATIONAL RED CROSS 2025 E STREET NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	680,000.	.0			SUPPORT FOR DISASTER-READY COMMUNITIES PROGRAMS IN INDONESIA
AMERICAN NATIONAL RED CROSS 2025 E STREET NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	680,000.	.0		į	SUPPORT FOR DISASTER PREPAREDNESS PROJECT IN NEPAL
AMERICAN NATIONAL RED CROSS 2025 E STREET NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	480,000.	.0		*	CAPACITY BUILDING GRANT
AMERICAN NATIONAL RED CROSS 2025 E STREET NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	893,000.	.0			SUPPORT FOR DISASTER RISK REDUCTION IN EL SALVADOR
AMERICAN NATIONAL RED CROSS 2025 E STREET NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	2,000,000.	.0			SUPPORT FOR UNDERFUNDED DISASTERS
AMERICAN NATIONAL RED CROSS 2025 E STREET NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	950,000.	.0			SUPPORT FOR COMMUNITY READINESS IN PHILIPPINES
AMERICAN NATIONAL RED CROSS 2025 E STREET NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	2,560,000.	0.			SUPPORT FOR GLOBAL DISASTER READINESS TOOLS
AMERICAN NATIONAL RED CROSS 2025 E STREET NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	3,050,000.	0			SUPPORT FOR ENHANCED READINESS TO RESPOND
AMERICAN NATIONAL RED CROSS 3950 CALLE FORTUNADA SAN DIEGO, CA 92123	53-0196605 501(C	501(C)(3)	32,500.	0			CAPACITY BUILDING GRANT

Schedule I (Form 990)

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Schedule I (Form 990) ANNE RAY FOUNDATION	DATION						47-1036008 Page 1
Part II Continuation of Grants and Other Assistance to Domestic	Assistance to Don		Organizations and Domestic Governments	vernments (Sche	(Schedule I (Form 990), Part II.)	ת   .)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN NATIONAL RED CROSS 3950 CALLE FORTUNADA SAN DIEGO, CA 92123	53-0196605	501(C)(3)	275,000.	.0			SUPPORT FOR VOLUNTEER SERVICES AND YOUTH
AMERICAN NATIONAL RED CROSS 3950 CALLE FORTUNADA SAN DIEGO, CA 92123	53-0196605	501(C)(3)	.000,09	.0			SUPPORT FOR SERVICE TO THE ARMED FORCES
AMERICAN NATIONAL RED CROSS 3950 CALLE FORTUNADA SAN DIEGO, CA 92123	53-0196605	501(C)(3)	675,000.	.0			SUPPORT FOR DISASTER CYCLE SERVICES AND LEARNING COMPONENT
AMERICAN SWEDISH INSTITUTE 2600 PARK AVENUE MINNEAPOLIS, MN 55407	41-0711603	501(C)(3)	250,000.	.0			COVID-19 EMERGENCY RESPONSE SUPPORT
AMERICAN SWEDISH INSTITUTE 2600 PARK AVENUE MINNEAPOLIS, MN 55407	41-0711603	501(C)(3)	1,200,000.	.0			SUPPORT FOR FOLK ARTS AND CULTURE PROGRAMS
AMERICAN SWEDISH INSTITUTE 2600 PARK AVENUE MINNEAPOLIS, MN 55407	41-0711603	501(C)(3)	215,000.	.0			CAPACITY BUILDING GRANT
BEREA COLLEGE CPO 2096 BEREA, KY 40404	61-0444650	501(C)(3)	250,000.	.0			BEREA EDUCATION STUDIES PLANNING GRANT
BEREA COLLEGE CPO 2096 BEREA, KY 40404	61-0444650	501(C)(3)	126,500.	0			CAPACITY BUILDING GRANT
BEREA COLLEGE CPO 2096 BEREA, XY 40404	61-0444650 501(C)(3)	501(C)(3)	3,000,000.	0			CAPITAL GRANT FOR KETTERING RESIDENCE HALL REPLACEMENT

Schedule I (Form 990)

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Schedule I (Form 990) ANNE RAY FOUNDATION  Part II Continuation of Grants and Other Assistance to Domestic	NDATION Assistance to Don	nestic Organizations	Organizations and Domestic Governments		(Schedule I (Form 990), Part II.)		47-1036008 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEREA COLLEGE CPO 2096 BEREA KY 40404	61-0444650	501(C)(3)	1,200,000.	.0			COVID-19 EMERGENCY RESPONSE SUPPORT
	61-0444650		J I	.0			SUPPORT FOR FACULTY FELLOWS PROGRAM
BEREA COLLEGE CPO 2096 BEREA, KY 40404	61-0444650	501(C)(3)	450,000.	.0			SUPPORT FOR COLLEGE ADVANCEMENT
BEREA COLLEGE CPO 2096 BEREA, KY 40404	61-0444650	501(C)(3)	1,326,540.	.0			SUPPORT FOR TECHNOLOGY, SAFETY, AND STUDENT SPACE ENHANCEMENTS
BEREA COLLEGE CPO 2096 BEREA, KY 40404	61-0444650	501(C)(3)	264,950.	.0			SUPPORT FOR GRANT MANAGEMENT RESOURCES
BEREA COLLEGE CPO 2096 BEREA, KY 40404	61-0444650	501(C)(3)	1,000,000.	.0			CAPITAL FOR FOLK ARTS AND CULTURES STUDENT AND VISITOR SPACES
BEREA COLLEGE CPO 2096 BEREA, KY 40404	61-0444650	501(C)(3)	800,000	.0			SUPPORT FOR COLLEGE FOLK ARTS AND CULTURES PROJECT
BEREA COLLEGE CPO 2096 BEREA, KY 40404	61-0444650	501(C)(3)	7,288,280.	0.			SUPPORT FOR BRIDGE STUDENT PROGRAMMING
IDYLLWILD ARTS FOUNDATION PO BOX 38 52500 TEMECULA ROAD IDYLLWILD, CA 92549	95-1801279 501(C)	501(C)(3)	.000,088	0			CAPACITY BUILDING GRANT
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Schedule I (Form 990)

