

## \*PUBLIC DISCLOSURE COPY\*\*

### EXTENDED TO NOVEMBER 15, **Return of Private Foundation**

Form **990-PF** 

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

For calendar year 2022 or tax year beginning and ending Name of foundation A Employer identification number HILLE FAMILY CHARITABLE FOUNDATION 73-1521975 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 10 N GREENWOOD AVE 103 918-592-0079 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 74120 TULSA, OK G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change **H** Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here ... 59, 398, 789. (Part I, column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (c) Adjusted net (d) Disbursements for charitable purposes (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income (cash basis only) 0. Contributions, gifts, grants, etc., received ...... 2 Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 125,412. 125,412. STATEMENT 309,080. 309,080. STATEMENT 4 Dividends and interest from securities 273,288. **5a** Gross rents STATEMENT b Net rental income or (loss) -1, 129, 463. STATEMENT 1,695,102. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a ..... 13,151,570. 1,695,102. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications .... Gross sales less returns 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) -65,131. STATEMENT 5 571. 0. 11 Other income 2,337,751. 2,130,165. 0. 12 Total. Add lines 1 through 11 366,995. 131,875. 0. 235,120. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages ...... 121,924. 103,250. 0. 18,674. 146,828. 70,611. 0. 76,218. 15 Pension plans, employee benefits 255,123. 127,562. 127,562. 16a Legal fees STMT 6 0. Administrative Expenses 33,486.b Accounting fees STMT 7 66,973. 0. 33,486. c Other professional fees STMT 8 147,252. 147,252. 0. 0. 0. 483,945. 0. 0. 17 Interest Taxes STMT 9 176,631. 82,647. 0. 81,136. Depreciation and depletion 575,396. 0. О. 19 40,158. 19,312. 20,846. 0 20 Occupancy 21 Travel, conferences, and meetings ..... 22 Printing and publications ...... 23 Other expenses STMT 10 396,069. 22,362. 0. 26,019. 24 Total operating and administrative 2,777,294. 738,357. 0. 619,061. expenses. Add lines 13 through 23 1,616,500. 1,616,500. 25 Contributions, gifts, grants paid ..... 26 Total expenses and disbursements. 4,393,794 0. 2,235,561. Add lines 24 and 25 738,357. 27 Subtract line 26 from line 12: -2,056,043 **a** Excess of revenue over expenses and disbursements 1,391,808. b Net investment income (if negative, enter -0-) 0. c Adjusted net income (if negative, enter -0-)

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.			beginning of year	EIIu 0	<u> </u>
		column should be for end-of-year amounts only.	(a) Book Value	( <b>b)</b> Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	6,365,752.	5,900,542.	5,900,542.
	2	Savings and temporary cash investments			
		Accounts receivable			
		Less: allowance for doubtful accounts			
		Pledges receivable			
		Less: allowance for doubtful accounts			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
S		Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		502,200.	502,200.
As	10a	Investments - U.S. and state government obligations STMT 11	0.	7,307,915.	7,287,425.
	h	Investments - corporate stock STMT 12	16,289,385.	7,862,243.	12,753,250.
	١	Investments corporate bonds	10/203/3031	7,002,213	
	1.	Investments - corporate bonds Investments - land, buildings, and equipment: basis 31,398,844.  Less: accumulated depreciation STMT 13 572,811.			
	''	TIMESTMENTS - Iand, buildings, and equipment: basis 31,390,044.		30,826,033.	20 665 006
		Less: accumulated depreciation SIMI IS S72, OII.		30,020,033.	30,665,906.
	12	Investments - mortgage loans Investments - other STMT 14	6 250 502	0.050.600	0.052.602
	13	Investments - other STMT 14	6,379,723.	2,253,623.	2,253,623.
	14	Land, buildings, and equipment: basis 71,886.  Less: accumulated depreciation STMT 15 49,202.			
		Less: accumulated depreciation STMT 15 49,202.	10,957.	22,684.	22,684.
	15	Other assets (describe STATEMENT 16)	22,869,127.	13,159.	13,159.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	51,914,944.	54,688,399.	59,398,789.
	17	Accounts payable and accrued expenses		10,000.	
	18	Grants payable			
"		Deferred revenue	9,063.		
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
ē		Mortgages and other notes payable	19,670,310.	24,495,712.	
Ë	22	Other liabilities (describe STATEMENT 17)	5,935.	10,652.	
		<u> </u>	2/222		
	23	Total liabilities (add lines 17 through 22)	19,685,308.	24,516,364.	
		Foundations that follow FASB ASC 958, check here			
		and complete lines 24, 25, 29, and 30.			
nces	24	Net assets without donor restrictions			
		Net assets with donor restrictions			
Ва	23	Foundations that do not follow FASB ASC 958, check here			
p		,			
Ē	00	and complete lines 26 through 30.	0.	0.	
ō		Capital stock, trust principal, or current funds	0.	0.	
set		Paid-in or capital surplus, or land, bldg., and equipment fund	32,229,636.	30,172,035.	
As		Retained earnings, accumulated income, endowment, or other funds	32,229,636.	30,172,035.	
Net Assets or Fund Bala	29	Total net assets or fund balances	32,229,030.	30,172,033.	
_	30	Total liabilities and net assets/fund balances	51,914,944.	54,688,399.	
Р	art	Analysis of Changes in Net Assets or Fund Bal			
		net assets or fund balances at beginning of year - Part II, column (a), line 2			
	(mus	t agree with end-of-year figure reported on prior year's return)	1	32,229,636.	
2	Enter	amount from Part I, line 27a	2	-2,056,043.	
3	Other	increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	30,173,593.
5	Decre	eases not included in line 2 (itemize) ADJUSTMENTS TO CO		5	1,558.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	6	30,172,035.	

Part IV Capital Gair	ns and Losses for Tax on In	vestment Inco	me	SEI	E ATT	'ACHE	D STATEM	ENT
(a) List and describe the kind(s) of property sold (for example, real estate,					How acqu - Purchas - Donatio	ired se n (c	) Date acquired (mo., day, yr.)	( <b>d)</b> Date sold (mo., day, yr.)
1a								
b								
С								
d								
е								
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o plus expens				(	<b>(h)</b> Gain or (loss (e) plus (f) minus	
a								
<u>b</u>								
C								
d								
e 13,151,570			78,7'	78.				<u>1,695,102.</u>
Complete only for assets sh	owing gain in column (h) and owned by t	the foundation on 12	31/69.			(I) G	ains (Col. (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	<b>(k)</b> Excess of over col. (j					(), but not less tha Losses (from col. (	
<u>a</u>								
<u>b</u>								
C								
<u>d</u>								
e								<u>1,695,102.</u>
2 Capital gain net income or (n	et capital loss)	in Part I, line 7 - in Part I, line 7		}	2			1,695,102.
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) an							
If gain, also enter in Part I, lir Part I, line 8	ne 8, column (c). See instructions. If (loss	s), enter -0- in		}	3		N/A	
Part V Excise Tax B	Based on Investment Incom	e (Section 494	Ю(а), 4	940(k	o), or 4	948 - se	ee instructio	ns)
1a Exempt operating foundation	ons described in section 4940(d)(2), chec	ck here a	nd enter "	'N/A" on	line 1.	)		
Date of ruling or determina	tion letter: (att	tach copy of letter if	necessar	y - see	instructio	ns)	1	19,346.
<b>b</b> All other domestic foundation	ions enter 1.39% (0.0139) of line 27b. Ex	empt foreign organiz	ations,	-		· P		
enter 4% (0.04) of Part I, li	ne 12, col. (b)					J		
2 Tax under section 511 (dor	mestic section 4947(a)(1) trusts and taxa	ble foundations only	others, e	nter -0-	-)		2	0.
3 Add lines 1 and 2							3	19,346.
	mestic section 4947(a)(1) trusts and tax						4	0.
	income. Subtract line 4 from line 3. If ze						5	19,346.
6 Credits/Payments:								
a 2022 estimated tax paymer	nts and 2021 overpayment credited to 20	22 6	1			0.		
<b>b</b> Exempt foreign organizatio	ns - tax withheld at source	61				0.		
c Tax paid with application for extension of time to file (Form 8868) 6c						0.		
d Backup withholding errone	ously withheld	6				0.		
7 Total credits and payments	. Add lines 6a through 6d						7	0.
8 Enter any penalty for unde	rpayment of estimated tax. Check here	<b>X</b> if Form 2220 is	attached				8	698.
	s 5 and 8 is more than 7, enter <b>amount</b> o		STA	TEM	ENT :	18	9	20,044.
10 Overpayment. If line 7 is n	nore than the total of lines 5 and 8, enter						10	
11 Enter the amount of line 10 to be: Credited to 2023 estimated tax Refunded						11		

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No				
	any political campaign?							
b	<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition							
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or							
	distributed by the foundation in connection with the activities.							
C	c Did the foundation file Form 1120-POL for this year?							
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:							
	(1) On the foundation. \$ (2) On foundation managers. \$							
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation							
	managers. \$O •							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X				
	If "Yes," attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or							
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X					
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	X					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X				
	If "Yes," attach the statement required by General Instruction T.							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:							
	By language in the governing instrument, or							
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law							
	remain in the governing instrument?	6	Х					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Х					
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.							
	OK							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)							
	of each state as required by General Instruction G? If "No," attach explanation	8b	X					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar							
	year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII	9		<u> X</u>				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			_				
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X				
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?							
	If "Yes," attach statement. See instructions	12		<u> </u>				
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X					
	Website address HILLEFOUNDATION.ORG							
14	The books are in care of THE FOUNDATION Telephone no. 918-59		u79					
	Located at 10 N. GREENWOOD, S103, TULSA, OK ZIP+4 74	1120						
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041 -</b> check here							
	ind enter the amount of tax-exempt interest received or accrued during the year		/A					
16	At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No				
	securities, or other financial account in a foreign country?	16		X				
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the							
	foreign country							
	Fo	<sub>rm</sub> 990	)-PF	(2022)				

Form 990-PF (2022) HILLE FAMILY CHARITABLE FOUNDATION 73- Part VI-B   Statements Regarding Activities for Which Form 4720 May Be Required	-1521975		Page 5
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the year, did the foundation (either directly or indirectly):			1,10
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		х
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?	1a(2)	Х	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	4 (4)		
(5) Transfer any income or assets to a disqualified person (or make any of either available			
for the benefit or use of a disqualified person)?	1a(5)		Х
(6) Agree to pay money or property to a government official? (Exception. Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days.)	1a(6)		Х
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
c Organizations relying on a current notice regarding disaster assistance, check here	. 🔲 📗		
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
before the first day of the tax year beginning in 2022?	1d		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines			
6d and 6e) for tax year(s) beginning before 2022?	2a		X
If "Yes," list the years , , , , ,			
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement - see instructions.)	1/A 2b		
c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?	3a		X
<b>b</b> If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after			
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	7/3		
Schedule C, to determine if the foundation had excess business holdings in 2022.)			37
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			v
had not been removed from jeopardy before the first day of the tax year beginning in 2022?	4b		X

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Statements negariting Activities for Which F	Offit 4720 Way be n	equired (continu	ued)					
5a During the year, did the foundation pay or incur any amount to:					Yes No			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section				5a(1)	X			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?								
any voter registration drive?								
(3) Provide a grant to an individual for travel, study, or other similar purposes?								
(4) Provide a grant to an organization other than a charitable, etc., organization described in section								
4945(d)(4)(A)? See instructions								
(5) Provide for any purpose other than religious, charitable, scientific, literary,				F - (F)	v			
the prevention of cruelty to children or animals?		n Danulations		5a(5)	X			
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und			NT / 7\	Eh				
section 53.4945 or in a current notice regarding disaster assistance? See instructions relying on a current notice regarding disaster assistance, check h				5b				
<ul> <li>d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?</li> </ul>								
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			<del>*1</del> 1/. <del>*.*</del>	5d				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	nav nremiums on							
a personal benefit contract?				6a	х			
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p				6b	Х			
If "Yes" to 6b, file Form 8870.								
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?			7a	Х			
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu				7b				
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$								
excess parachute payment(s) during the year?				8	Х			
Part VII Information About Officers, Directors, Truste	es, Foundation Mai	nagers, Highly						
Paid Employees, and Contractors								
1 List all officers, directors, trustees, and foundation managers and tr	-	(a) Companyation	(d) Contributions	. 1				
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit pla and deferred	ns a	(e) Expense ccount, other			
(a) Hamo and address	to position	(If not paid, enter -0-)	compensation	_	allowances			
CDD CM3 MD35D3M 01		266 005	(0 220		^			
SEE STATEMENT 21		366,995.	09,330	•	0.			
				+				
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none,	enter "NONE."						
( ) Name and address of each analysis as all many than \$FO 000	(b) Title, and average		(d) Contributions t employee benefit pla	0 ns	(e) Expense ccount, other			
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	l u	ccount, otner allowances			
CHRISTOPHER J GREEN - 1508 S.	STAFF		,					
NEWPORT AVENUE, TULSA, OK 74120	40.00	59,676.	15,951		0.			
	STAFF	·	•					
3334 E. 30TH ATREET, TULSA, OK 74114	40.00	62,248.	12,987		0.			
				$\perp$				
Total number of other employees paid over \$50,000		<u></u>	<u></u>		0			

Part VII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "	'NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
CROSSLAND CONSTRUCTION		
420 S. 145TH E AVENUE, TULSA, OK 74108	CONSTRUCTION COMPANY	6810720.
KAJEER YAR	LEGAL AND CONSULTING	
2651 E. 66TH ST., TULSA, OK 74136	SERVICES	247,250.
MERRILL LYNCH - 1800 MERRILL LYNCH DRIVE, MSC		
0803, PENNINGTON, NJ 08534	BROKER FEES	147,252.
	-	
Total number of others receiving over \$50,000 for professional services		0
Part VIII-A Summary of Direct Charitable Activities	T	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produc		Expenses
1 N/A	,	
2		
3		
4		
Part VIII-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lin	nes 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.

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P	Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign fo	undatio	ons, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	18,703,528.
	Average of monthly cash balances	1b	9,627,594.
С	Fair market value of all other assets (see instructions)	1c	31,236,147.
	Total (add lines 1a, b, and c)	1d	59,567,269.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	59,567,269.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	893,509.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	58,673,760.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	2,933,688.
P	Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	and cert	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	2,933,688.
2a	Tax on investment income for 2022 from Part V, line 5 2a 19,346.		
b	Tax on investment income for 2022 from Part V, line 5 Income tax for 2022. (This does not include the tax from Part V.)  2a 19,346. 2b 5,463.		
С	Add lines 2a and 2b	2c	24,809.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,908,879.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,908,879.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	2,908,879.
P	Part XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,235,561.
b	Program-related investments - total from Part VIII-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	2,235,561.