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Schedule I (Form 990) ANNE RAY FOUNDATION
Part II Continuation of Grants and Other Assistance to

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Schedule I (Form 990) ANNE RAY FOUNDATION	ATION						4.7-1035008 Page 1
Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	dule I (Form 990), Par	rl!.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IDYLLWILD ARTS FOUNDATION PO BOX 38 52500 TEMECULA ROAD IDYLLWILD, CA 92549	95-1801279	501(C)(3)	200,000.	.0			CAPITAL GRANT FOR PARKING IMPROVEMENTS
IDYLLWILD ARTS FOUNDATION PO BOX 38 52500 TEMECULA ROAD IDYLLWILD, CA 92549	95-1801279	501(C)(3)	200,000.	0.			SUPPORT FOR UPGRADES TO EDUCATIONAL TECHNOLOGY
IDYLLWILD ARTS FOUNDATION PO BOX 38 52500 TEMECULA ROAD IDYLLWILD, CA 92549	95-1801279	501(C)(3)	1,400,000.	.0			SUPPORT FOR EDUCATIONAL PROGRAMS & SCHOLARSHIPS
IDYLLWILD ARTS FOUNDATION PO BOX 38 52500 TEMECULA ROAD IDYLLWILD, CA 92549	95-1801279	501(C)(3)	.000,09	0			SUPPORT FOR NATIVE AMERICAN ARTS PROGRAM
MINGEI INTERNATIONAL MUSEUM 1439 EL PRADO SAN DIEGO, CA 92101	23-7433357	501(C)(3)	825,000.	0.			SUPPORT FOR KEY ARTS CONTENT
MINGEI INTERNATIONAL MUSEUM 1439 EL PRADO SAN DIEGO, CA 92101	23-7433357	501(C)(3)	110,000.	.0			CAPACITY BUILDING GRANT
PUBLIC BROADCASTING SERVICE (PBS) 2100 CRYSTAL DRIVE ARLINGTON, VA 22202	52-0899215	501(C)(3)	500,000.	.0			PBS KIDS PARENT ENGAGEMENT IN SCHOOLS PROJECT
PUBLIC BROADCASTING SERVICE (PBS) 2100 CRYSTAL DRIVE ARLINGTON, VA 22202	52-0899215	501(C)(3)	550,000.	.0			NATURAL DISASTER 360 FUNDING
PUBLIC BROADCASTING SERVICE (PBS) 2100 CRYSTAL DRIVE ARLINGTON, VA 22202	52-0899215 501(C)(3)	501(C)(3)	.000,009	.0			PRODUCTION SUPPORT FOR NO PASSPORT REQUIRED

Schedule I (Form 990)

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Part II   Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	dule I (Form 990), Par	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUBLIC BROADCASTING SERVICE (PBS)							
AL L							PRODUCTION SUPPORT FOR
ARLINGTON, VA 22202	52-0899215	501(C)(3)	800,000.	0			HANDMADE AMERICA
PUBLIC BROADCASTING SERVICE (PBS)							SUPPORT FOR CONNECTING
L'AL I			6	(			NATIONAL WITH LOCAL
ARLINGTON, VA 22202	52-0899215	501(C)(3)	.000,006	0			STATIONS
PUBLIC BROADCASTING SERVICE (PBS)							
2100 CRYSTAL DRIVE							COVID-19 EMERGENCY
ARLINGTON, VA 22202	52-0899215	501(C)(3)	700,000.	.0			RESPONSE SUPPORT
PUBLIC BROADCASTING SERVICE (PBS)						ii.	
							PRODUCTION SUPPORT FOR
ARLINGTON, VA 22202	52-0899215	501(C)(3)	8,650,000.	.0			AMERICAN PORTRAIT
							TECHNOLOGY FOR NEW
PUBLIC BROADCASTING SERVICE (PBS)							PLATFORMS, IMPACT
2100 CRYSTAL DRIVE							MEASUREMENT, AND
ARLINGTON, VA 22202	52-0899215	501(C)(3)	10,000,000.	0.			OPERATIONAL EFFICIENCY
PUBLIC MEDIA GROUP OF SOUTHERN							
CALIFORNIA - 2900 WEST ALAMEDA							
AVENUE, SUITE 600 - BURBANK, CA							SUPPORT FOR DATA
91505	95-2211661	501(C)(3)	655,000.	0			CAPTURING INITIATIVE
IA GROUI							
NIA - 2900 WES							
AVENUE, SUITE 600 - BURBANK, CA							
91505	95-2211661	501(C)(3)	130,000.	0.			CAPACITY BUILDING GRANT
PUBLIC MEDIA GROUP OF SOUTHERN							
IIA - 2900 W							SUPPORT FOR SOUTHERN
AVENUE, SUITE 600 - BURBANK, CA	,						CALIFORNIA ORIGINAL
91505	95-2211661	501(C)(3)	1,310,000.	0.			PROGRAMMING
IIA - 2900 W							F)
AVENUE, SUITE 600 - BURBANK, CA			0				SUPPORT FOR STRATEGIC
91505	95-2211661	501(C)(3)	100,000	0			PLAN AND DEVELOPMENT

Schedule I (Form 990)

Page 1

47-1036008

(g) Description of non-cash assistance

(f) Method of valuation (book, FMV, appraisal, other)

(e) Amount of non-cash assistance

(d) Amount of cash grant

(c) IRC section if applicable

(p) EIN

(a) Name and address of organization or government

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

ANNE RAY FOUNDATION

Schedule ( (Form 990)

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SAN DIEGO HUMANE SOCIETY & SPCA

SAN DIEGO HUMANE SOCIETY & SPCA

SAN DIEGO, CA 92110

5500 GAINES STREET

SAN DIEGO HUMANE SOCIETY & SPCA

SAN DIEGO, CA 92110

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5500 GAINES STREET

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SAN DIEGO STATE UNIVERSITY (KPBS)

5200 CAMPANILE DRIVE

SAN DIEGO, CA 92182

SAN DIEGO HUMANE SOCIETY & SPCA

SAN DIEGO, CA 92110

5500 GAINES STREET

SAN DIEGO STATE UNIVERSITY (KPBS)