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## Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X,	Corpus	Toda o prior to Loc i	2021	2022
line 7				2,908,879.
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only			0.	
<b>b</b> Total for prior years:		0.		
Excess distributions carryover, if any, to 2022:		0.		
<b>a</b> From 2017				
<b>b</b> From 2018 302,148.				
c From 2019 285,305.				
d From 2020 945,783.				
e From 2021 190,178.				
f Total of lines 3a through e	1,723,414.			
4 Qualifying distributions for 2022 from				
Part XI, line 4: \$ 2,235,561.				
a Applied to 2021, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus				
(Election required - see instructions)	0.			
<b>d</b> Applied to 2022 distributable amount				2,235,561.
e Remaining amount distributed out of corpus	0.			, ,
5 Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount	673,318.			673,318.
must be shown in column (a).)  6 Enter the net total of each column as	0,3,3100			07373200
indicated below:  a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,050,096.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2021. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2022. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2023				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2017				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2023.				
Subtract lines 7 and 8 from line 6a	1,050,096.			
10 Analysis of line 9:				
a Excess from 2018				
<b>b</b> Excess from 2019				
c Excess from 2020 859,918.				
d Excess from 2021 190,178.				
e Excess from 2022				

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	AMILY CHARI			73-15	21975 Page <b>10</b>
Part XIII Private Operating F	· · · · · · · · · · · · · · · · · · ·		A, question 9)	N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective for					
<b>b</b> Check box to indicate whether the foun		ng foundation described in		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	# \ 000.4	Prior 3 years	1 , , , , , , ,	<del>.</del>
income from Part I or the minimum	(a) 2022	<b>(b)</b> 2021	(c) 2020	(d) 2019	(e) Total
investment return from Part IX for					
each year listed					
<b>b</b> 85% (0.85) of line 2a					
c Qualifying distributions from Part XI,					
line 4, for each year listed					
<b>d</b> Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part IX, line 6, for each year					
listed					
<b>c</b> "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XIV   Supplementary Info	rmation (Comple	te this part only i	f the foundation	had \$5,000 or mor	e in assets
at any time during	the year-see instr	uctions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wl			ibutions received by the	foundation before the clos	e of any tax
year (but only if they have contributed	more than \$5,000). (See s	ection 507(d)(2).)			
MARY ANN HILLE					
<b>b</b> List any managers of the foundation when the bull of the foundation when the found			or an equally large portion	on of the ownership of a pa	rtnership or
other entity) of which the foundation ha	as a 10% or greater interes	St.			
NONE					
2 Information Regarding Contribut		• • • •	-		
	•	•	•	s not accept unsolicited rec	juests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	iver or email address of th	e person to wnom applic	auons snould be address	seu:	
<b>b</b> The form in which applications should	be submitted and informat	tion and materials they sh	ould include:		_
		-			_
c Any submission deadlines:					
d Any restrictions or limitations on award	ds, such as by geographica	al areas, charitable fields.	kinds of institutions, or o	other factors:	

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Part XIV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of any foundation manager contribution Name and address (home or business) or substantial contributor recipient a Paid during the year BELLE'S BUDS RESCUE GENERAL OPERATING FOR PC P.O. BOX 421 ENVIRONMENT & ANIMALS PATTISON, TX 77466 1,000. BIT BY BIT PC EVENT SPONSORSHIP 16544 A. SOUTH HWY. 169 OOLOGAH, OK 74053 4,000. BIT BY BIT PC GENERAL OPERATING 16544 A. SOUTH HWY. 169 OOLOGAH, OK 74053 25,000. BLAZE'S TRIBUTE EQUINE RESCUE PC GENERAL OPERATING P.O. BOX 670 1,000. JONES, OK 73049 CATHOLIC CHARITIES GENERAL OPERATING ÞС 2450 N. HARVARD AVE. TULSA, OK 74115 15,000. SEE CONTINUATION SHEET(S) 1,616,500. Total 3a **b** Approved for future payment NONE Total

#### Part XV-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)		
1 Program service revenue:	(a) Business code	<b>(b)</b> Amount	Exclusion code	(d) Amount	Related or exempt function income		
-	Coue		oode				
a							
C							
d							
e							
T							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash			1 4	105 410			
investments			14	125,412.			
4 Dividends and interest from securities			14	309,080.			
5 Net rental income or (loss) from real estate:		4 400 460					
a Debt-financed property	531110	-1,129,463.					
<b>b</b> Not debt-financed property							
6 Net rental income or (loss) from personal							
property							
7 Other investment income	713940		14	571.			
8 Gain or (loss) from sales of assets other							
than inventory			18	1,695,102.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a EXCISE TAX REFUND							
b GREENARCH	531110	-91,877.					
c P3K	620000	27,012.					
d EXERBOTICS LLC	790000	-837.					
e							
12 Subtotal. Add columns (b), (d), and (e)		-1,195,165.		2,130,165.	0.		
13 Total. Add line 12, columns (b), (d), and (e)					935,000.		
(See worksheet in line 13 instructions to verify calculations.)					•		

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

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

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## 2) HILLE FAMILY CHARITABLE FOUNDATION 73-1521975 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Form 990-PF (2022) **Part XVI** In **Exempt Organizations**

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)									Yes	No
(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
а	Transfers from the reporting foundation to a noncharitable exempt organization of:									
		Cash								Х
		r assets		1a(2)		Х				
b	Other tran									
	(1) Sales	s of assets to a noncharitat	ole exempt organiza	tion				1b(1)		Х
								1b(2)		Х
								1b(3)		Х
								1b(4)		X
	<b>(5)</b> Loan	s or loan guarantees						1b(5)		X
		ormance of services or me						1b(6)		X
C	Sharing o	f facilities, equipment, mai	iling lists, other asse	ets, or paid em	ployees			1c		X
d		•		-	dule. Column (b) should al	-			ets,	
					ed less than fair market valu	ie in any transaction	or sharing arrangement, s	how in		
		d) the value of the goods, o				T				
a)∟	ine no.	(b) Amount involved	(c) Name o		e exempt organization	(d) Description	of transfers, transactions, and	sharing arra	ıngemen	ts
				N/A						
2a	Is the fou	ndation directly or indirect	lv affiliated with, or	related to, one	or more tax-exempt organi	izations described				
		-	-		p			Yes	X	No
b		omplete the following sche								_
	,	(a) Name of org			(b) Type of organization		(c) Description of relations	ship		
		N/A								
	1									
٠.					g accompanying schedules and a taxpaver) is based on all inform			ay the IRS o		
Sig	gn   """ ere		inplote. Declaration of pr	roparor (outor tha	n taxpayer) is based on all inform		311	urn with the own below?	Prepare See ins	er str.
пе						DIRECTOR		X Yes		No
	Sigi	nature of officer or trustee		T <sub>a</sub>	Date	Title	Observation Control of the Control o			
		Print/Type preparer's na	me	Preparer's s	ignature	Date	Check if PTIN			
Pa	id					1111111111	self- employed	0400		
		JANICE WILB			WILBURN, C	11/15/23		0402		
	eparer se Only	Firm's name <b>EIDE</b>	BAILLY L	ΤЬ			Firm's EIN 45-02	5095	g	
US	e Only	Firmle address 010	g	1111 m m	317D CET C	0.0				
			S. CINCI SA, OK 74		AVE., STE. 6	UU	010 7	40 -	000	
		TUL,		Phone no. 918-7	48-5	000				

73-1521975 PAGE 1 OF

	oupital dallio alla 20	occo for rax on invocantone mounts				
		d describe the kind(s) of property solorick warehouse; or common stock, 20		(b) How acquired P - Purchase	(c) Date acquired (mo., day, yr.)	( <b>d)</b> Date sold (mo., day, yr.)
	EXERBOTICS K-1	<u> </u>	70 3113. IVILO 00.	D - Donation	(, aaj, j)	(, auj, j)
	MLYNCH 659-022					12/31/22
	MLYNCH 659-023					12/31/22
_	HAWKES BAY INV			P		12/31/22
_	ALKEON GROWTH			P		12/31/22
	CASH IN LIEU			P		
				_		
r						
i						_
i	İ					
k	(					
$\Box$						
n	n					
<u>r</u>	1					
C	)					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) blus (f) minus (g)	
a						22,310.
b	9,708,221.		8,416,818.		1,	291,403.
С	521,771.		482,728.			39,043.
d	1,257,685.		999,999.			257,686.
е	1,663,883.		1,579,233.			84,650.
f	10.					10.
g						
h						
<u>i</u>						
<u>j</u>						
k						
$\perp$						
<u>m</u>						
<u>n</u>						
0	Oznanista anii fay asasta ahaysi		ha farradation on 10/01/00			
_	Complete only for assets snowl	ng gain in column (h) and owned by t			sses (from col. (h)) of col. (h) gain ove	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		not less than "-0-")	
<u>a</u>						22,310.
b					1,	291,403.
C						39,043.
d						257,686.
<u>e</u>						84,650.
<u>f</u>						
<u>g</u>						
<u>h</u>						
+						
1						
<u>K</u>						
m m						
n						
0						
		apital loss) { If gain, also enter "-0	, I	2	1,	695,102.
3	Net short-term capital gain or (lo If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line	ss) as defined in sections 1222(5) an , column (c). 8	}	3	N/A	

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Ye				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	oonan ballon	
CENTER FOR ADAPTIVE RIDING		PC	GENERAL OPERATING	
550 W. PLUMB LANE, STE. B #137				
RENO, NV 89509				1,500.
CITY YEAR TULSA		PC	WHOLE SCHOOL WHOLE	
15 E 5TH ST., STE. 1621		FC	CHILD PROGRAM	
TULSA, OK 74103			CHILD PROGRAM	15,000.
				20,000.
CLAREHOUSE		PC	GENERAL OPERATING	
7617 S. MINGO AVE.				
TULSA, OK 74133				5,000.
CLAREMONT ELEMENTARY		PC	CLASS ROOM NEEDS	
318 E. 7TH ST			PROGRAM	
CLAREMORE, OK 74017				300.
COMMUNITY FOOD BANK OF EASTERN OK		PC	1ST OF 2 MYG - CAPITAL	
1304 N KENOSHA AVE			CAMPAIGN	
TULSA, OK 74106				300,000.
COMMUNITY SERVICE COUNCIL		PC	211 HELPLINE	
16 E. 16TH STREET, #202 TULSA, OK 74119				25,000.
TOLOR, OR 74119				23,000.
CROSSTOWN LEARNING CENTER		PC	GENERAL OPERATING	
2501 E ARCHER ST				
TULSA, OK 74110				40,000.
DONORSCHOOSE		PC	CONTRIBUTION FOR	
134 WEST 37TH STREET. 11TH FLOOR			CLASSROOMS	
NEW YORK, NY 10018				100.
DVIS		PC	PROGRAM SUPPORT	
3124 E. APACHE ST.			3022 302	
TULSA, OK 74110				10,000.
				-
DIDOR THE OF TWO			DDOGDAN HUDANGTON	
FIRST TEE OF TULSA 5223 E 41ST ST N		PC	PROGRAM EXPANSION	
TULSA, OK 74115				20,000.
Total from continuation sheets	1			1,570,500.

GERTRUDE HERBERT INSTITUTE OF ART, INC.  506 TELFAIR ST.  AUGUSTA, GA 30901  GIRLS IN THE KNOW 2015 LOCUST STREET  ST. LOUIS, MO 63103  PC MATCHING FUNDS FOR FALL FUNDRAISER  2,000  FRIENDS OF AUSTIN COUNTY COLT PROJECT FO BOX 29  CAT SPRING, TX 78933  GLOBAL GARDENS FO BOX 52034  TULSA, OK 74152  FC SENERAL OPERATING  FC SENERAL OPERATING  FC SENERAL OPERATING  TULSA, OK 74119  TULSA, OK 74119  TULSA, OK 74105  FC SENERAL OPERATING  TULSA, OK 74105  FC SENERAL OPERATING  FC SENERAL OPERATING  TULSA, OK 74137  FC SENERAL OPERATING  FC SENERAL OPERATING  TULSA, OK 74137  FC SENERAL OPERATING  TULSA, OK 74137  FC SENERAL OPERATING	Part XIV Supplementary Information				_
Name and address (home or business)  show any relationship to states of contribution of showards (without the states)  part a cademy of Bellville  part a cademy of Bellvi		T			
PRITH ACADEMY OF BELLVILLE PAITH ACADEMY OF BELL		show any relationship to		Purpose of grant or contribution	Amount
DELIVILLE, TX 77418	Name and address (nome or business)	or substantial contributor			
DELIVILLE, TX 77418					
BELLVILLE, TX 77418  GERTRUDB HERBERT INSTITUTE OF ART, INC.  SUMMER -22 CAMP SCHOLARSHIPS  CO SUMER A CONTACT SCHOLARSHIPS  CO SUMER A CONTACT SCHOLARSHIPS  CO SUME	FAITH ACADEMY OF BELLVILLE		PC	NIGHT OF KNIGHTS	
GERTRUDE HERBERT INSTITUTE OF ART, INC.  506 TELFAIR ST.  AUGUSTA, GA 30901  GIRLS IN THE KNOW 2015 LOCUST STREET  ST. LOUIS, MO 63103  PC MATCHING FUNDS FOR FALL FUNDRAISER  2,000  FRIENDS OF AUSTIN COUNTY COLT PROJECT FO BOX 29  CAT SPRING, TX 78933  GLOBAL GARDENS FO BOX 52034  TULSA, OK 74152  FC SENERAL OPERATING  FC SENERAL OPERATING  FC SENERAL OPERATING  TULSA, OK 74119  TULSA, OK 74119  TULSA, OK 74105  FC SENERAL OPERATING  TULSA, OK 74105  FC SENERAL OPERATING  FC SENERAL OPERATING  TULSA, OK 74137  FC SENERAL OPERATING  FC SENERAL OPERATING  TULSA, OK 74137  FC SENERAL OPERATING  TULSA, OK 74137  FC SENERAL OPERATING	12177 HWY 36			FUNDRAISER	
INC.  SCHOLARSHIPS  SCHOLARSHIPS  SCHOLARSHIPS  2,000  GIRLS IN THE KNOW  GIRLS IN THE KNOW  SITE STREET  ST. LOUIS, MO 63103  PRIENDS OF AUSTIN COUNTY COLT PROJECT PO BOX 29  CAT SPRING, TX 78933  CLORAL GARDENS PO BOX 52034  TULEA, OK 74152  FC GENERAL OPERATING  CLORAL GARDENS PC GENERAL OPERATING  DO BOX 52034  TULEA, OK 74152  FC GENERAL OPERATING  SOUTH AND MINISTRY PC GENERAL OPERATING  TOUSA, OK 74119  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74105  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74105  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74137  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74137  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74137  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74137  FC HEALTH/MEDICAL RESEBACH  SOUTH ARCHER ST  TULEA, OK 74137  FC HEALTH/MEDICAL RESEBACH  SOUTH ARCHER ST  TULEA, OK 74137  FC WEALTH/MEDICAL RESEBACH  SOUTH ARCHER ST  TULEA, OK 74137  FC WEALTH/MEDICAL RESEBACH  100,000  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION  JOHN HOPE FRANK	BELLVILLE, TX 77418				500.
INC.  SCHOLARSHIPS  SCHOLARSHIPS  SCHOLARSHIPS  2,000  GIRLS IN THE KNOW  GIRLS IN THE KNOW  SITE STREET  ST. LOUIS, MO 63103  PRIENDS OF AUSTIN COUNTY COLT PROJECT PO BOX 29  CAT SPRING, TX 78933  CLORAL GARDENS PO BOX 52034  TULEA, OK 74152  FC GENERAL OPERATING  CLORAL GARDENS PC GENERAL OPERATING  DO BOX 52034  TULEA, OK 74152  FC GENERAL OPERATING  SOUTH AND MINISTRY PC GENERAL OPERATING  TOUSA, OK 74119  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74105  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74105  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74137  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74137  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74137  FC GENERAL OPERATING  SOUTH ARCHER ST  TULEA, OK 74137  FC HEALTH/MEDICAL RESEBACH  SOUTH ARCHER ST  TULEA, OK 74137  FC HEALTH/MEDICAL RESEBACH  SOUTH ARCHER ST  TULEA, OK 74137  FC WEALTH/MEDICAL RESEBACH  SOUTH ARCHER ST  TULEA, OK 74137  FC WEALTH/MEDICAL RESEBACH  100,000  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION  JOHN HOPE FRANK	CEDEDATE MEDDEDE TAGETHAME OF ADD		n a	GINDIED OO GAME	
SOF TELFAIR ST.  AUGUSTA, GA 30901  CIRLS IN THE KNOW 2815 LOCUST STREET ST. LOUIS, MO 63103  PRIENDS OF AUSTIN COUNTY COLT PROJECT PO BOX 29 CAT SPRING, TX 78933  CLOBAL GARDENS PO BOX 52034 TULSA, OK 74152  TULSA, OK 74152  TULSA, OK 74119  TULSA, OK 74137  TULSA, OK 74139			PC		
AUGUSTA, GA 30901  GIRLS IN THE KNOW 2815 LOCUST STREET ST. LOUIS, MO 63103  FRIENDS OF AUSTIN COUNTY COLT PROJECT PO BOX 29 CAT SPRING, TX 78933  GLOBAL GARDENS PO BOX 52034 TULSA, OK 74152  HELFING HAND MINISTRY 709 S. BOSTON AVE. TULSA, OK 74199  TENNA OK 74199  TO BOX 74152  FC GENERAL OPERATING  FC GEN				BCHOLLARBHIFB	
CIRLS IN THE KNOW 2815 LOCUST STREET ST. LOUIS, MO 63103  PRIENDS OF AUSTIN COUNTY COLT PROJECT PO BOX 29 CAT SPRING, TX 78933  CLOBAL GARDENS PO BOX 52034 TULSA, OK 74152  HELPING HAND MINISTRY 709 S. BOSTON AVE. TULSA, OK 74119  TULSA, OK 74119  PC GENERAL OPERATING  SENERAL OPERATING  FC GENERAL OPERATING  SENERAL OPERATING  FC GENERAL OPERATING  5,000  FRIENDS OF AUSTIN COUNTY COLT PROJECT PO BOX 52034 TULSA, OK 74119  FC GENERAL OPERATING  65,000  JURD SAMARITAN HEALTH SERVICES 1422 E. 715T ST, STE. B  TULSA, OK 74137  FC HEALTH/MEDICAL RESEARCH 100,000  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION JURDA OK 74119  Z2 N. GREEWROOD AVE. TULSA, OK 74119  Z2 N. GREEWROOD AVE. TULSA, OK 74119					2,000.
2815 LOCUST STREET ST. LOUIS, MO 63103  FRIENDS OF AUSTIN COUNTY COLT PROJECT FO BOX 29 CAT SFRING, TX 78933  CLOUST SPRING, TX 78933  CLOUST SPRING TY 78933  CLOUST TY 78933  CLO					, -
2815 LOCUST STREET ST. LOUIS, MO 63103  FRIENDS OF AUSTIN COUNTY COLT PROJECT FO BOX 29 CAT SFRING, TX 78933  CLOUST SPRING, TX 78933  CLOUST SPRING TY 78933  CLOUST TY 78933  CLO					
### ST. LOUIS, MO 63103  #### COUNTY COLT PROJECT PO BOX 29  #### CAT SPRING, TX 78933  #### CAT SPRING  ##### #############################			PC		
FRIENDS OF AUSTIN COUNTY COLT PROJECT PO BOX 29 CAT SPRING, TX 78933  2,000  GLOBAL GARDENS PO BOX 52034 TULSA, OK 74152  ELPING HAND MINISTRY 709 S. BOSTON AVE. TULSA, OK 74119  TULSA, OK 74119  TULSA, OK 74105  GOOD SAMARITAN HEALTH SERVICES 1422 E. 718T ST, STE. B TULSA, OK 74137  TULSA, OK 74139  TULSA, OK 74119				FALL FUNDRAISER	
PO BOX 29 CAT SPRING, TX 78933  CLOBAL GARDENS PO BOX 52034  TULSA, OK 74152  HELPING HAND MINISTRY 709 S. BOSTON AVE. TULSA, OK 74119  TULSA, OK 74119  TULSA, OK 74105  GOOD SAMARITAN HEALTH SERVICES 1422 E. 718T ST, STE. B TULSA, OK 74137  TULSA, OK 74137  PC GENERAL OPERATING 65,000  AMARITAN HEALTH SERVICES PC GENERAL OPERATING 1422 E. 718T ST, STE. B TULSA, OK 74137  TULSA, OK 74137  PC HEALTH/MEDICAL RESEARCH 100,000  JDRF NATIONAL 200 VASEY STREET, 28TH FLOOR NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENMOOD AVE. TULSA, OK 74119  2,000	ST. LOUIS, MO 63103				2,000.
PO BOX 29 CAT SPRING, TX 78933  CLOBAL GARDENS PO BOX 52034  TULSA, OK 74152  HELPING HAND MINISTRY 709 S. BOSTON AVE. TULSA, OK 74119  TULSA, OK 74119  TULSA, OK 74105  GOOD SAMARITAN HEALTH SERVICES 1422 E. 718T ST, STE. B TULSA, OK 74137  TULSA, OK 74137  PC GENERAL OPERATING 65,000  AMARITAN HEALTH SERVICES PC GENERAL OPERATING 1422 E. 718T ST, STE. B TULSA, OK 74137  TULSA, OK 74137  PC HEALTH/MEDICAL RESEARCH 100,000  JDRF NATIONAL 200 VASEY STREET, 28TH FLOOR NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENMOOD AVE. TULSA, OK 74119  2,000					
CAT SPRING, TX 78933   2,000	FRIENDS OF AUSTIN COUNTY COLT PROJECT		PC	GENERAL OPERATING	
GLOBAL GARDENS PO BOX 52034 TULSA, OK 74152  TULSA, OK 74152  TULSA, OK 74152  TULSA, OK 74119  TULSA, OK 74105  FC  GENERAL OPERATING  TULSA, OK 74137  FC  GENERAL OPERATING  TULSA, OK 74137  TULSA, OK 74137  FC  HEALTH/MEDICAL  RESEARCH  TULSA, OK 74130  TULSA, OK 74119	PO BOX 29				
PO BOX 52034 TULSA, OK 74152  #ELPING HAND MINISTRY 709 S. BOSTON AVE. TULSA, OK 74119  #FC GENERAL OPERATING  #FC HEALTH/MEDICAL	CAT SPRING, TX 78933				2,000.
PO BOX 52034 TULSA, OK 74152  #ELPING HAND MINISTRY 709 S. BOSTON AVE. TULSA, OK 74119  #FC GENERAL OPERATING  #FC HEALTH/MEDICAL					
PO BOX 52034 TULSA, OK 74152  #ELPING HAND MINISTRY 709 S. BOSTON AVE. TULSA, OK 74119  #FC GENERAL OPERATING  #FC HEALTH/MEDICAL	GLOBAL GARDENS		PC	GENERAL OPERATING	
TULSA, OK 74152 5,000  HELPING HAND MINISTRY 709 S. BOSTON AVE.  TULSA, OK 74119 2 30,000  IRON GATE 501 W ARCHER ST TULSA, OK 74105 65,000  GOOD SAMARITAN HEALTH SERVICES 1422 E. 71ST ST, STE. B TULSA, OK 74137 5,000  JDRF NATIONAL 200 VASEY STREET, 28TH FLOOR NEW YORK, NY 10281 PC EVENT SPONSORSHIP RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119 2,000					
709 S. BOSTON AVE. TULSA, OK 74119  30,000  IRON GATE 501 W ARCHER ST TULSA, OK 74105  GOOD SAMARITAN HEALTH SERVICES 1422 E. 71ST ST, STE. B TULSA, OK 74137  PC GENERAL OPERATING  55,000  FC GENERAL OPERATING  422 E. 71ST ST, STE. B TULSA, OK 74137  FC HEALTH/MEDICAL RESEARCH NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  2,000	TULSA, OK 74152				5,000.
709 S. BOSTON AVE. TULSA, OK 74119  30,000  IRON GATE 501 W ARCHER ST TULSA, OK 74105  GOOD SAMARITAN HEALTH SERVICES 1422 E. 71ST ST, STE. B TULSA, OK 74137  PC GENERAL OPERATING  55,000  FC GENERAL OPERATING  422 E. 71ST ST, STE. B TULSA, OK 74137  FC HEALTH/MEDICAL RESEARCH NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  2,000					
709 S. BOSTON AVE. TULSA, OK 74119  30,000  IRON GATE 501 W ARCHER ST TULSA, OK 74105  GOOD SAMARITAN HEALTH SERVICES 1422 E. 71ST ST, STE. B TULSA, OK 74137  PC GENERAL OPERATING  55,000  FC GENERAL OPERATING  422 E. 71ST ST, STE. B TULSA, OK 74137  FC HEALTH/MEDICAL RESEARCH NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  2,000					
TULSA, OK 74119  TRON GATE 501 W ARCHER ST TULSA, OK 74105  GOOD SAMARITAN HEALTH SERVICES 1422 E. 71ST ST, STE. B TULSA, OK 74137  TULSA, OK 74137  PC HEALTH/MEDICAL RESEARCH 100,000  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  PC SENERAL OPERATING  FC HEALTH/MEDICAL RESEARCH 100,000			PC	GENERAL OPERATING	
IRON GATE 501 W ARCHER ST TULSA, OK 74105  GOOD SAMARITAN HEALTH SERVICES 1422 E. 71ST ST, STE. B TULSA, OK 74137  JORF NATIONAL 200 VASEY STREET, 28TH FLOOR NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  CENERAL OPERATING  GENERAL OPERATING  FC GENERAL OPERATING  65,000  FC GENERAL OPERATING  65,000  FC GENERAL OPERATING  FC GENERAL OPERATING  100,000  FC GENERAL OPERATING  65,000  FC GENERAL OPERATING  100,000					30 000.
501 W ARCHER ST TULSA, OK 74105  GOOD SAMARITAN HEALTH SERVICES 1422 E. 71ST ST, STE. B TULSA, OK 74137  JORF NATIONAL 200 VASEY STREET, 28TH FLOOR NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  65,000  PC GENERAL OPERATING FC HEALTH/MEDICAL RESEARCH 100,000	Todan, on Tills				30,000.
501 W ARCHER ST TULSA, OK 74105  GOOD SAMARITAN HEALTH SERVICES 1422 E. 71ST ST, STE. B TULSA, OK 74137  JORF NATIONAL 200 VASEY STREET, 28TH FLOOR NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  65,000  PC GENERAL OPERATING FC HEALTH/MEDICAL RESEARCH 100,000					
TULSA, OK 74105  GOOD SAMARITAN HEALTH SERVICES 1422 E. 71ST ST, STE. B  TULSA, OK 74137  DRF NATIONAL 200 VASEY STREET, 28TH FLOOR NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  CSENERAL OPERATING  PC HEALTH/MEDICAL RESEARCH 100,000			PC	GENERAL OPERATING	
GOOD SAMARITAN HEALTH SERVICES  1422 E. 71ST ST, STE. B  TULSA, OK 74137   DOING HEALTH/MEDICAL  200 VASEY STREET, 28TH FLOOR  NEW YORK, NY 10281  DOING HOPE FRANKLIN CENTER FOR  RECONCILIATION  322 N. GREENWOOD AVE.  TULSA, OK 74119  PC GENERAL OPERATING  HEALTH/MEDICAL  RESEARCH  100,000					
1422 E. 71ST ST, STE. B  TULSA, OK 74137   JORF NATIONAL 200 VASEY STREET, 28TH FLOOR NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  5,000	TULSA, OK 74105				65,000.
1422 E. 71ST ST, STE. B  TULSA, OK 74137   JORF NATIONAL 200 VASEY STREET, 28TH FLOOR NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  5,000					
TULSA, OK 74137  JDRF NATIONAL 200 VASEY STREET, 28TH FLOOR NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  5,000	GOOD SAMARITAN HEALTH SERVICES		₽C	GENERAL OPERATING	
JDRF NATIONAL 200 VASEY STREET, 28TH FLOOR NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  PC HEALTH/MEDICAL RESEARCH 100,000  20,000	1422 E. 71ST ST, STE. B				
200 VASEY STREET, 28TH FLOOR  NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR  RECONCILIATION  322 N. GREENWOOD AVE.  TULSA, OK 74119  RESEARCH  100,000  PC  EVENT SPONSORSHIP	TULSA, OK 74137				5,000.
200 VASEY STREET, 28TH FLOOR  NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR  RECONCILIATION  322 N. GREENWOOD AVE.  TULSA, OK 74119  RESEARCH  100,000  PC  EVENT SPONSORSHIP					
200 VASEY STREET, 28TH FLOOR  NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR  RECONCILIATION  322 N. GREENWOOD AVE.  TULSA, OK 74119  RESEARCH  100,000  PC  EVENT SPONSORSHIP	JDRF NATIONAL		PC	   HEALTH/MEDICAL	
NEW YORK, NY 10281  JOHN HOPE FRANKLIN CENTER FOR RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119  100,000  PC EVENT SPONSORSHIP 2,000					
RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119 2,000					100,000.
RECONCILIATION 322 N. GREENWOOD AVE. TULSA, OK 74119 2,000					
322 N. GREENWOOD AVE. TULSA, OK 74119 2,000			PC	EVENT SPONSORSHIP	
TULSA, OK 74119 2,000					
					2 000.
rotal from continuation sneets	Total from continuation sheets			1	

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Y		T		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
KENDALL WHITTIER, INC.		PC	GENERAL OPERATING FOR	
PO BOX 4165			FOOD PANTRY	
TULSA, OK 74159				2,500.
KIPP OF TULSA, INC.		PC	GENERAL OPERATING FOR	
1661 E. VIRGIN ST.			EDUCATION	
TULSA, OK 74106				25,000.
LEADERSHIP TULSA		PC	TULSA CHANGEMAKERS'	
1151 S. ELGIN AVE.			PROGRAM	
TULSA, OK 74120				10,000.
HOLY HIGHWAY EVANGELISTIC CENTER		PC	GENERAL OPERATING	
1019 E. 54TH PL. N.				
TULSA, OK 74106				1,000.
MODUS, INC.		PC	GENERAL OPERATING	
1519 S. HARVARD AVE.				
TULSA, OK 74112				5,000.
NEIGHBORS ALONG THE LINE		PC	GENERAL OPERATING	
5000 CHARLES PAGE BLVD.				
TULSA, OK 74127				6,500.
LINDSEY HOUSE		PC	GENERAL OPERATING	
1607 N. HARTFORD AVE.				
TULSA, OK 74106				10,000.
OKLAHOMA CARING FOUNDATION		PC	OK CARING VAN PROGRAM	
1400 S BOSTON AVE				
TULSA, OK 74119				5,000.
LYDIA PROJECT/CANCER SUPPORT SERVICE		PC	GENERAL OPERATING	
1369 INTERSTATE PKWY				
AUGUSTA, GA 30909				500.
OSU FOUNDATION		PC	SCHOLARSHIP	
400 S MONROE			CONTRIBUTION 2021	
STILLWATER, OK 74074			TUITION	250.
Total from continuation sheets				