5200 CAMPANILE DRIVE

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SAN DIEGO STATE UNIVERSITY (KPBS)

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SAN DIEGO STATE UNIVERSITY (KPBS)

5200 CAMPANILE DRIVE

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SAN DIEGO STATE UNIVERSITY (KPBS)

5200 CAMPANILE DRIVE

SAN DIEGO, CA 92182

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Schedule I (Form 990)

SUPPORT FOR KPBS PROGRAMMING

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SUPPORT FOR AUDIENCE AND

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33-0373293 501(C)(3)

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Schedule I (Form 990) ANNE RAY FOUNDATION  Dark III Continuation of Grante and Other Accietance to Domestic	DATION Accietance to Do		Organizations and Domestic Governments		(Schodule   (Form 990)   Dart    )	(=+	47-1036008 Page 1
(a) Name and address of organization or government	(b) E!N		(d) Amount of cash grant	7 0	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN DIEGO STATE UNIVERSITY (KPBS) 5200 CAMPANILE DRIVE SAN DIEGO, CA 92182	33-0373293	501(C)(3)	15,000.	.0			SUPPORT FOR "ONE BOOK, ONE SAN DIEGO"
SAN DIEGO STATE UNIVERSITY (KPBS) 5200 CAMPANILE DRIVE SAN DIEGO, CA 92182	33-0373293	501(C)(3)	25,000.	0			SUPPORT FOR EXPLORATION AND LEARNING COMPONENT
SCHOOL FOR ADVANCED RESEARCH PO BOX 2188 SANTA FE, NM 87504	85-0125045	501(C)(3)	150,000.	0	<u></u>		CAPACITY BUILDING GRANT
SCHOOL FOR ADVANCED RESEARCH PO BOX 2188 SANTA FE, NM 87504	85-0125045	501(C)(3)	200,000.	.0			COVID-19 EMERGENCY RESPONSE SUPPORT
SCHOOL FOR ADVANCED RESEARCH PO BOX 2188 SANTA FE, NM 87504	85-0125045	501(C)(3)	225,000.	0			SUPPORT FOR CONSERVATION AND COLLECTIONS DOCUMENTATION
SCHOOL FOR ADVANCED RESEARCH PO BOX 2188 SANTA FE, NM 87504	85-0125045	501(C)(3)	287,000.	0			SUPPORT FOR PROFESSIONAL TRAINING AND INTERGENERATIONAL LEARNING
SMITHSONIAN INSTITUTION (NMAI) OFFICE OF SPONSORED PROJECTS PO BOX 37012, MRC 1205 - WASHINGTON, DC 20013	53-0206027	501(C)(3)	130,000.	0			SUPPORT FOR DIVERSIFYING RESOURCES AND DEVELOPMENT
SMITHSONIAN INSTITUTION (NMAI) OFFICE OF SPONSORED PROJECTS PO BOX 37012, MRC 1205 - WASHINGTON, DC 20013	53-0206027	501(C)(3)	430,000.	0			COVID-19 EMERGENCY RESPONSE SUPPORT
SMITHSONIAN INSTITUTION (NMAI) OFFICE OF SPONSORED PROJECTS PO BOX 37012, MRC 1205 - WASHINGTON, DC 20013	53-0206027 501(C)(3)	501(C)(3)	125,000.	.0	·		CAPACITY BUILDING GRANT
							Schedule I (Form 990)

Schedule I (Form 990)

ANNE RAY FOUNDATION Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	Organizations and Domestic Governments (Schedule I (Form 990), Part II.)	t II.)	
(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SMITHSONIAN INSTITUTION (NMAI) OFFICE OF SPONSORED PROJECTS PO BOX 37012, MRC 1205 - WASHINGTON, DC 20013	53-0206027	501(C)(3)	1,075,000.	.0			SUPPORT FOR COMMUNITY LOANS PROGRAM
ST, PAUL'S EPISCOPAL HOME 328 MAPLE STREET SAN DIEGO, CA 92103	95-2111196	501(C)(3)	200,000.	0.			COVID-19 EMERGENCY RESPONSE SUPPORT
ST. PAUL'S EPISCOPAL HOME 328 MAPLE STREET SAN DIEGO, CA 92103	95-2111196	501(C)(3)	1,000,000.	0			CAPITAL GRANT FOR PARKING IMPROVEMENTS
ST. PAUL'S EPISCOPAL HOME 328 MAPLE STREET SAN DIEGO, CA 92103	95-2111196	501(C)(3)	210,000.	0			SUPPORT FOR QUALITY OF LIFE PROGRAM AND LEARNING STUDY
ST. PAUL'S EPISCOPAL HOME 328 MAPLE STREET SAN DIEGO, CA 92103	95-2111196	501(C)(3)	240,000.	. 0			SUPPORT FOR SENIOR DAY
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	500,000	. 0			NORTHERN GREAT PLAINS GRASSLAND CONSERVATION
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	1,087,500.	0			COMMUNITY-LED CONSERVATION IN THE GRASSLANDS OF AUSTRALIA AND MONGOLIA
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	2,571,750.	.0			COMMUNITY-BASED CONSERVATION IN FRESHWATER ECOSYSTEMS OF SOUTH AMERICA
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	912,500.	0			COMMUNITY-LED CONSERVATION IN THE GRASSLANDS OF AFRICA
							Schedule I (Form 990)

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Schedule 1 (Form 990)

ANNE RAY FOUNDATION

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule   (Form 990), Part II.)	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sche	dule I (Form 990), Par	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	4,928,250.	.0			COMMUNITY-BASED CONSERVATION IN FRESHWATER ECOSYSTEMS OF AFRICA
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	2,920,000.	0			CONSERVING COASTAL ECOSYSTEMS, SUSTAINING LOCAL COMMUNITIES
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	1,350,000.	.0			FOSTERING EXCELLENCE IN COMMUNITY-BASED CONSERVATION
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	1,575,000.	.0			ACCELERATING THE IMPACT OF THE SHARED CONSERVATION AGENDA
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	4,500,000.	.0			COMMUNITY-LED CONSERVATION IN TROPICAL FOREST LANDSCAPES
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	1,000,000.	.0			ENVIRONMENTAL RESILIENCY PROTECTION FOR CALIFORNIA
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	1,000,000.	.0			SUPPORT FOR GREAT BEAR PROGRAM
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	2,700,000.	.0			DELIVERING EQUITABLE AND TRANSFORMATIVE STRATEGIES FOR PEOPLE AND NATURE
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DR, SUITE 100 ARLINGTON, VA 22203	53-0242652 501	501(C)(3)	2,000,000.	0			CAPITAL GRANT FOR COMMUNITY CONSERVATION CONFERENCE CENTER

Schedule I (Form 990)

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Schedule I (Form 990) ANNE RAY FOUNDATION

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule   (Form 990), Part II.)	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	dule I (Form 990), Par	t II.)	
(a) Name and address of organization or government	( <b>b</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALVATION ARMY NATIONAL CORPORATION - 615 SLATERS LANE - ALEXANDRIA, VA 22314	22-2406433	501(C)(3)	1,500,000.	.0			PATHWAY OF HOPE NATIONAL EXPANSION PROJECT
THE SALVATION ARMY NATIONAL CORPORATION - 615 SLATERS LANE - ALEXANDRIA, VA 22314	22-2406433 501(C)	501(C)(3)	3,000,000.	.0			COVID-19 EMERGENCY RESPONSE SUPPORT
THE SALVATION ARMY NATIONAL CORPORATION - 615 SLATERS LANE - ALEXANDRIA, VA 22314	22-2406433	501(C)(3)	227,000.	0			SUPPORT FOR RELIEF AND RECOVERY PROGRAM
THE SALVATION ARMY NATIONAL CORPORATION - 615 SLATERS LANE - ALEXANDRIA, VA 22314	22-2406433	501(C)(3)	400,000.	0			SUPPORT FOR RAPID RESPONSE IN THE MIDWEST
THE SALVATION ARMY, A CALIFORNIA CORPORATION - 6605 UNIVERSITY AVENUE - SAN DIEGO, CA 92115	94-1156347	501(C)(3)	235,000.	0			COVID-19 EMERGENCY RESPONSE SUPPORT
THE SALVATION ARMY, A CALIFORNIA CORPORATION - 6605 UNIVERSITY AVENUE - SAN DIEGO, CA 92115	94-1156347	501(C)(3)	166,000.	.0			SUPPORT FOR THE SENIOR NUTRITION PROGRAM
THE SALVATION ARMY, A CALIFORNIA CORPORATION - 6605 UNIVERSITY AVENUE - SAN DIEGO, CA 92115	94-1156347	501(C)(3)	71,000.	0			SUPPORT FOR VOLUNTEER DEPARTMENT NEEDS
THE SALVATION ARMY, A CALIFORNIA CORPORATION - 6605 UNIVERSITY AVENUE - SAN DIEGO, CA 92115	94-1156347	501(C)(3)	73,000.	.0			SUPPORT FOR ARTS AND LITERACY PROGRAM
YMCA OF THE USA 101 N WACKER DRIVE CHICAGO, IL 60606	36-3258696	501(C)(3)	715,000.	0			ENSURING Y CAMP AND SWIM PROGRAMS ARE SAFE, RELEVANT, AND SUSTAINABLE
							Schedule I (Form 990)

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Schedule I (Form 990) ANNE RAY FOUNDATION  Part II Continuation of Grants and Other Assistance to Domestic	ASSISTANCE to Dor		Organizations and Domestic Governments		(Schedule I (Form 990), Part II.)		47-1036008 Page 1
(a) Name and address of organization or government	(b) EIN		(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF THE USA 101 N WACKER DRIVE CHICAGO, IL 60606	36-3258696	501(C)(3)	2,518,656.	• 0			CAPITAL GRANT FOR RESIDENT CAMPS
YMCA OF THE USA 101 N WACKER DRIVE CHICAGO, IL 60606	36-3258696	501(C)(3)	4,003,118.	.0			WATER SAFETY INITIATIVE
YMCA OF THE USA 101 N WACKER DRIVE CHICAGO, IL 60606	36-3258696	501(C)(3)	1,000,000.	.0			NEW AMERICAN WELCOME CENTERS AND FAMILY AND COMMUNITY STABILITY
YMCA OF THE USA 101 N WACKER DRIVE CHICAGO, IL 60606	36-3258696	501(C)(3)	985,349.	.0			YMCA FOREVERWELL PROGRAM EXPANSION
YMCA OF THE USA 101 N WACKER DRIVE CHICAGO, IL 60606	36-3258696	501(C)(3)	663,059.	.0			SUPPORT FOR STRATEGIC INITIATIVES FUND
YMCA OF THE USA 101 N WACKER DRIVE CHICAGO, IL 60606	36-3258696	501(C)(3)	2,500,000.	0			SUPPORT FOR RESIDENT CAMP ACCESS
YMCA OF THE USA 101 N WACKER DRIVE CHICAGO, IL 60606	36-3258696	501(C)(3)	815,000.	0			SUPPORT FOR CAMP RESEARCH AND METRICS
YMCA OF THE USA 101 N WACKER DRIVE CHICAGO, IL 60606	36-3258696	501(C)(3)	3,000,000.	.0			COVID-19 EMERGENCY RESPONSE SUPPORT
							Schedule I (Form 990)

PART I, LINE 2:

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Schedule I (Form 990) 2020

Part III

(f) Description of noncash assistance

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Schedule I (Form 990) 2020

Schedule I (Form 990) ANNE RAY FOUNDATION	47-1036008	Page 2
Schedule I (Form 990) ANNE RAY FOUNDATION  Part IV Supplemental Information		
IN 2020, THE REPORTING ORGANIZATION WORKED WITH EACH DESIGNATED SUPPORTED		
ORGANIZATION TO UNDERSTAND WHAT FLEXIBILITY MAY BE NEEDED WITH RESPECT TO		
ACTIVE GRANTS. THESE DISCUSSIONS RESULTED IN A MODIFICATION TO MANY OF THE		
GRANTS TO PROVIDE ADDITIONAL FLEXIBILITY IN HOW FUNDS WERE USED, ALLOWING		
THE DESIGNATED SUPPORTED ORGANIZATION TO USE FUNDS FOR THE MOST URGENT NEED		
OF THE ORGANIZATION OR THE PROJECT.		
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## **SCHEDULE J** (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Inspection