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
PARENT CHILD CENTER		PC	GENERAL OPERATING	
1421 S BOSTON AVE				
TULSA, OK 74119				20,000.
PHILOS HOSPITALITY HOUSE		PC	GENERAL OPERATING	
1135 S VICTOR AVE				
TULSA, OK 74127				5,000.
PETS HELPING PEOPLE		PC	GENERAL OPERATING	
2234 E. 56TH PL.				
TULSA, OK 74105				5,000.
RACISMSTINKS SOCIETY		PC	GENERAL OPERATING	
226 E. SEMINOLE PL.				
TULSA, OK 74106				1,500.
REVITALIZE T-TOWN		PC	EVENT SPONSORSHIP	
14 E 7TH ST				
TULSA, OK 74119				2,500.
REVITALIZE T-TOWN		PC	EVENT SPONSORSHIP AND	
14 E 7TH ST			CLIENT SPECIALIST	
TULSA, OK 74119			POSITION	155,000.
RISE AUGUSTA		PC	GENERAL OPERATING	
PO BOX 1604				
AUGUSTA, GA 30903				1,000.
SOUTH PEORIA NEIGHBORHOOD CONNECTION		₽C	GENERAL OPERATING FOR	
5780 S PEORIA AVE			EDUCATION	
TULSA, OK 74105				10,000.
STONE RIDGE ELEMENTARY		₽C	CONTRIBUTIONS FOR	
10000 W MEMORIAL RD			CLASSROOMS	
YUKON, OK 73099				750.
SAN MIGUEL		PC	GENERAL OPERATING FOR	
2444 E. ADMIRAL BLVD.			EDUCATION	
TULSA, OK 74110				10,000.
Total from continuation sheets				

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Y		T		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
wante and address (notifie of business)	or substantial contributor	recipient		
SANGHA, INC.		PC	GENERAL OPERATING	
8811 S. YALE AVE., STE. 400				
PULSA, OK 74137				10,000
THE SPRING		PC	GENERAL OPERATING	
PO BOX 1588				
SAND SPRINGS, OK 74063				5,000
PULSA AREA UNITED WAY		PC	GENERAL CAMPAIGN FOR	
.430 S BOULDER			OPERATIONS	
PULSA, OK 74119				100,000
CULSA CHILDREN'S MUSEUM		PC	2ND & FINAL MYG -	
660 N. MAYBELLE AVE.			CAPITAL CAMPAIGN FOR	
PULSA, OK 74127			EDUCATION	50,000
ULSA COMMUNITY FOUNDATION		PC	сомм	
030 SOUTH YALE AVENUE, SUITE 600			IMPROVEMENT/PUBLIC	
PULSA, OK 74136			SOCIETAL BENEFIT-4TH	
			OF 10 MYG - GATHERING	200 000
			PLACE	300,000
CULSA DEBATE LEAGUE		PC	GENERAL OPERATING	
P.O. BOX 35711 PULSA, OK 74153				5,000
MGA OF MILL GA		D.C.	CADIMAL CAMPATON	
MCA OF TULSA 120 S. MAIN ST.		PC	CAPITAL CAMPAIGN	
PULSA, OK 74103				100,000
OUTH SERVICES OF TULSA		₽C	1ST OF 2 MYG - GENERAL	
311 S. MADISON AVE.			OPERATING	
PULSA, OK 74120				20,000
NEW LEAF (VIA AMEX)		PC	GENERAL OPERATING	
2306 S. 1ST PL.				
BROKEN ARROW, OK 74012				500
		PC	1ST OF 2 MYG - TURKEY	
RIVER PARKS FOUNDATION				
RIVER PARKS FOUNDATION 2121 S. COLUMBIA AVE., STE. 205			MOUNTAIN TRAILS	

Part XIV Supplementary Information									
3 Grants and Contributions Paid During the Year (Continuation)									
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution						
DONORSCHOOSE 134 WEST 37TH STREET. 11TH FLOOR NEW YORK, NY 10018		PC	GENERAL OPERATING	100.					
FOOD BANK OF EASTERN OK 1304 N. KENOSHA AVE. TULSA, OK 74106		PC	FOOD FOR KIDS PROGRAM	500.					
WORLD WON DEVELOPMENT 1125 E. 36TH ST. N. TULSA, OK 74106		₽C	BEYOND APOLOGY-TULSA RACE MASSACRE-COMM IMPROVEMENT/PUBLIC SOCIETAL BENEFIT	5,000.					
TULSA GIRLS ART SCHOOL 2202 E. ADMIRAL BLVD TULSA, OK 74110		PC	PROGRAM SUPPORT-ARTS CULTURE & HUMANITIES	5,000.					
TULSA DAY CENTER 415 W. ARCHER ST TULSA, OK 74103		PC	MEDICAL CLINIC SUPPORT	10,000.					
TULSA DAY CENTER 415 W. ARCHER ST TULSA, OK 74103		₽C	MEDICAL CLINIC SUPPORT	2,500.					
Total from continuation sheets									

# Form **2220**Department of the Treasury Internal Revenue Service

**Underpayment of Estimated Tax by Corporations** 

Attach to the corporation's tax return. FOR Go to www.irs.gov/Form2220 for instructions and the latest information.

FORM 990-PF

OMB No. 1545-0123

Name

Employer identification number

HILLE FAMILY CHARITABLE FOUNDATION 73-1521975

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

	Part I Required Annual Payment						
1	Total tax (see instructions)					1	19,346.
	<ul> <li>a Personal holding company tax (Schedule PH (Form 1120), line</li> <li>b Look-back interest included on line 1 under section 460(b)(2) contracts or section 167(g) for depreciation under the income</li> </ul>	for co	ompleted long-term			-	
	c Credit for federal tax paid on fuels (see instructions) d Total. Add lines 2a through 2c					2d	
	Subtract line 2d from line 1. If the result is less than \$500, <b>do</b> does not owe the penalty	not c	omplete or file this form.	The corporation		3	19,346.
4	Enter the tax shown on the corporation's 2021 income tax retu or the tax year was for less than 12 months, skip this line and					4	15,055.
	Required annual payment. Enter the smaller of line 3 or line enter the amount from line 3  Part II Reasons for Filing - Check the boxes below				tion <b>must</b> file Form 2	<b>5</b>	15,055.
6 7 8	The corporation is using the annualized income installi	ment	method.	n the prior year's tax			
			(a)	(b)	(c)		(d)
	Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year  Required installments. If the box on line 6 and/or line 7	9	05/15/22	06/15/2	2 09/15/	′22	12/15/22
11	above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	3,764.	3,76	4. 3,7	763.	3,764.
•	column (a) only, enter the amount from line 11 on line 15. See instructions	11					
12	Complete lines 12 through 18 of one column before going to the next column. Enter amount, if any, from line 18 of the preceding column	12					
	Add lines 11 and 12	13					
	Add amounts on lines 16 and 17 of the preceding column	14		3,76	4. 7,5	528.	11,291.
	Subtract line 14 from line 13. If zero or less, enter -0-	15	0.		0.	0.	0.
16	If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		3,76	4. 7,5	528.	
17	Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next	17	3,764.	3,76	4. 3.7	763.	3,764.
18	Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18	0,7011	3,10			37704

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Form 2220 (2022)

Part IV Figuring the Penalty

			(a)	(b)	(c)		(d)	
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier.  (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month.  Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19						
20	Number of days from due date of installment on line 9 to the							
	date shown on line 19	20						
21	Number of days on line 20 after 4/15/2022 and before 7/1/2022	21						
22	Underpayment on line 17 x Number of days on line 21 x 4% (0.04)	22	\$	\$	\$		\$	
23	Number of days on line 20 after 6/30/2022 and before 10/1/2022	23						
24	Underpayment on line 17 x Number of days on line 23 x 5% (0.05)	24	\$	\$	\$		\$	
25	Number of days on line 20 after 9/30/2022 and before 1/1/2023	25						
26	Underpayment on line 17 x Number of days on line 25 x 6% (0.06)	26	\$	\$	\$		\$	
27	Number of days on line 20 after 12/31/2022 and before 4/1/2023	27	SEE	ATTACHED W	ORKSHEET			
28	Underpayment on line 17 x Number of days on line 27 x 7% (0.07)	28	\$	\$	\$		\$	
29	Number of days on line 20 after 3/31/2023 and before 7/1/2023	29						
30	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$	\$		\$	
31	Number of days on line 20 after 6/30/2023 and before 10/1/2023	31						
32	Underpayment on line 17 x Number of days on line 31 x *% 365	32	\$	\$	\$		\$	
33	Number of days on line 20 after 9/30/2023 and before 1/1/2024	33						
34	Underpayment on line 17 x Number of days on line 33 x *% 365	34	\$	\$	\$		\$	
35	Number of days on line 20 after 12/31/2023 and before 3/16/2024	35						
36	Underpayment on line 17 x Number of days on line 35 x *% 366	36	\$	\$	\$		\$	
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$		\$	
38	<b>Penalty.</b> Add columns (a) through (d) of line 37. Enter the to	tal he	ere and on Form 1120, lin	e 34; or the comparable		20	œ.	698.

Form **2220** (2022)

<sup>\*</sup> Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

## FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying No	umber
HILLE FAMIL	Y CHARITABLE	FOUNDATION		73-15:	21975
(A)	(B)	(C) Adjusted	(D) Number Days	(E) Daily	(F)
*Date	Amount	Balance Due	Balance Due	Penalty Rate	Penalty
05/15/22	3,764.	3,764.	31	.000109589	13.
06/15/22	3,764.	7,528.	15	.000109589	12
06/30/22	0.	7,528.	77	.000136986	79
09/15/22	3,763.	11,291.	15	.000136986	23
09/30/22	0.	11,291.	76	.000164384	141
12/15/22	3,764.	15,055.	16	.000164384	40.
12/31/22	0.	15,055.	135	.000191781	390
enalty Due (Sum of Colur	nn F).				698

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

FORM 990-PF INTERES	T ON SAVINO	GS AND TEMPOR.	ARY CASH IN	IVESTMENTS	STATEMENT 1
SOURCE		(A) REVENUE PER BOOK		(B) IVESTMENT ICOME	(C) ADJUSTED NET INCOME
EXERBOTICS K-1 INTEREST INCOME		1,4 123,9	59. 53.	1,459. 123,953.	1,459. 123,953.
TOTAL TO PART I, LIN	TE 3	125,4	12.	125,412.	125,412.
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	RITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVES MENT INCO	
DIVIDEND INCOME	309,080.	0.	309,080.	309,08	309,080.
TO PART I, LINE 4	309,080.	0.	309,080.	309,08	309,080.
_					
FORM 990-PF		RENTAL INCOM	E		STATEMENT 3
KIND AND LOCATION OF	' PROPERTY			ACTIVITY NUMBER	GROSS RENTAL INCOME
21 NORTH GREENWOOD,	LLC			1 2	273,288.
TOTAL TO FORM 990-PF	', PART I, I	LINE 5A			273,288.

FORM 990-PF	RENTAL EXP	ENSES		STATEMENT 4
DESCRIPTION		CTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION AMORTIZATION 21 NORTH GREENWOOD 21 NORTH GREENWOOD - VISTA INTEREST EXPENSE	_		571,465. 1,346. 207,831. 138,164. 483,945.	
-	SUBTOTAL -	2		1,402,751
TOTAL RENTAL EXPENSES			_	1,402,751
NET RENTAL INCOME TO FORM 99	0-PF, PART I	, LINE 5B	=	-1,129,463.
FORM 990-PF	OTHER I	NCOME		STATEMENT 5
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MISCELLANEOUS INCOME GREENARCH P3K EXERBOTICS LLC	_	571. -91,877. 27,012. -837.	571. 0. 0.	0.0
TOTAL TO FORM 990-PF, PART I	, LINE 11 ==	-65,131.	571.	0.
FORM 990-PF	LEGAL	FEES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	255,123.	127,562	. 0	127,562
TO FM 990-PF, PG 1, LN 16A	255,123.	127,562		127,562

FORM 990-PF	ACCOUNTI	NG FEES	S.	PATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROFESSIONAL FEES	66,973.	33,486.	0.	33,486.
TO FORM 990-PF, PG 1, LN 16B	66,973.	33,486.	0.	33,486.
FORM 990-PF C	THER PROFES	SIONAL FEES	gr	TATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BROKER FEES	147,252.	147,252.	0.	0.
TO FORM 990-PF, PG 1, LN 16C	147,252.	147,252.	0.	0.
FORM 990-PF	TAX	F.S.	gr	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES FOREIGN TAXES WITHHELD ON	37,234.	17,906.	0.	19,328.
DIVIDEND INCOME	7,480.	7,480.	0.	0.
FEDERAL EXCISE TAXES	12,848.		0.	0.
PROPERTY TAX	119,069.	57,261.	0.	61,808.
TO FORM 990-PF, PG 1, LN 18	176,631.	82,647.	0.	81,136.

FORM 990-PF	OTHER E	XPENSES	PATEMENT 10	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVERTISING INSURANCE MEALS & ENTERTAINMENT MEMBERSHIP FEE OFFICE PENALTIES & INTEREST PTE DEDUCTIONS MISC EXPENSE 21 NORTH GREENWOOD 21 NORTH GREENWOOD - VISTA AMORTIZATION	2,420. 20,620. 1,279. 250. 23,311. 0. 348. 500. 207,831. 138,164. 1,346.	9,916. 615. 120. 11,211. 0. 0.	0. 0. 0. 0. 0. 0.	2,420. 10,704. 664. 130. 12,101. 0. 0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	396,069.	22,362.	0.	26,019.

FORM 990-PF U.S. AND STAT	E/CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT 11
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
US TREASURY NOTE 2.25% US TREASURY NOTE 3.0% US TREASRY NOTE 2.625%	X X X		2,407,530. 2,447,255. 2,453,130.	2,397,275. 2,441,025. 2,449,125.
TOTAL U.S. GOVERNMENT OBLIGATION	ıs	-	7,307,915.	7,287,425.
TOTAL STATE AND MUNICIPAL GOVERN	MENT OBLIG	ATIONS		
TOTAL TO FORM 990-PF, PART II, L	INE 10A	-	7,307,915.	7,287,425.

FORM 990-PF	CORPORATE STOCK	STATEMENT 12

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
ABB LTD CHF	39,815.	43,521.
ADIDAS AG	13,931.	5,590.
AIA GROUP LTD	52,106.	58,697.
AIR LIQUIDE FN	22,057.	21,054.
AIRBUS SE	30,429.	29,148.
ALIBABA GROUP HOLDING LT	229,311.	132,135.
AMAZON COM INC COM	198,698.	109,200.
AMERICA MOVIL SAB DE CV ADR SERIES L	11,363.	11,339.
ANHEUSER-BUSCH INBEV SA/	32,343.	32,129.
AON PLC REG SHS	8,722.	13,206.
APPLE INC	57,708.	246,867.
ASAHI KASEI CORP 3407	22,680.	15,454.
ASML HOLDING N.V.	45,682.	57,532.
ASSA ABLOY AB SHS SEK	9,979.	8,974.
ASTRAZENECA PLC SHS FN GBP	46,426.	77,726.
B AND M	12,358.	7,218.
BEIGENE LTD	18,540.	20,234.
BRITISH AMERICAN TOBACCO	39,890.	43,105.
CARLSBERG AS-B 20.DKK	34,672.	36,303.
CIE FINANCIERE RICHEMONT	12,724.	17,884.
CONOCOPHILLIPS	71,068.	247,800.
CONSUMER DISCRETIONARY SPDP	208,553.	230,551.
DAIICHI SANKYO CO LTD	12,139.	17,136.
DAIKIN INDUSTRIES	13,458.	9,492.
DBS GROUP HOLDINGS LTD	26,558.	33,131.
DEUTSCHE BOERSE AG	9,465.	11,503.
DSV A/S	11,068.	15,737.
DUPONT DE NEMOURS, INC	78,854.	54,286.
EAST WEST BANCORP INC	199,760.	175,624.
ENEL SPA	22,581.	15,283.
ENGIE	17,001.	18,032.
EPIROC AB REG SHS	23,088.	18,676.
ESSILORLUXOTTICA	43,244.	55,618.
EXXON MOBIL CORP COM	96,615.	165,450.

HILLE FAMILY CHARITABLE FOUNDATION		73-1521975
GENMAB A/S DKK	24,895.	43,474.
GIVAUDAN SA UNSP ADR	23,599.	25,934.
HALLIBURTON COMPANY	45,034.	51,942.
HDFC BANK LTD ADR	30,482.	32,768.
HERMES INTL S A	16,030.	32,386.
HONG KONG EXCHANGES AND 1 HKD	6,066.	4,320.
IBERDROLA SA, BILBAO	27,327.	29,582.
INDUSTRIA DE DISENO TEXT	26,790.	27,794.
ING GROUP NV SHS	10,632.	10,635.
INTL FLAVORS & FRANGRANCE	87,194.	65,840.
INVESCO DYNAMIC BIOTECH AND GENOME ETF	139,384.	482,577.
INVESCO EXCHANGE-TRADED FD TR	305,363.	437,364.
INVESCO WTR RESOURCES	200,760.	618,480.
ISHARES S&P 100	256,434.	656,695. 11,503. 76,352.
JARDINE MATHESON HLDGS	10,730.	11,503.
JOHNSON CONTROLS INTER	25,419.	76,352.
JPMORGAN CHASE & CO	231,006.	683,910.
KERING	43,403.	40,091.
KEYENCE CORP 6861	45,934.	53,390.
KNIGHT-SWIFT TRANSPORTATION HOLD CL A	97,719.	262,050.
KONINKLIJKE KPN NV FN.	23,451.	22,056.
KYNDRYL HOLDINGS INCORP	13,049.	4,448.
L.V.M.H.	27,282.	37,007.
LONDON STK EXCHANGE GROU GBP	36,566.	42,490.
LOREAL	29,772.	29,551.
MATERIALS SELECT SECTOR SPDR FUND	382,958.	567,064.
MERCADOLIBRE INC	15,624.	18,617.
META PLATFORMS, INC. CLASS A CS	257,878.	240,680.
NESTLE SA CHAM UND VEVE	32,605.	42,384.
NETEASE INC REG SHS	13,177.	8,230.
NICE LTD ADR	11,847.	8,077.
NIDEC CORP 6594 JPY	14,870.	9,589.
NITORI HOLDINGS	26,384.	17,703.
NOKIA(AB)OY	13,464.	10,847.
NOVO NORDISK	48,692.	88,040.
OCCIDENTAL PETE CORP CAL	382,942.	503,920.
ORSTED	15,765.	9,332.
OTIS WORLDWIDE CORP	66,245.	105,719.
PFIZER, INC.	232,180.	512,400.
QUALCOMM INC	200,877.	170,407.
RAYTHEON TECHNOLOGIES CORP	147,397.	272,484.
RECKITT BENCKISER GROUP GBP	31,885.	26,717.
RECRUIT HOLDINGS CO.LTD. SHS 6098	20,331.	17,380.
RELX PLC	15,220.	14,697.
SAFRAN SA	51,300.	53,157.
SAP SE	39,879.	31,263.
SECTOR SPDR INDUSTRIAL	493,675.	761,128.
SHIN ETSU CHEMICAL	29,651.	29,143.
SHIONOGI & CO LTD 4507 JPY PAR ORDINARY	17,818.	16,122.
SMC CORP	27,612.	28,223.
SPDR US FINANCIAL SECTOR	284,300.	342,000.
ST MICROELEC SIC	29,161.	25,389.
STRAUMANN HLDGS	16,172.	19,403.
TAIWAN S MANUFCTRING ADR	40,976.	39,331.
TE CONNECTIVITY LTD REG SHS	36,417.	143,500.
TENCENT HOLDINGS LTD SHS HKD	26,800.	20,840.
TERUMO	11,946.	9,710.
TFI INTERNATIONAL INC	15,258.	28,769.

HILLE FAMILY CHARITABLE FOUNDATION		73-1521975
T-MOBILE US INC SHS	199,474.	223,300.
TOKYO ELECTRON	6,584.	5,009.
TOTAL ENERGIES SE	43,802.	54,332.
UNI CHARM CO LTD 8113 FN JPY	12,706.	13,520.
VERTEX PHARMCTLS INC	200,865.	271,453.
ADYEN N.V. SHS	13,860.	10,391.
AMADEUS IT GROUP SA	20,596.	19,690.
BHP GROUP LTD	11,236.	11,573.
DNB BANK ASA REG SHS	22,588.	22,601.
FUJITSU LTD 6702	20,219.	17,756.
INPEX CORPORATION	7,645.	
MTU AERO ENGINES AG	15,478.	17,341.
NIPPON TEL & TEL 9432	29,729.	
SHOPIFY INC CL A	8,136.	9,511.
SIKA AG NAMEN-AKT	17,058.	
SOCIEDAD Q&M CHLE SPDADR	13,247.	
WORLDLINE SA ACT	6,476.	5,731.
DANON S.A.	17,395.	
TECHNOLOGY SELECT	586,636.	1,963,041.
TOTAL TO FORM 990-PF, PART II, LINE 10B	7,862,243.	12,753,250.

FORM 990-PF DEPRECIATION OF ASS	ETS HELD FOR INV	JESTMENT	STATEMENT 13
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
BUILDING COSTS - 21 N GREENWOOD INC PARKING ICE CUBER W/ ICE BIN MAGIC	28,747,444.	552,835.	28,194,609.
REFRIGERATOR PORTABLE BAR FOR VISTA	5,260. 5,321.	789. 190.	4,471. 5,131.
LOAN COSTS - OK FIDELITY TENANT IMPROVEMENTS - 4TH	161,472.	1,346.	160,126.
FLOOR (PW) 21 N GREENWOOD - LAND COSTS	1,588,624. 890,723.	17,651. 0.	1,570,973. 890,723.
TOTAL TO FM 990-PF, PART II, LN 11	31,398,844.	572,811.	30,826,033.

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
EXERBOTICS (PARTNERSHIP)	COST	92,018.	92,018.
GREENARCH LLC	COST	325,977.	325,977.
OTHER HOLDINGS @ P3K, LLC	COST	668,680.	668,680.
PERRY PRESTON GROUP (P3K, LLC)	COST	1,136,974.	1,136,974.
ONETULSA, LLC	COST	29,974.	29,974.
TOTAL TO FORM 990-PF, PART II, L	INE 13	2,253,623.	2,253,623.
FORM 990-PF DEPRECIATION OF ASS	SETS NOT HELD FOR	INVESTMENT	STATEMENT 15
		<del></del>	
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
PRINTER	2,508.	2,508.	0.
COMPUTER	2,150.	2,150.	0.
GRANT MGMT SOFTWARE	24,800.	24,800.	0.
APPLE COMPUTERS	8,470.	8,470.	0.
LAPTOP COMPUTERS	5,154.	2,883.	2,271.
LAPTOPS, IPAD & DESKTOP	, =	_,	_,
COMPUTERS	12,843.	6,728.	6,115.
SHREDDER	303.	303.	0.
SONICWALL TX37005	1,548.	344.	1,204.
COMPUTER EQUIPMENT	5,910.	788.	5,122.
WEBSITE DESIGN	8,200.	228.	7,972.
TOTAL TO FM 990-PF, PART II, LN 3	71,886.	49,202.	22,684.
FORM 990-PF	OTHER ASSETS		STATEMENT 16
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
CONSTRUCTION IN PROGRESS ACCRUED DIVIDEND INCOME	22,869,127.	0. 13,159.	0. 13,159.
TO FORM 990-PF, PART II, LINE 15	22,869,127.	13,159.	13,159.

FORM 990-PF	(	OTHER LI	ABILITII	ES 		STA	TEMENT 17
DESCRIPTION				BOY A	MOUNT	EOY	AMOUNT
ACCRUED PAYROLL CREDIT CARD PAYABLE					3,709		3,308. 7,344.
TOTAL TO FORM 990-PF,	PART II,	LINE 22			5,935	5.	10,652.
FORM 990-PF	INTER	EST AND	PENALTI			STA'	гемент 18
TAX DUE FROM FORM 99 UNDERPAYMENT PENAL LATE PAYMENT INTER LATE PAYMENT PENAL	TY EST	V					19,346. 698. 720. 580.
TOTAL AMOUNT DUE							21,344.
FORM 990-PF	Li	ATE PAYM	ENT INTE	REST		STA	rement 19
DESCRIPTION	DATE	AMOUN	T I	BALANCE	RATE	DAYS	INTEREST
TAX DUE INTEREST RATE CHANGE DATE FILED	05/15/23 09/30/23 11/15/23	19,	346.	19,346, 19,865, 20,066,	.080		519. 201.
TOTAL LATE PAYMENT IN	TEREST						720.
FORM 990-PF	Lž	ATE PAYM	ENT PENA	ALTY		STA	rement 20
DESCRIPTION	DA	re .	AMOUNT	BALAN	ICE	MONTHS	PENALTY
TAX DUE DATE FILED	05/1! 11/1!		19,346		9,346. 9,346.	6	580.
TOTAL LATE PAYMENT PE	NALTY						580.

FORM 990-PF PART VII - LIST TRUSTEES AND	OF OFFICERS, DIF		STATI	EMENT 21
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
MARY ANN HILLE 3915 S. LEWIS PLACE TULSA, OK 74105	CO TRUSTEE, MBR 10.00		BOARD 0.	0.
MARGARET YAR 2651 E 66TH ST TULSA, OK 74136	EXEC DIRECTOR, 40.00			BD 0.
SHIRLEY MARTIN 4611 E 55TH TULSA, OK 74135	GRANT MANAGER, M			0.
LESLIE HAMRICK 3523 WEST LAKE DRIVE MARTINEX, GA 30907	GRANT REPORT OF		GRNT MKG 7,225.	BD 0.
SHEILA LEQUERICA 867 GRANADA ROAD SEALY, TX 77474	GRANT REPORT OF	FFICER,MBR 0		0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VII	366,995.	69,330.	0.

GENERAL EXPLANATION

STATEMENT 22

FORM/LINE IDENTIFIER

FORM 990PF PART VI-B, LINE 1A(2)

**EXPLANATION:** 

ON SEPTERMBER 28, 2022 THE FOUNDATION BORROWED FUNDS FROM MARY ANN HILLE WHILE OBTAINING BANK FINANCING FOR NEW BUILDING. THE FUNDS WERE REPAID TO MARY ANN HILLE ON DECEMBER 5, 2022 ALONG WITH 4.75% INTEREST.

RENT

Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	Description	Description Acquired  Acquired	Description Acquired Method  Acquired Method	Description Acquired Method Life	Description  Acquired  Method  Life  on  v  acquired  Method  Life  on  v  acquired  A	Description  Acquired  Method  Life  O  No.	Description  Acquired Method Life 0 No. Cost Or Basis  Acquired I I I I I I I I I I I I I I I I I I I	Description  Acquired Method Life 0 No. Cost 0r Basis % Excl	Description  Acquired Method Life 0 No No Cost Or Basis 2 No Expense Excl  Expense Expense Excl  Excl  Excl  Expense Excl   Description  Acquired Method Life on No. Cost Or Basis on Expense Basis	Description  Acquired Method Life o No. Cost Or Basis Section  Expense Basis Depreciation  Acquired Method Life o No. Cost Or Basis Section  Expense Basis Depreciation  Acquired Method Life o No. Cost Or Basis Section  Expense Basis Depreciation  Acquired Method Life o No. Cost Or Basis Section  Expense Basis Depreciation  Acquired Method Life o No. Cost Or Basis Section  Expense Basis Depreciation  Expense Basis Depreciation  Acquired Method Life o No. Cost Or Basis Section  Expense Basis Depreciation  Expense Basis Depreciation  Acquired Method Life o No. Cost Or Basis Section  Expense Basis Depreciation  Exp	Description  Acquired Method Life   Output  Cost Or Basis   Co	Description  Acquired Method Life of New Cost of Basis Excl.  Excl. Superior Exception Depreciation Accumulated Excl. Soc 179 Depreciation Accumulated Depreciation Accumul	Description  Acquired Method Life on No. Cost Of Basis Section	

#### 2022 DEPRECIATION AND AMORTIZATION REPORT

21 NORTH GREENWOOD, LLC

RENT

2

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
85	BUILDING COSTS - 21 N GREENWOOD INC PARKING	03/31/22	SL	39.00	1	16	28747444.				28747444.			552,835.	552,835.
88	ICE CUBER W/ ICE BIN MAGIC REFRIGERATOR	04/12/22	SL	5.00	1	16	5,260.				5,260.			789.	789.
90	PORTABLE BAR FOR VISTA	09/26/22	SL	7.00	1	16	5,321.				5,321.			190.	190.
91	LOAN COSTS - OK FIDELITY TENANT IMPROVEMENTS - 4TH	12/05/22		120M	HY4	42	161,472.				161,472.			1,346.	1,346.
93	FLOOR (PW)	11/01/22	SL	15.00	1	16:	.,588,624.				1,588,624.			17,651.	17,651.
95	21 N GREENWOOD - LAND COSTS	03/31/22	L				890,723.				890,723.			0.	
	* 990-PF RENTAL TOTAL OTHER						31398844.				31398844.	0.		572,811.	572,811.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						0.			0.	0.	0.			0.
	ACQUISITIONS						31398844.			0.	31398844.	0.			572,811.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						31398844.			0.	31398844.	0.			572,811.
	ENDING ACCUM DEPR											572,811.			
	ENDING BOOK VALUE											30826033.			