Name of the organization

ANNE RAY FOUNDATION

Employer identification number 47-1036008

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		O E	10.50
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel		STED.	B.H
	Travel for companions Payments for business use of personal residence			4
	X Tax indemnification and gross-up payments Health or social club dues or initiation fees			2-1
	Discretionary spending account Personal services (such as maid, chauffeur, chef)	1		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	155		
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	L.,
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		430	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	L
		i de se		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to	al Ba		
	establish compensation of the CEO/Executive Director, but explain in Part III.	100		
	X Compensation committee Written employment contract			
	Independent compensation consultant   X   Compensation survey or study		6 TE	
	X Form 990 of other organizations X Approval by the board or compensation committee			d) = H
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing		T A	1
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	**	Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X	1,,
C	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III.			11 11 (2.2)
	0 1 3 3 1 3 1 5 1 5 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7			100
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	70=		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	5-		X
	The organization?	5a 5b		X
D	Any related organization?  If "Yes" on line 5a or 5b, describe in Part III.	30	18 18 18	1000
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	¥ 3 4		176
6	contingent on the net earnings of:		1	
а		6a		Х
	The organization?  Any related organization?	6b		Х
U	Any related organization?  If "Yes" on line 6a or 6b, describe in Part III.	00	1000	
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	45	Je;	
•	not described on lines 5 and 6? If "Yes," describe in Part III	7	х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	192		
-	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
-	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2020

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-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	E
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	in column (B) reported as deferred on prior Form 990
(1) PAUL BUSCH	ε	0.	0	0	0	0	0.	0
DIRECTOR/PRES & CEO	<b>E</b>	834,532.	0	461,248.	130,596.	24,614.	1,450,990.	311,739.
(2) NAOMI HORSAGER	ε	0	0	0	0	0.	0	0
TREASURER/CFO	<b>E</b>	481,913.	.0	.680,29	77,479.	35,883.	660,364.	28,243.
(3) HEATHER KUKLA	Ξ	0	.0	0	0	.0	0	0
SECRETARY/VP & GEN COUNSEL	Ξ	483,163.	.0	63,576.	77,275.	34,633.	658,647.	25,080.
(4) TERRENCE MEERSMAN	ε	.0	.0	.0	.0	0.	.0	.0
VP OF PROGRAMS	<b>E</b>	471,943.	.0	96,493.	77,597.	25,795.	671,828.	33,100.
(5) SHAWN WISCHMEIER	8	.0	0.	0	0	0	0	0
CHIEF INVESTMENT OFFICER	<b>E</b>	751,580.	609,300.	140,834.	209,256.	35,800.	1,746,770.	114,922.
(6) MICHAEL RUETZ	ε	0	0	0	0	0	.0	0
DEPUTY CIO/INVESTMENT DIR.	<b>E</b>	478,643.	291,300.	66,615.	117,223.	34,633.	988,414.	0
(7) MATTHEW MINNIS	Ξ	0	.0	0	0	0	0	.0
INVESTMENT DIRECTOR	€	355,332.	223,200.	33,432.	91,005.	23,614.	726,583.	0
(8) RODNEY OVERCASH	ε	.0	0	0	.0	.0	0	.0
INVESTMENT DIRECTOR	€	397,747.	241,100.	72,644.	97,835.	36,566.	845,892.	0
(9) TRICIA SCRIVNER	ε	.0	.0	0	.0	.0	0	0
INVESTMENT DIRECTOR	<b>E</b>	379,429.	230,900.	90,937.	.080,96	25,700.	823,046.	0
(10) CHRISTOPHER VOGT	Ξ	0	.0	0	0	.0	.0	.0
INVESTMENT DIRECTOR	€	396,184.	235,500.	. 699, 669	96,770.	36,629.	824,752,	0
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4	(ii)							
							Sched	Schedule J (Form 990) 2020

032113 12-07-20

032113 12-07-20

Schedule J (Form 990) 2020

Page 3

MATT MINNIS - \$2,925

PART I, LINE 7:

032113 12-07-20

Schedule J (Form 990) 2020 COMPENSATION AS INDICATED IN SCHEDULE J IS REASONABLE AND SUPPORTED BY AN VARIABLE INCENTIVE PLAN AWARDS WERE PROVIDED TO CERTAIN PERSONS LISTED ON PART VII, THESE AWARDS WERE PAID BASED ON A VARIABLE COMPENSATION PLAN CONSISTENT WITH INDUSTRY STANDARD FOR PERSONS SERVING IN SIMILAR ROLES, APPLICABLE TO INVESTMENT STAFF. VARIABLE INCENTIVE PLAN AWARDS WERE INDEPENDENT COMPENSATION SURVEY.

## SCHEDULE O

032211 11-20-20

(Form 990 or 990-EZ)

## 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 990-EZ.

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

2020
Open to Public Inspection

Employer identification number

Department of the Treasury
Internal Revenue Service

Name of the organization

ANNE RAY FOUNDATION 47-1036008 FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: ANNE RAY FOUNDATION PROVIDES MEANINGFUL SUPPORT TO SOME OR ALL DESIGNATED SUPPORTED ORGANIZATIONS TO MAKE A MEASURABLE AND SUSTAINABLE DIFFERENCE ON OUR IDENTIFIED PRIORITY PROBLEMS. SPECIFICALLY, THE PURPOSE OF ANNE RAY FOUNDATION IS TO PROVIDE ASSISTANCE AND SUPPORT IN ORDER TO: - ENHANCE THE QUALITY OF LIFE FOR CHILDREN, FAMILIES AND SENIORS PREVENT AND RELIEVE SUFFERING OF CHILDREN, FAMILIES AND SENIORS PRESERVE AND PROMOTE THE ENVIRONMENT AND THE ARTS ENCOURAGE AND SUPPORT THE HUMANE TREATMENT OF ANIMALS DURING 2020 ANNE RAY FOUNDATION MADE GRANTS TO DESIGNATED SUPPORTED ORGANIZATIONS FOR A VARIETY OF PROGRAMS AS DETAILED ON SCHEDULE I. PART II. FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES: BELGIUM, CANADA, DENMARK, FRANCE GERMANY, ISRAEL, NETHERLANDS, UNITED KINGDOM FORM 990, PART VI, SECTION A, LINE 2: ANNE RAY FOUNDATION SHARED OPERATIONS WITH MARGARET A. CARGILL FOUNDATION (MAC FOUNDATION), A RELATED ORGANIZATION, IN PURSUIT OF THEIR SHARED VISION IN ORDER TO MAXIMIZE ASSETS AVAILABLE FOR CHARITABLE GRANTMAKING. AS PART OF THE SHARED OPERATIONS, ALL STAFF AND DIRECTORS LISTED IN PART VII ALSO LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) 2020