#### 2022 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1 990-PF

	70 II IAGE I							JJ0 II							
Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
25	PRINTER	06/01/09	SL	5.00		16	2,508.				2,508.	2,508.		0.	2,508.
28	COMPUTER	07/21/10	SL	5.00		16	2,150.				2,150.	2,150.		0.	2,150.
29	GRANT MGMT SOFTWARE	01/01/14	SL	3.00		16	24,800.				24,800.	24,800.		0.	24,800.
30	APPLE COMPUTERS	10/01/14	SL	5.00		16	8,470.				8,470.	8,470.		0.	8,470.
69	LAPTOP COMPUTERS	02/04/19	SL	7.00		16	5,154.				5,154.	2,147.		736.	2,883.
70	LAPTOPS, IPAD & DESKTOP COMPUTERS	05/09/19	SL	7.00		16	12,843.				12,843.	4,893.		1,835.	6,728.
74	SHREDDER	03/20/03	SL	5.00		16	303.				303.	303.		0.	303.
75	SONICWALL TX37005	05/03/22	SL	3.00		16	1,548.				1,548.			344.	344.
76	COMPUTER EQUIPMENT	05/13/22	SL	5.00		16	5,910.				5,910.			788.	788.
77	WEBSITE DESIGN	11/30/22	SL	3.00		16	8,200.				8,200.			228.	228.
	* 990-PF PG 1 TOTAL OTHER						71,886.				71,886.	45,271.		3,931.	49,202.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						56,228.			0.	56,228.	45,271.			47,842.
	ACQUISITIONS						15,658.			0.	15,658.	0.			1,360.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						71,886.			0.	71,886.	45,271.			49,202.
	ENDING ACCUM DEPR											49,202.			

FORM 990-PF PAGE 1 990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	ENDING BOOK VALUE											22,684.			

#### UNRELATED BUSINESS INCOME

### **CARRYOVER DATA TO 2023**

Name HILLE FAMILY CHARITABLE FOUNDATION	Employer Identification Number 73-1521975
Based on the information provided with this return, the following are possible carryover amounts to next year.	
FEDERAL POST-2017 NET OPERATING LOSS - DEBT FINANCED	RENTAL 1,549,579.
FEDERAL POST-2017 NET OPERATING LOSS - EXERCISE AND	
FEDERAL FOST-2017 NET OPERATING LOSS - EXERCISE AND	057.
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	·
	·

Name:	HILLE	FAMILY.	CHARITABLE	FOUNDATION
maille.	птппр	LWHITI	CHARTIADDE	LOONDALION

FEIN: 73-1521975

'ear )rigi-	2 Annual Limitation Original Carryover	Total Amount	Section 382 Carryover Amount Used for	Amount Used for	Amoun Used fo						
ated 2020	Amount 167,929. 157,197.	Used									
2021 2022	157,197. 1,224,453.										
	, ,										
	E Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amou
etail S ype E	S Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used 1
ype (											

Name:	HILLE	FAMILY	CHARITABLE	FOUNDATION

FEIN:

73-1521975

	and Entity: EXI	ERCISE AND FITE	NESS POST-2017 Section 382 Carryover	NOL	DETAIL C	ARRYOVER SCH	EDULE				
Year Origi- nated	Original Carryover Amount	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A 2022 B C	837.										
D E F G											
J H											
K L M											
N O P Q											
R S T											
V W											
Detai Type		Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A B C											
D E F G											
H I J											
K L M											
N O P Q											
R S T											
U V W											

73-1521975

Form **990-W** (Worksheet)

# Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations

► Keep for your records. Do not send to the Internal Revenue Service.

(and on Investment Income for Private Foundations) FORM 990-T

2023

1	Unrelated business taxable income expected in the tax ye	ear				1	
0	Tay on the amount on line 1					2	
2	Tax on the amount on line 1						
3	Alternative minimum tax for trusts					3	
4	Total. Add lines 2 and 3					4	
5	Estimated tax credits					5	
6	Subtract line 5 from line 4					6	
7						7	
7	Other taxes					<b>-</b>	
8	Total. Add lines 6 and 7					8	
9	Credit for federal tax paid on fuels					9	
10a	Subtract line 9 from line 8. <b>Note:</b> If less than \$500, the c	organiza	ation does not need to ma	ıke			
	estimated tax payments			1 1			
b	Enter the tax shown on the 2022 return. Caution: If						
	zero or the tax year was for less than 12 months, skip th				- 460		
					5,463.		
С	2023 Estimated Tax. Enter the smaller of line 10a or line					10c	5,480.
	from line 10a on line 10c		(a)	(b)	(c)	100	(d)
11	Installment due dates	11					12/15/23
••	mataminent due dates						22,23,23
12	Installments. Enter 25% of line 10c in						
	columns (a) through (d)	12					5,480.
13	2022 Overpayment	13					
10	2022 010.9491110111						
14	Payment due (Subtract line 13 from line 12)	14					5,480.

Form **990-W** 

### Form 8879-TF

# NOT A FILEABLE COPY

C	Sign	ature Authorization	
a	Tăx	Exempt Entity	

For calendar year 2022, or fiscal year beginning

, 2022, and ending

OMB No. 1545-0047

Do not send to the IRS. Keep for your records.

Department of the Treasury Go to www.irs.gov/Form8879TE for the latest information. Internal Revenue Service Name of filer EIN or SSN HILLE FAMILY CHARITABLE FOUNDATION 73-1521975 Name and title of officer or person subject to tax MARGARET HILLE YAR EXECUTIVE DIRECTOR Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. **b Total revenue,** if any (Form 990, Part VIII, column (A), line 12) \_\_\_\_\_ **1b** Form 990 check here ...... 1a **b Total revenue,** if any (Form 990-EZ, line 9) 2a Form 990-EZ check here b Total tax (Form 1120-POL, line 22) Form 1120-POL check here 3a Tax based on investment income (Form 990-PF, Part V, line 5) 4a Form 990-PF check here 4b b Balance due (Form 8868, line 3c) Form 8868 check here ..... 5b 5a **b Total tax** (Form 990-T, Part III, line 4) Form 990-T check here ..... 6a 7a Form 4720 check here b Total tax (Form 4720, Part III, line 1) 7b 8a Form 5227 check here ..... **b FMV of assets at end of tax year** (Form 5227, Item D) 8b Form 5330 check here ..... **b** Tax due (Form 5330, Part II, line 19) 9a 9b **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10a Form 8038-CP check here 10b **Declaration and Signature Authorization of Officer or Person Subject to Tax** Under penalties of perjury, I declare that X I am an officer of the above entity or I I am a person subject to tax with respect to (name , (EIN) and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information processary to answer inquiries and resolve issues related to the payment. I have selected a payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only 54814 X Lauthorize EIDE BAILLY LLP to enter my PIN Enter five numbers, but ERO firm name do not enter all zeros as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program. I will enter my PIN on the return's disclosure consent screen. \*\*\*\* THIS IS NOT A FILEABLE COPY \*\*\*\* Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification 73092706910 number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. JANICE WILBURN, CPA 11/15/23 ERO's signature Date **ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

Form **8879-TE** (2022)

#### Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

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

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Taxpayer identification number (TIN) Type or Name of exempt organization or other filer, see instructions. print HILLE FAMILY CHARITABLE FOUNDATION 73-1521975 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 10 N GREENWOOD AVE, 103 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions 74120 TULSA, OK Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return Application Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 12 06 Form 8870 Form 990-T (corporation) THE FOUNDATION The books are in the care of ► 10 N. GREENWOOD, S103 - TULSA, OK 74120 Telephone No. ► 918-592-0079 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)

. If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2023 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2022 or tax year beginning , and ending Final return If the tax year entered in line 1 is for less than 12 months, check reason: | Initial return Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 1,480. any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 1,480. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

EXTENDED TO NOVEMBER 15, 2023 **Exempt Organization Business Income Tax Return** Form 990-T OMB No. 1545-0047 (and proxy tax under section 6033(e)) For calendar year 2022 or other tax year beginning Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury Internal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Check box if Name of organization ( Check box if name changed and see instructions.) address changed. **B** Exempt under section Print HILLE FAMILY CHARITABLE FOUNDATION 73-1521975 Group exemption number (see instructions) X 501(c)(3 Number, street, and room or suite no. If a P.O. box, see instructions. Type 408(e) 220(e) 10 N GREENWOOD AVE, 103 408A ]530(a) City or town, state or province, country, and ZIP or foreign postal code ]529(a) [ TULSA, OK 74120 529A Check box if 54,581,612. C Book value of all assets at end of year .... an amended return. X 501(c) corporation 501(c) trust 401(a) trust Other trust State college/university Check organization type Claim credit from Form 8941 Claim a refund shown on Form 2439 Check if filing only to Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation Enter the number of attached Schedules A (Form 990-T) 3 X No During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes If "Yes," enter the name and identifying number of the parent corporation. THE FOUNDATION 918-592-0079 The books are in care of Telephone number **Total Unrelated Business Taxable Income** Part I Total of unrelated business taxable income computed from all unrelated trades or businesses (see 27,012. instructions) 1 2 Reserved 2 27,012 3 3 Add lines 1 and 2 4 Charitable contributions (see instructions for limitation rules) 4 27,012. Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 5 5 Deduction for net operating loss. See instructions 6 6 Total of unrelated business taxable income before specific deduction and section 199A deduction. 7 27,012. Subtract line 6 from line 5 1,000. Specific deduction (generally \$1,000, but see instructions for exceptions) 8 8 9 9 **Trusts.** Section 199A deduction. See instructions 1,000. 10 Total deductions. Add lines 8 and 9 10 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, 11 26,012. enter zero 11 **Tax Computation** Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) 5,463. Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Schedule D (Form 1041) Tax rate schedule or Part I, line 11 from: 2 Proxy tax. See instructions 3 3 Other tax amounts. See instructions 4 4 Alternative minimum tax (trusts only) 5 5

6

Form 990-T (2022

6

LHA

Tax on noncompliant facility income. See instructions

Total. Add lines 3 through 6 to line 1 or 2, whichever applies

For Paperwork Reduction Act Notice, see instructions.

Part I	III Tax and Payments					
1a	Foreign tax credit (corporations attach Form	1118; trusts attach Form 1116)	1a			
	Other credits (see instructions)					
	General business credit. Attach Form 3800					
	Credit for prior year minimum tax (attach Fo					
	Total credits. Add lines 1a through 1d			10	е	
2	Subtract line 1e from Part II, line 7			2	2 5	5,463.
	Other amounts due. Check if from: For					
	Oth	ner (attach statement)		3	3	
4	Total tax. Add lines 2 and 3 (see instruction					
	section 1294. Enter tax amount here		•	4	ı 5	5,463.
	Current net 965 tax liability paid from Form 9			5	5	0.
6a	Payments: A 2021 overpayment credited to	2022	6a			
b	2022 estimated tax payments. Check if sect	tion 643(g) election applies	🔲 6b			
С	Tax deposited with Form 8868		6c			
d	Foreign organizations: Tax paid or withheld					
е	Backup withholding (see instructions)		6e			
f	Credit for small employer health insurance p	oremiums (attach Form 8941)	6f			
g	Other credits, adjustments, and payments:					
	Form 4136	Other	Total 6g			
7	Total payments. Add lines 6a through 6g				7	
	Estimated tax penalty (see instructions). Che					68.
	Tax due. If line 7 is smaller than the total of				, 5	5,531.
	Overpayment. If line 7 is larger than the total		overpaid		0	
	Enter the amount of line 10 you want: Credi			Refunded 1	1	
Part I			•	· · · · · · · · · · · · · · · · · · ·		
	At any time during the 2022 calendar year, of					Yes No
	over a financial account (bank, securities, or					
	FinCEN Form 114, Report of Foreign Bank a	and Financial Accounts. If "Yes," ent	er the name of the fo	reign country		
	here					X
	During the tax year, did the organization rec		-			77
	foreign trust?					X
	If "Yes," see instructions for other forms the			•		
	Enter the amount of tax-exempt interest rece					
	Enter available pre-2018 NOL carryovers her		not include any pos	,	_	
	shown on Schedule A (Form 990-T). Don't re				ne 6.	
	Post-2017 NOL carryovers. Enter the Busine	•	•			
	the amounts shown below by any NOL clain					
	Business Act	50000	\$	st-2017 NOL carry	5,126.	
		70000	\$	323	,,120.	
 6а	Did the organization change its method of a	ecounting? (see instructions)	Φ			x
	If 6a is "Yes," has the organization described	, , , , , , , , , , , , , , , , , , , ,	990-PF or Form 112	82 If "No "		22
	explain in Part V	d the change of 1 of 11 990, 990-LZ,	990-11, 011 01111 112	J: II 140,		
Part \						
	the explanation required by Part IV, line 6b.	Also provide any other additional in	formation See instru			
riovide	the explanation required by Fart IV, line ob.	7 tioo, provide any other additional in	ionnation. God indire	otionio.		
	Under penalties of perjury, I declare that I have examin				ind belief, it is true,	
Sign	correct, and complete. Declaration of preparer (other the	nan taxpayer) is based on all information of which	n preparer has any knowledg		a IDC discuss this w	advina viidla
Here		EXEC	CUTIVE DIRE		e IRS discuss this r parer shown below	
	Signature of officer	Date Title			tions)? X Yes	·
	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN	
Paid		JANICE WILBURN,		self- employed		
Prepa	rer JANICE WILBURN, CPA	. CPA	11/15/23		P004022	
Use O		LLP		Firm's EIN	45-0250	)958
	810 S. CI	NCINNATI AVE., STE	. 600			
	Firm's address TIII.SA OK	74119-1623		Phone no 918	748-50	100

FORM 990-T	LATE	PAYMENT INT	EREST		STA	TEMENT 23
DESCRIPTION	DATE A	MOUNT	BALANCE	RATE	DAYS	INTEREST
TAX DUE INTEREST RATE CHANGE DATE FILED	05/15/23 09/30/23 11/15/23	5,463.	5,463. 5,609. 5,666.	.0700	138 46	146. 57.
TOTAL LATE PAYMENT IN	TEREST					203.
FORM 990-T	LATE F	AYMENT PENA	LTY		STA	TEMENT 24
DESCRIPTION	DATE	AMOUNT	BALANCE	MOI	NTHS	PENALTY
TAX DUE DATE FILED	05/15/23 11/15/23	5,463	5,4		6	164.

FOOTNOTES STATEMENT 25

ELECTION NOT TO CLAIM THE ADDITIONAL FIRST YEAR DEPRECIATION ALLOWABLE UNDER IRC SEC. 168(K)

HILLE FAMILY CHARITABLE FOUNDATION 10 N. GREENWOOD AVENUE, #103 TULSA, OK 74120 EMPLOYER IDENTIFICATION NUMBER: 73-1521975 FOR THE YEAR ENDING DECEMBER 31, 2022

HILLE FAMILY CHARITABLE FOUNDATION HEREBY ELECTS, PURSUANT TO IRC SEC.168(K)(7), NOT TO CLAIM THE ADDITIONAL DEPRECIATION ALLOWABLE UNDER IRC SEC. 168(K) FOR THE FOLLOWING QUALIFYING PROPERTY PLACED IN SERVICE DURING THE TAX YEAR ENDING DECEMBER 31, 2022.

ALL PROPERTY IN THE 3 YEAR CLASS.

ALL PROPERTY IN THE 5 YEAR CLASS.

ALL PROPERTY IN THE 7 YEAR CLASS.

ALL PROPERTY IN THE 10 YEAR CLASS.

ALL PROPERTY IN THE 15 YEAR CLASS.

ALL PROPERTY IN THE 20 YEAR CLASS.

ALL PROPERTY IN THE 25 YEAR CLASS.

COMPUTER SOFTWARE AS DEFINED BY IRC SEC. 167(F)(1)(B). QUALIFIED IMPROVEMENT PROPERTY. SEE ATTACHED FORM 4562.

THE ORGANIZATION IS MAKING THE DE MINIMIS SAFE HARBOR

FORM 990-T	INTEREST AND PENALTIES	STATEMENT 26
TAX FROM FORM 990-T, UNDERPAYMENT PENAL LATE PAYMENT INTER LATE PAYMENT PENAL	TY EST	5,463. 68. 203. 164.
TOTAL AMOUNT DUE		5,898.

#### **SCHEDULE A** (Form 990-T)

### **Unrelated Business Taxable Income** From an Unrelated Trade or Business

	tment of the Treasury al Revenue Service  Do not enter SSN numb		Open to Public Inspection for 501(c)(3) Organizations Only								
A N	Name of the organization HILLE FAMILY CHARITABL:	E FOUNDATI	ON					Employer 73-15		cation number	-
<u>c</u> ს	Unrelated business activity code (see instruction	s) 65000	0				D	Sequence	e: :	1 of	3
<b>E</b> 0	Describe the unrelated trade or business $$ DE	BT FINANCE	D RE	NTAL							
Pai	rt I Unrelated Trade or Business In	come		(A) Inc	come		(B)	Expense	es	(C) N	Net
1 a	Gross receipts or sales										
b	Less returns and allowances	<b>c</b> Balance	1c								
2	Cost of goods sold (Part III, line 8)	<del></del>	2								
3	Gross profit. Subtract line 2 from line 1c		3								
4 a	Capital gain net income (attach Schedule D (Fo										
	1120)). See instructions		4a								
b	Net gain (loss) (Form 4797) (attach Form 4797)	. See instructions)	4b								
С	Capital loss deduction for trusts		4c								
5	Income (loss) from a partnership or an S corpo statement) STATEMENT 27		5	-9	1,8	77.				-91	L,877.
6	Rent income (Part IV)		6	27	3,2	77. 88.	1,	405,8	64.	-91 -1,132	2,576.
7	Unrelated debt-financed income (Part V)		7							•	
8	Interest, annuities, royalties, and rents from a continuous										
	organization (Part VI)		8								
9	Investment income of section 501(c)(7), (9), or										
	organizations (Part VII)		9								
10	Exploited exempt activity income (Part VIII)		10								
11	Advertising income (Part IX)		11								
12	Other income (see instructions; attach stateme		12								
13	Total. Combine lines 3 through 12		13	18	1,4	11.	1,	405,8	3641,224,453.		1,453.
	Deductions Not Taken Elsewhe directly connected with the unrel	ated business in	come						uction	s must be	
1 2	Salaries and wages								2		
3	Repairs and maintenance								3		
4	Bad debts								4		
5									5		
6	Taxes and licenses								6		
7	Depreciation (attach Form 4562). See instruction					[	574	,578.			
8	Less depreciation claimed in Part III and elsew							,578.			0.
9	Depletion							-	9		
10	Contributions to deferred compensation plans								10		
11	Employee benefit programs								11		
12	Excess exempt expenses (Part VIII)								12		
13									13		
14									14		
15	, , , , , , , , , , , , , , , , , , ,										0.
16	Unrelated business income before net operatir	ng loss deduction. S	ubtract	line 15 from	Part	I, line 1	13,				

Deduction for net operating loss. See instructions

Unrelated business taxable income. Subtract line 17 from line 16

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

-1,224,453.

18

17

⊃ad	е	

Part	III Cost of Goods Sold Fnter met	hod of inventory valuati	on		Page Z
1	Entor met	nod of inventory valuation		1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year			l l	
8	Cost of goods sold. Subtract line 7 from line 6. Enter l				
9	Do the rules of section 263A (with respect to property				Yes No
Part					
1	Description of property (property street address, city, s  A	tate, ZIP code). Check	if a dual-use. See inst	ructions.	OK 7412
		A	В	С	
2	Rent received or accrued			-	
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)	0.			
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)	273,288.			
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D	273,288.			
4 <u>5</u> Part	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) STMT 29  Total deductions. Add line 4 columns A through D. Er  V Unrelated Debt-Financed Income (s	nter here and on Part I, I	ine 6, column (B)		1,405,864.
1	Description of debt-financed property (street address, of	· · · · · · · · · · · · · · · · · · ·	neck if a dual-use. See	e instructions	
•	A	orty, state, zir sodoj. Si	neok ii a adai ade. Ge	s moti dottorio.	
	В				
	c				_
	D				
		Α	В	С	
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	<u>%</u>
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D)	. Enter here and on Par	t I, line 7, column (A)		0.
_	Alleganists designations and the Control of the Con	Г			
9	Allocable deductions. Multiply line 3c by line 6	Lands D. Federalisers	Lan David I Bros 7	(D)	0.
10 11	<b>Total allocable deductions.</b> Add line 9, columns A thr <b>Total dividends-received deductions</b> included in line				0.
			<u></u>		J •

Page :

	VI Interest, Annu		oyalties, and Re	ents fror	n Control	led Or	ganizations	<b>3</b> (se	ee instruct	ions)	r age <b>c</b>	
			_			E	xempt Contro	lled Or	ganization	ıs		
	Name of controlle organization	d	2. Employer identification number	3. Net unrelated income (loss) (see instructions)		1	<b>4.</b> Total of specified payments made		5. Part of column 4 that is included in the controlling organization's gross income		5. Deductions directly connected with income in column 5	
(1)												
(2)												
(3)												
(4)												
	Tavabla lasares				Controlled Or			-£l		44.5	Dad	
,	. Taxable Income	in	Net unrelated acome (loss) e instructions)		otal of specif syments mad		that is inc	luded	luded in the organization's		Deductions directly connected with income in column 10	
(1)												
(2)												
(3)												
(4)												
						Add columns 5 and 10. Enter here and on Part I, line 8, column (A)			Add columns 6 and 11. Enter here and on Part I, line 8, column (B)			
Totals									0.		0.	
Part	VII Investment	Income	of a Section 50	1(c)(7), (	9), or (17)	Orgar	nization (s	ee inst	ructions)			
		cription of			2. Amou incon	nt of	3. Deduction directly connected (attach states	ons ected	4. Set- (attach st		5. Total deductions and set-asides (add cols 3 and 4)	
(1)												
(2)												
(3)												
(4)												
Totals					Add amou column 2. here and or line 9, colu	Enter n Part I,					Add amounts in column 5. Enter here and on Part I, line 9, column (B)	
Part	VIII Exploited E	xempt A	ctivity Income,	Other 1	Than Adve	ertising	g Income (	see ins	structions)			
1	Description of exploite	ed activity:										
2	Gross unrelated busin	ess incom	e from trade or busi	ness. Ente	r here and o	n Part I,	line 10, columi	n (A)		2		
3	Expenses directly con	nected wit	h production of unre	elated busi	iness income	e. Enter l	nere and on Pa	art I,				
										3		
4	Net income (loss) from	unrelated	trade or business.	Subtract lir	ne 3 from line	e 2. If a 🤉	gain, complete					
										4		
5	•									5		
6	Expenses attributable									6		
7	Excess exempt expen			•						_		
	4. Enter here and on F	art II, line	12							7		

Schedule A (Form 990-T) 2022

	IX Advertising Income				
1	Name(s) of periodical(s). Check box if reporting	ig two or more periodicals on a consol	lidated basis.		
	A				
	В				
	c 🗆				
	D .				
Enter a	amounts for each periodical listed above in the	corresponding column.			
		A	В	С	D
2	Gross advertising income				
_	Add columns A through D. Enter here and on			1	0.
а	That columns / timeagn b. Enter note and on	11, column ( )			
3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and on	Part Lline 11 column (B)		L	0.
u	Add Coldinis A through D. Enter Hore and on	Tarti, into 11, column (b)			
4	Advertising gain (loss). Subtract line 3 from lin	ne l			
7	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column in				
	-				
	line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8	I I			
5	Readership costs				
6					
7	Circulation income				
′	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is les	I I			
8	than line 6, enter zero				
0	deduction. For each column showing a gain o	nn			
	line 4, enter the lesser of line 4 or line 7	1			
а	Add line 8, columns A through D. Enter the gr	· · · · · · · · · · · · · · · · · · ·	zero here and o	 n	
u	Part II, line 13	cater of the line ba, columns total of 2			0.
Part :		ectors, and Trustees (see inst	tructions)		•
	•	, (eee mee	1 401101107	3. Percentage	4. Compensation
	1. Name	<b>2.</b> Title		of time devoted	attributable to
				to business	unrelated business
1)				%	diffolated paolifoco
2)				%	
3)				%	
4)				%	
				70	
Total.	. Enter here and on Part II, line 1				0.
Part	XI Supplemental Information (se	ee instructions)			
	11				

FORM 990-7	Г (A) 	INCOME (1	LOSS) FROM PA	ARTNERSHIPS	STATEMENT	27
DESCRIPTIO	ON				NET INCO	
GREENARCH	-91,877					
TOTAL INCI	-91,877					
990-T SCH	A	POST-2017 N	ET OPERATING	LOSS DEDUCTION	STATEMENT	28
990-T SCH TAX YEAR	LOSS SUST	Pl	ET OPERATING LOSS REVIOUSLY APPLIED	LOSS DEDUCTION  LOSS REMAINING	STATEMENT  AVAILABLE THIS YEAR	28
	LOSS SUST	Pl	LOSS REVIOUSLY	LOSS	AVAILABLE	 29.

FORM 990-T (A) DEDUCTIONS CONNECTED	O WITH RENTAL	INCOME	STATEMENT 29
	ACTIVITY		
DESCRIPTION	NUMBER	AMOUNT	TOTAL
DEPRECIATION		574,578.	
AMORTIZATION		1,346.	
ADVERTISING/PROMOTION		10,423.	
BANK CHARGES		778.	
CLEANING & MAINTENANCE EXPENSE		14,339.	
CONTRACT LABOR		75,347.	
DUES & SUBSCRIPTIONS		880.	
EQUIPMENT RENTAL & EXPENSE		21,095.	
EVENT EXPENSE		21,134.	
INSURANCE		38,683.	
INTEREST EXPENSE		483,945.	
OFFICE EXPENSE & SUPPLIES		13,145.	
PROFESSIONAL FEES		78,640.	
SECURITY		17,861.	
UTILITIES		46,944.	
PROPERTY TAXES		6,451.	
TRAVEL		275.	
- SUBTOTA	AL - 4		1,405,864
TOTAL TO FORM 990-T, SCHEDULE A, PART	r IV, LINE 4		1,405,864