BEFORE FILING WITH THE IRS, BOARD MEMBERS AND OFFICERS RECEIVED AND

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization  ANNE RAY FOUNDATION	Employer identification number 47-1036008
- PERIODICALLY REVIEW COMPENSATION AND BENEFITS OFFERINGS AND PHILOSOPHY;	
- ENSURE THAT COMPENSATION APPROVALS ARE DOCUMENTED IN WRITING IN	
CONTEMPORANEOUS COMMITTEE MEETING MINUTES.	
IN DETERMINING COMPENSATION TO BE PAID FOR THE 2020 TAX YEAR, THE	
COMPENSATION COMMITTEE HIRED AN INDEPENDENT CONSULTANT TO ANALYZE THE	
REASONABLENESS OF COMPENSATION TO BE PAID TO DIRECTORS, EXECUTIVES, AND	
CERTAIN KEY EMPLOYEES. THE REPORT WAS BASED ON PUBLISHED SURVEY DATA AS	
WELL AS FORM 990 DATA FOR COMPARABLE ORGANIZATIONS. THE CONSULTANT	
COMMUNICATED THE RESULTS OF THE REPORT DIRECTLY TO THE COMPENSATION	
COMMITTEE. THE COMMITTEE APPROVED COMPENSATION TO CERTAIN EXECUTIVES AND	
KEY EMPLOYEES, NOTING THE APPROVAL WAS BASED ON THE COMMITTEE'S	
DETERMINATION THAT COMPENSATION WAS REASONABLE. THE COMMITTEE THEN MADE A	
RECOMMENDATION FOR REVIEW AND APPROVAL BY THE BOARDS FOR COMPENSATION TO BE	į.
PAID TO CERTAIN OTHER EXECUTIVES.	
AFTER CONSIDERING RECOMMENDATIONS FROM THE COMPENSATION COMMITTEE, THE ANNE	
RAY FOUNDATION BOARD AND MAC FOUNDATION BOARD APPROVED COMPENSATION TO	
BOARD DIRECTORS AND CERTAIN EXECUTIVES, NOTING THE APPROVAL WAS BASED ON	
THE BOARDS' DETERMINATION THAT COMPENSATION WAS REASONABLE. WHEN NECESSARY,	
BOARD MEMBERS WERE RECUSED FROM APPROVING COMPENSATION IN ACCORDANCE WITH	
THE ORGANIZATIONS' CONFLICT OF INTEREST POLICY.	
FORM 990, PART VI, SECTION C, LINE 19:	
THESE DOCUMENTS ARE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST. THE	
ORGANIZATION POSTS ITS FORM 990 AND AUDITED FINANCIAL STATEMENTS TO ITS	
WEBSITE FOR PUBLIC ACCESS. THE ORGANIZATION ALSO SHARES ITS FORM 990 AND	

AUDITED FINANCIALS DIRECTLY WITH THE SMALL NUMBER OF SPECIFICALLY NAMED

Name of the organization  ANNE RAY FOUNDATION		Employer identification number 47-1036008
		47 1030000
ORGANIZATIONS IT SUPPORTS.		
EODW 000 DADW VI LINE O GUANGE IN NEW ACCESS		
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:		
BOOK/TAX DIFFERENCE IN NET INCOME FROM INVESTMENTS	12,498,502.	
OTHER BOOK/TAX DIFFERENCE IN EXPENSE	-1,940,374.	
TOTAL TO FORM 990, PART XI, LINE 9	10,558,128.	

## SCHEDULE R (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

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.

2020	Open to Public	Inspection

OMB No. 1545-0047

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

Employer identification number 47-1036008

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

(a)	(q)	(c)	(p)	(e)	(1)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
KARI LLC - 42-1747887					
120 BROADWAY AVE N					
WAYZATA, MN 55391	REAL ESTATE HOLDING COMPANY MINNESOTA	MINNESOTA	-60,482.	0	0. ANNE RAY FOUNDATION

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. PartII

(a) Name additions and EIN	(b)	(C)	(d)	(e)	(f)	(g) Section 512(b)(13)	2(b)(13)
name, address, and Env of related organization	רוווומן מכנועונץ	foreign country)	section	status (if section	Direct controlling entity	controlled entity?	bed '
				501(c)(3))		Yes	No
ARC NATIONAL - 53-0196605							
2025 E STREET NW	EMERGENCY RESPONSE AND						
WASHINGTON, DC 20006	PREVENTION	DISTRICT OF COLUMBIA 501(C)(3)	501(C)(3)	7	N/A		×
ASI - 41-0711603	PROMOTE KNOWLEDGE OF						
2600 PARK AVENUE	SWEDISH ART, LITERATURE						
MINNEAPOLIS, MN 55407	AND SCIENCE	MINNESOTA	501(C)(3)	7	N/A		×
BEREA COLLEGE - 61-0444650							
LINCOLN HALL NO 220							
BEREA, KY 40404	POST-SECONDARY EDUCATION	KENTUCKY	501(C)(3)	7	N/A		×
IDYLLWILD - 95-1801279							
PO BOX 38							
IDYLLWILD, CA 92549	ENRICHMENT IN THE ARTS	CALIFORNIA	501(C)(3)	2	N/A		×
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ns for Form 990.				Schedule R (Form 990) 2020	Form 990	2020

032161 10-28-20 LHA

Part II Continuation of Identification of Related Tax-Exempt Organizations

						,
(a)	(q)	(c)	(p)	(e)	<b>£</b> )	(a)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	section 5 (2(b)(13) controlled
of related organization		foreign country)	section	status (if section	entity	organization?
				501(c)(3))		Yes
MINGEI - 23-7433357						
1439 EL PRADO						
SAN DIEGO, CA 92101	FOLK ART MUSEUM	CALIFORNIA	501(C)(3)	7	N/A	×
PBS - 52-0899215						
2100 CRYSTAL DRIVE						
ARLINGTON, VA 22202	PUBLIC MEDIA	VIRGINIA	501(C)(3)	7	N/A	×
SDHS - 95-1661688						
5500 GAINES STREET	PROMOTE HUMANE TREATMENT					
SAN DIEGO, CA 92110	OF ANIMALS	CALIFORNIA	501(C)(3)	7	N/A	×
KPBS - 33-0373293						
5250 CAMPANILE DRIVE	PUBLIC MEDIA AND					
SAN DIEGO, CA 92182	EDUCATIONAL PROGRAMS	CALIFORNIA	501(C)(3)	2	N/A	×
SAR - 85-0125045						
PO BOX 2188	ADVANCED STUDY AND					
SANTA FE, NM 87504	COMMUNICATION OF KNOWLEDGE NEW MEXICO	NEW MEXICO	501(C)(3)	2	N/A	×
NMAI - 53-0206027						
1000 JEFFERSON DRIVE S	INCREASE AND DIFFUSION OF					
WASHINGTON, DC 20560	KNOWLEDGE	DISTRICT OF COLUMBIA	501(C)(3)	7	N/A	×
ST. PAUL'S - 95-2111196						
328 MAPLE STREET	SUPPORT FOR LONG-TERM CARE					
SAN DIEGO, CA 92103	FACILITIES	CALIFORNIA	501(C)(3)	10	N/A	×
SA CA - 94-1156347	MEETING HUMAN NEED IN THE					
180 E OCEAN BLVD, 9TH FLOOR	NAME OF THE CHRISTIAN					
LONG BEACH, CA 90802	СНИВСИ	CALIFORNIA	501(C)(3)	1	N/A	×
SA NATIONAL - 22-2406433	MEETING HUMAN NEED IN THE					
615 SLATERS LANE	NAME OF THE CHRISTIAN					
ALEXANDRIA, VA 22313	снивси	VIRGINIA	501(C)(3)	1	N/A	×
YMCA OF THE USA - 36-3258696	PROGRAMS THAT BUILD					
101 NORTH WACKER DRIVE, SUITE 400	HEALTHY SPIRIT, MIND AND					
CHICAGO, IL 60606	BODY FOR ALL	ILLINOIS	501(C)(3)	10	N/A	×
TNC - 53-0242652	PROTECTING THE LAND AND					
4245 N FAIRFAX DR, STE 100	WATER ON WHICH THE					
ARLINGTON, VA 22203	DIVERSITY OF LIFE DEPENDS	VIRGINIA	501(C)(3)	7	N/A	×
PMG - 95-2211661						
2900 WEST ALAMEDA AVENUE, SUITE 600						
BURBANK, CA 91505	PUBLIC MEDIA PROGRAMMING	CALIFORNIA	501(C)(3)	7	N/A	×

PUBLIC INSPECTION COPY

ANNE RAY FOUNDATION

Schedule R (Form 990)

Part II Continuation of Identification of Related Tax-Exempt Organizations

(8)	(b)	(c)	(b)	(e)	(f)	(2)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	pulling	Section 512(b)(13) controlled	(b)(13)
of related organization		foreign country)	section	status (if section 501(c)(3))	entity	organizatio	lon?
MARGARET A. CARGILL FOUNDATION - 37-1758406 6889 ROWLAND ROAD						-	
55344	CHARITABLE GRANTMAKING	MINNESOTA	501(C)(3)	N/A		×	
			1				
							2)
	٠						

Page 2

ANNE RAY FOUNDATION Schedule R (Form 990) 2020

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)	(p)	(၁)	(p)	(e)	(£)	(6)	£	Ξ	9	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	altocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	General or Percentage managing ownership partner?
MARATHON MAGNI FUND L.P.		16					+	(000)	200	
46-1902953, ONE BRYANT PARK,			į							
38TH FLOOR, NEW YORK, NY			ANNE RAY				-			
10036	INVESTMENTS	NX	FOUNDATION	INVESTMENT	-1,611,736.	43,365,380.	×	N/A	×	809.09
SKADI LLC - 81-2108322										
6889 ROWLAND ROAD			ANNE RAY							
EDEN PRAIRIE, MN 55344	INVESTMENTS	DE	FOUNDATION	INVESTMENT	-16,848,067.	218,700,489.	×	N/A	×	59.28%
VALHALLA CAPITAL STRATEGIES										
FUND LLC - 32-0398087, 77							_			
WEST WACKER DRIVE, SUITE			ANNE RAY							
3220, CHICAGO, IL 60601	INVESTMENTS	IL	FOUNDATION	INVESTMENT	53,188,919.	0.	×	N/A	×	58,61%
ART&ARF PRIVATE EQUITY										
PARTNERSHIP - 20-3049679, 767										
FIFTH AVENUE, 14TH FLOOR, NEW			ANNE RAY							
YORK, NY 10153	INVESTMENTS	NY	FOUNDATION	INVESTMENT	6,260,929.	16,746,383.	×	N/A	×	99,50%

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. Part IV

	,								
(a)	(q)	(c)	(p)	(e)	(£)	(6)	(F)	(3)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year	Percentage ownership	Section 512(b)(13) controlled entity?	113) led
		country)		(200)				Yes	°N
AG ANDVARI FUND, L.P 99-0383003								-	
89 NEXUS WAY		CAYMAN	ANNE RAY						
CAMANA BAY, GRAND CAYMAN, CAYMAN ISLANDS	INVESTMENTS	ISLANDS	FOUNDATION	C CORP	504,435.	94,656,712.	62.23%	×	
H/2 CP LTD - 98-1048477								-	
680 WASHINGTON BLVD		CAYMAN	ANNE RAY						
STAMFORD, CT 06901	INVESTMENTS	ISLANDS	FOUNDATION	C CORP	1,604,651.	69,124,465.	57.00%	×	
MARATHON MODI									
90 NEXUS WAY		CAYMAN	ANNE RAY						
CAMANA BAY, GRAND CAYMAN, CAYMAN ISLANDS	INVESTMENTS	ISLANDS	FOUNDATION	C CORP	-1,121,911.	31,075,515.	800.09	×	
								_	
					)				
								-	
						1		_	

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SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2020

Schedule R (Form 990)

ANNE RAY FOUNDATION

Part III Continuation of Identification of Related Organizations Taxable as a Partnership	n of Related Organizat	ions Taxa	able as a Partnershi	ġ.						
(a)	(q)	(c)	(q)	(e)	(£)	(6)	(F)	(9)	S	(k)
Name, address, and EIN of related organization	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	Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	General or Percentage managing ownership partner?  Yes No
M-DATA CENTER PORTFOLIO CO-INVESTOR, LLC 82-5332495, 4700 WILSHIRE BLVD, LOS ANGELES, CA 90010	INVESTMENTS		ANNE RAY FOUNDATION	INVESTMENT	-42,814.	3,987,301.	×	N/A	×	*00.09
								-		
				,						
							:			
					D:					

Yes

Schedule R (Form 990) 2020

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

Schedule R (Form 990) 2020 Þ¢ × × × × × × × × × × × × 트 무 10 9 9 무 10 + 18 19 19 10 e ÷ 5 **¥** = (d) Method of determining amount involved = If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. 23,229,366. BOOKS AND RECORDS - COST 0. INCLUDED IN M ABOVE 0. INCLUDED IN M ABOVE INCLUDED IN M ABOVE 0. INCLUDED IN M ABOVE INCLUDED IN M ABOVE 1 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? 0 0 (c) Amount involved (b) Transaction type (a·s) Σ Z 0 Д 0 b Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity (1) MARGARET A. CARGILL FOUNDATION PAYMENTS FOR SHARED SERVICES (6) MARGARET A. CARGILL FOUNDATION PAYMENTS FOR SHARED SERVICES Lease of facilities, equipment, or other assets from related organization(s) Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Lease of facilities, equipment, or other assets to related organization(s) CARGILL FOUNDATION PAYMENTS FOR ADVANCES Gift, grant, or capital contribution from related organization(s) Other transfer of cash or property from related organization(s) Reimbursement paid by related organization(s) for expenses Reimbursement paid to related organization(s) for expenses Other transfer of cash or property to related organization(s) Gift, grant, or capital contribution to related organization(s) d Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) (a)
Name of related organization e Loans or loan guarantees by related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Sale of assets to related organization(s) Dividends from related organization(s) (3) MARGARET A. (5) MARGARET A. (2) MARGARET A. A. (4) MARGARET 5 ۵

032163 10-28-20

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) AG ANDVARI FUND	В	.000,008,88	83,300,000. BOOKS AND RECORDS
(8) MARATHON MAGNI FUND, L.P.	В	3,588,976.	3,588,976. BOOKS AND RECORDS
(9) MARATHON MAGNI FUND, L.P.	ß	1,381,045.	1,381,045. BOOKS AND RECORDS
(10) M-DATA CENTER PORTFOLIO CO-INVESTOR, LLC	Д	673,865.	673,865. BOOKS AND RECORDS
(11)			
(12)			
(13)			
(14)			
(15)			
(21)			
(17)			
(10)			7
(20)			
(21)			
(22)			
(23)			
(24)		:	

Schedule R (Form 990) 2020 ANNE RAY 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)	(a)	3	California de la composición della composición d	(0)	9	(5)	(8)	(1)		13
Name, address, and EiN of entity	ctivity	micile oreign	t incom related, tax un	Are all Are all bartners sec. 501(c)(3) der 005.?	Ş, i	of ear	Dispropor- tionate atlocations?	Dispute amount in box 20 managing of schedule R-1 partner?	General or Per managing partner?	centage nership
			(FI C-21 C «ПОВТОВ»	Ves No			Ves No	(1003)	Ves No	

Schedule R (Form 990) 2020

Schedule R (Form 990) 2020 ANNE RAY FOUNDATION	47-1036008	Page 5
Part VII Supplemental Information		
Provide additional information for responses to questions on Schedule R. See instructions.		
PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUST:		
VIVE 110 LOODING OF STANDED ORGANIZATION		
NAME AND ADDRESS OF RELATED ORGANIZATION:		a
MARATHON MODI		
THAT HODI		
90 NEXUS WAY		
CAMANA BAY, GRAND CAYMAN, CAYMAN ISLANDS KY1-1205		
SCHEDULE R, PART V, LINE 2		
MARGARET A. CARGILL FOUNDATION AND ANNE RAY FOUNDATION SHARE OPERATIONS		
THE DESCRIPT OF MUDIC CUADDD VICTOR IN ODDDD TO MAVIMITE ACCORD AVAILADED		
IN PURSUIT OF THEIR SHARED VISION IN ORDER TO MAXIMIZE ASSETS AVAILABLE		
TO CHARITABLE GRANTMAKING. THE TRANSACTIONS REPORTED AT PART V, LINES		
TO CHARLES ON THE TAXABLE TO THE TAX		
1.A THROUGH 1.Q ARE THE RESULT OF SHARED COSTS THAT ARE INCURRED IN		
PURSUIT OF THEIR SHARED VISION.		
ANNE RAY FOUNDATION ALSO REPORTS AT PART V, LINE 2 TRANSFERS TO OR FROM		
DAGGIUE INTERCHANDAM DEDING MUAM AND INDENDEDED AG DELAMEN CONDONATIONS		
PASSIVE INVESTMENT FUNDS THAT ARE IDENTIFIED AS RELATED CORPORATIONS		
AND PARTNERSHIPS AT PART IV.		
THE PROPERTY OF THE PARTY OF TH		
	-	