#### **SCHEDULE A** (Form 990-T)

### **Unrelated Business Taxable Income** From an Unrelated Trade or Business

A Name of the organization  HILLE FAMILY CHARITABLE FOUNDATION  C Unrelated business activity code (see instructions)  D Sequence: 2 of 3  E Describe the unrelated trade or business EXERCISE AND FITNESS  EXERCISE AND FITNESS    C   A   Income   (B) Expenses   (C) Net		artment of the Treasury nal Revenue Service  Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).  Open to Public Inspection for 501(c)(3) Organizations Only									
C Unrelated business activity code (see instructions)   79 00 0 0   D Sequence:   2 of 3	A 1			ON						cation numb	•
Describe the unrelated trade or business   EXERCISE   AND   FITNESS		111111111111111111111111111111111111111						'3	10210	7.5	
Part I	<u>C</u> (	Jnrelated business	activity code (see instructions) 79000	0				<b>D</b> Seque	ence:	2 of	3
Part I											
Table   Tabl				F. T.	INESS					1	
b Less returns and allowances	Pa	rt I Unrelated	Trade or Business Income		(A) In	come		(B) Expe	nses	(C	) Net
b Less returns and allowances	1 a	Gross receipts or	sales	Ι							
2 Cost of goods sold (Part III, line 8) 3 Gross profit. Subtract line 2 from line 1c 4 Capital gain net income (gatach Schedule D (Form 1041 or Form 1120)). See instructions b Net gain (loss) (Form 4797) (attach Form 4797). See instructions c Capital loss deduction for trusts c Capital loss deductions for loss deductions for loss deductions for loss deductions must be considered with the unrelated business income  c Capital loss depreciations Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income  c Capital loss deductions and trustess (Part X) c Capital loss desired loss defered compensation plans c Capital loss deductions (attach statement) c		•		1c							
3   Gross profit. Subtract line 2 from line 1 c   3   3   4   4   Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions   4a   4   4   4   4   4   4   4   4	2			2							
4	3			3							
1120 ). See instructions	4 a										
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement). STATEMENT 30 6 Rent income (Part IV) 7 Unrelated debt-financed income (Part V) 7 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) 10 Exploited exempt activity income (Part VIII) 11 Advertising income (Part IX) 12 Other income (see instructions; attach statement) 13 Total. Combine lines 3 through 12 13 Total. Combine lines 3 through 12 1 Compensation of officers, directors, and trustees (Part X) 1 Compensation of officers, directors, and trustees (Part X) 2 Salaries and wages 3 Repairs and maintenance 4 Bad debts 4 Interest, annuities, royalties, and rents from a controlled organizations (Part XI) 1 Compensation of officers, directors, and trustees (Part X) 2 Salaries and maintenance 4 Bad debts 5 Interest (attach statement). See instructions 5 Interest (attach statement). See instructions 6 Taxes and licenses 7 Depreciation (attach Form 4562). See instructions 8 Less depreciation claimed in Part III and elsewhere on return 9 Depletion 9 Depletion 9 Depletion 9 Depletion 10 Contributions to deferred compensation plans 11 Employee benefit programs 11 Excess exempt expenses (Part VIII) 12 Excess exempt expenses (Part VIII) 13 Total deductions, Add lines 1 through 14			,	4a							
c Capital loss deduction for trusts         4c           5 Income (loss) from a partnership or an S corporation (attach statement)         STATEMENT         30         -837.         -837.           6 Rent income (Part IV)         6         -837.         -837.           7 Unrelated debt-financed income (Part V)         7         -837.         -837.           8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)         8         -837.         -837.           9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)         9         -837.         -837.           10 Exploited exempt activity income (Part IX)         10         -837.         -837.           11 Advertising income (Part IX)         11         -837.         -837.           12 Other income (see instructions; attach statement)         12         -837.         -837.           13 Total. Combine lines 3 through 12         13         -837.         -837.         -837.           Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income         1         1           1 Compensation of officers, directors, and trustees (Part X)         1         1         2           2 Salaries and wages         2         3         3         4	b	Net gain (loss) (Fo		4b							
5		• , , ,	ction for trusts	4c							
STATEMENT 30   5   -837.   -837.   -837.	5	•									
6 Rent income (Part IV) 7 Unrelated debt-financed income (Part V) 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) 10 Exploited exempt activity income (Part VIII) 11 Advertising income (Part IX) 12 Other income (see instructions; attach statement) 13 Total. Combine lines 3 through 12 13 Total. Combine lines 3 through 12 15 Total compensation of officers, directors, and trustees (Part X) 11 Compensation of officers, directors, and trustees (Part X) 12 Salaries and wages 12 Compensation of officers, directors, and trustees (Part X) 14 Bad debts 15 Interest (attach statement). See instructions 16 Taxes and licenses 17 Depreciation (attach Form 4562). See instructions 18 Less depreciation claimed in Part III and elsewhere on return 19 Depletion 10 Contributions to deferred compensation plans 11 Employee benefit programs 11 Excess readership costs (Part XI) 13 Total deductions, Add lines 1 through 14 15 Total deductions, Add lines 1 through 14				5		-8	37.				-837.
7	6			6							
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) 10 Exploited exempt activity income (Part VIII) 11 Advertising income (Part IX) 12 Other income (see instructions; attach statement) 13 Total. Combine lines 3 through 12 15 Total. Combine lines 3 through 12 16 Total Combine lines 3 through 12 17 Total Combine lines 3 through 12 18 Total Combine lines 3 through 12 19 Total Combine lines 3 through 12 10 Compensation of officers, directors, and trustees (Part X) 11 Compensation of officers, directors, and trustees (Part X) 12 Salaries and wages 13 Repairs and maintenance 14 Bad debts 15 Interest (attach statement). See instructions 16 Taxes and licenses 17 Depreciation (attach Form 4562). See instructions 18 Less depreciation claimed in Part III and elsewhere on return 19 Depletion 10 Contributions to deferred compensation plans 11 Employee benefit programs 11 Employee benefit programs 11 Employee benefit programs 11 Employee seadership costs (Part IX) 11 Excess readership costs (Part IX) 12 Total deductions. Add lines 1 through 14	7			7							
organization (Part VI)	8										
9				8							
10   Exploited exempt activity income (Part VIII)   10   11   Advertising income (Part IX)   11   12   13   Total. Combine lines 3 through 12   13   -837.   -837.   -837.   -837.   Part II   Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income	9										
10   Exploited exempt activity income (Part VIII)   10   11   Advertising income (Part IX)   11   12   13   Total. Combine lines 3 through 12   13   -837.   -837.   -837.   -837.   Part II   Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income		organizations (Par	t VII)	9							
11       Advertising income (Part IX)       11       12       Other income (see instructions; attach statement)       12       12       -837.       -837.         Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income         1       Compensation of officers, directors, and trustees (Part X)       1       1         2       Salaries and wages       2         3       8epairs and maintenance       3         4       Bad debts       4         5       Interest (attach statement). See instructions       5         6       Taxes and licenses       6         7       Bess depreciation (attach Form 4562). See instructions       7         8       Less depreciation claimed in Part III and elsewhere on return       8a       8b         9       Depletion       9         Contributions to deferred compensation plans       10       11         11       Excess exempt expenses (Part VIII)       12         13       Excess readership costs (Part IX)       13         14       Other deductions, Add lines 1 through 14       15       0.	10			10							
12	11			11							
Total. Combine lines 3 through 12	12			12							
directly connected with the unrelated business income  1 Compensation of officers, directors, and trustees (Part X) 2 Salaries and wages 2 2 3 Repairs and maintenance 3 4 Bad debts 4 5 Interest (attach statement). See instructions 5 Taxes and licenses 6 Taxes and licenses 7 Depreciation (attach Form 4562). See instructions 7 Less depreciation claimed in Part III and elsewhere on return 8 Less depreciation claimed in Part III and elsewhere on return 9 Depletion 9 Depletion 10 Contributions to deferred compensation plans 11 Employee benefit programs 11 Excess exempt expenses (Part VIII) 12 Excess readership costs (Part IX) 13 Excess readership costs (Part IX) 14 Other deductions, Add lines 1 through 14	13			13		-8	37.				-837.
2       3       Repairs and maintenance       3         4       Bad debts       4         5       Interest (attach statement). See instructions       5         6       Taxes and licenses       6         7       Depreciation (attach Form 4562). See instructions       7         8       Less depreciation claimed in Part III and elsewhere on return       8a       8b         9       Depletion       9         10       Contributions to deferred compensation plans       10         11       Employee benefit programs       11         12       Excess exempt expenses (Part VIII)       12         13       Excess readership costs (Part IX)       13         14       Other deductions (attach statement)       14         15       Total deductions. Add lines 1 through 14       15       0 .		directly co	nnected with the unrelated business in	come	•					s must b	e
3       3         4       Bad debts       4         5       Interest (attach statement). See instructions       5         6       Taxes and licenses       6         7       Depreciation (attach Form 4562). See instructions       7         8       Less depreciation claimed in Part III and elsewhere on return       8a       8b         9       Depletion       9         10       Contributions to deferred compensation plans       10         11       Employee benefit programs       11         12       Excess exempt expenses (Part VIII)       12         13       Excess readership costs (Part IX)       13         14       Other deductions (attach statement)       14         15       Total deductions. Add lines 1 through 14       15       0 .											
4       4         5       Interest (attach statement). See instructions       5         6       Taxes and licenses       6         7       Depreciation (attach Form 4562). See instructions       7         8       Less depreciation claimed in Part III and elsewhere on return       8a       8b         9       Depletion       9         10       Contributions to deferred compensation plans       10         11       Employee benefit programs       11         12       Excess exempt expenses (Part VIII)       12         13       Excess readership costs (Part IX)       13         14       Other deductions (attach statement)       14         15       0 •											
5         Interest (attach statement). See instructions         5           6         Taxes and licenses         6           7         Depreciation (attach Form 4562). See instructions         7           8         Less depreciation claimed in Part III and elsewhere on return         8a         8b           9         Depletion         9           10         Contributions to deferred compensation plans         10           11         Employee benefit programs         11           12         Excess exempt expenses (Part VIII)         12           13         Excess readership costs (Part IX)         13           14         Other deductions (attach statement)         14           15         Total deductions. Add lines 1 through 14         15											
6 Taxes and licenses       6         7 Depreciation (attach Form 4562). See instructions       7         8 Less depreciation claimed in Part III and elsewhere on return       8a         9 Depletion       9         10 Contributions to deferred compensation plans       10         11 Employee benefit programs       11         12 Excess exempt expenses (Part VIII)       12         13 Excess readership costs (Part IX)       13         14 Other deductions (attach statement)       14         15 Total deductions. Add lines 1 through 14       15	_	Interest (attach et	atomont\ Soo instructions								
7         Depreciation (attach Form 4562). See instructions         7           8         Less depreciation claimed in Part III and elsewhere on return         8a         8b           9         Depletion         9           10         Contributions to deferred compensation plans         10           11         Employee benefit programs         11           12         Excess exempt expenses (Part VIII)         12           13         Excess readership costs (Part IX)         13           14         Other deductions (attach statement)         14           15         Total deductions. Add lines 1 through 14         15         0 •									1 _		
8         Less depreciation claimed in Part III and elsewhere on return         8a         8b           9         Depletion         9           10         Contributions to deferred compensation plans         10           11         Employee benefit programs         11           12         Excess exempt expenses (Part VIII)         12           13         Excess readership costs (Part IX)         13           14         Other deductions (attach statement)         14           15         Total deductions. Add lines 1 through 14         15         0 •											
9       9         10       Contributions to deferred compensation plans       10         11       Employee benefit programs       11         12       Excess exempt expenses (Part VIII)       12         13       Excess readership costs (Part IX)       13         14       Other deductions (attach statement)       14         15       Total deductions. Add lines 1 through 14       15       0 •									- Rh		
10       Contributions to deferred compensation plans       10         11       Employee benefit programs       11         12       Excess exempt expenses (Part VIII)       12         13       Excess readership costs (Part IX)       13         14       Other deductions (attach statement)       14         15       Total deductions. Add lines 1 through 14       15       0 .											
11       Employee benefit programs       11         12       Excess exempt expenses (Part VIII)       12         13       Excess readership costs (Part IX)       13         14       Other deductions (attach statement)       14         15       Total deductions. Add lines 1 through 14       15       0 •		Contributions to	leferred compensation plans						10		
12Excess exempt expenses (Part VIII)1213Excess readership costs (Part IX)1314Other deductions (attach statement)1415Total deductions. Add lines 1 through 14150 •											
13Excess readership costs (Part IX)1314Other deductions (attach statement)1415Total deductions. Add lines 1 through 14150.											
14Other deductions (attach statement)1415Total deductions. Add lines 1 through 14150.											
15 Total deductions. Add lines 1 through 14 15 0.											
			* * * * * * * * * * * * * * * * * * * *								0 -
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13,			•						. <del>.</del>		

column (C) Deduction for net operating loss. See instructions

Unrelated business taxable income. Subtract line 17 from line 16

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

-837.

16

17

⊃ad	е	

Part	III Cost of Goods Sold Enter meth	nod of inventory valuati	ion		rago <u>z</u>
1				1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	<b>Total.</b> Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter h				
9	Do the rules of section 263A (with respect to property p	·			Yes No
Part					
1	Description of property (property street address, city, s	tate, ZIP code). Check	if a dual-use. See ins	tructions.	
	A EXERBOTICS, LLC 2431 E	SIST STR., S	T 602, TUL	SA, OK 7413	36-1243
	В				
	С				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)	0.			
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)	0.1			
С	Total rents received or accrued by property.	-			
	Add lines 2a and 2b, columns A through D				
	riad iiiloo Ed arid Eb, ooldriiilo ri diiiodgir b	L			
3	Total rents received or accrued. Add line 2c columns A	through D. Enter here	and on Part I line 6	column (A)	0.
Ū	Deductions directly connected with the income	trii Gagir B. Enter Here	and on rare i, into o,		
4	in lines 2(a) and 2(b) (attach statement)	0.			
•	in inios z(a) and z(b) (attaon statement)				
5	Total deductions. Add line 4 columns A through D. En	iter here and on Part I.	line 6. column (B)		0.
Part '		ee instructions)	,(-,		
1	Description of debt-financed property (street address, of	,	heck if a dual-use. Se	ee instructions.	
	A NO DEBT-FINANCED PROPERT				
	В				
	С				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property	0.			
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)	0.			
b	Other deductions (attach statement)	0.			
c	Total deductions (add lines 3a and 3b,	-			
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
•	to debt-financed property (attach statement)	0.			
5	Average adjusted basis of or allocable to debt-				
•	financed property (attach statement)	0.			
6	Divide line 4 by line 5	0.000%	0	/6 9	6 %
7	Gross income reportable. Multiply line 2 by line 6	0.000 %	7	7	70
8	Total gross income (add line 7, columns A through D).		t L line 7 column (A)	1	0.
3	Total gross income (add line 1, coldinis A tillough b).	. Litter Here and On Par	ri, iiile 7, coluitii1 (A)		<del>.</del>
9	Allocable deductions. Multiply line 3c by line 6	0.			T
10	Total allocable deductions. Add line 9, columns A thr		on Part I line 7 col	umn (B)	0.
11	Total dividends-received deductions included in line				0.

Part	VI Interest, Annu	uities, Ro	oyalties, and Re	ents fron	n Control	led Or	ganizations	<b>s</b> (s	ee instruct	tions)		9
						E	xempt Contro					
	1. Name of controlle	d	2. Employer	<b>3.</b> Net	unrelated	4. Tota	al of specified 5. Part of col				6. Deduc	tions directly
	organization		identification	I	ne (loss)	payn	nents made	nents made that is include controlling or			conne	ected with
			number	(see ins	structions)				s gross inc		income	in column 5
(1)												
(2)												
(3)												
(4)												
			No	nexempt C	Controlled Or	rganizati	ons					
7	. Taxable Income		Net unrelated		otal of specif		<b>10.</b> Part			11. Deductions direct		ons directly
			ncome (loss)	pa	yments mad	е	that is inc				connect	
		(see	e instructions)					incon		inc	ome in c	column 10
(1)												
(2)												
(3)												
(4)												
							Add colum					s 6 and 11.
							Enter here line 8, o		,	Enter here and on Part I, line 8, column (B)		
								, ciaiiii	. ,	"	10 0, 00	* *
Totals	VIII I		- ( - 0 - 1' 50	4/-\/7\ /	0\ (4.7)	<u> </u>			0.			0.
Part			of a Section 50	1(C)(7), (					ructions)		F = .	
	<b>1.</b> Desc	cription of	income		2. Amou incon		3. Deduction		4. Set- (attach st	asides		tal deductions I set-asides
							(attach state		(attacii 3i	atemen	9	cols 3 and 4)
(4) E7	KERCISE & FI	MNECC				0.		0.		0		0.
	ZEKCISE & FI	INESS				<u> </u>		0.			•	<u></u>
(2) (3)												
(4)											-	
(+)					Add amou	unts in					Add	d amounts in
					column 2.							umn 5. Enter
					here and or line 9, colu							and on Part I, 9, column (B)
Totals					11116 9, COIL	0.					""16	9, column (b)
Part	VIII Exploited E	xempt A	Activity Income,	Other T	han Adve		Income /	see in	tructions)			<u>.</u>
1	Description of exploite					, u.o,	9	300 111	<u>structions</u>			
2	Gross unrelated busin	•		ness Ente	r here and o	n Part I	line 10. colum	n (A)	-	2		
3	Expenses directly con						•			-		
•			•					,		3		
Ine 10, column (B)  4 Net income (loss) from unrelated trade or business. Subtract line 3												
-	lines 5 through 7									4		
5										5		
6					come				6			
7	Excess exempt expen											
	4. Enter here and on F									7		

Schedule A (Form 990-T) 2022

<b>Part</b>	IX Advertising Income					
1	Name(s) of periodical(s). Check box if repor	ting two or	more periodicals on a	consolidated basi	S.	
	A 📄	Ü	·			
	В П					
	<u> </u>					
	D					
Enter a	amounts for each periodical listed above in th	e correspo	nding column.			
			Α	В	С	D
2	Gross advertising income					
	Add columns A through D. Enter here and o	on Part I, lin	e 11, column (A)			0.
а						
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here and o		e 11 column (B)	•	•	0.
-	, ida solarimo / timoagri D. Eritor noro ana t	5111 GIV 1, 1111				·
4	Advertising gain (loss). Subtract line 3 from	lino				
7	2. For any column in line 4 showing a gain,	IIIIC				
	complete lines 5 through 8. For any column					
	line 4 showing a loss or zero, do not comple					
	lines 5 through 7, and enter zero on line 8			+		
5	Readership costs			-		
6	Circulation income					
7	Excess readership costs. If line 6 is less that	ın				
	line 5, subtract line 6 from line 5. If line 5 is	less				
	than line 6, enter zero					
8	Excess readership costs allowed as a					
	deduction. For each column showing a gair	n on				
	line 4, enter the lesser of line 4 or line 7					
а	Add line 8, columns A through D. Enter the		he line 8a. columns to	otal or zero here an	nd on	•
_	Part II, line 13	-				0.
Part		irectors	and Trustees			
			,	3CC III3ti dCtiOi13j	3. Percentage	4. Compensation
	4 Nama		<b>2.</b> Title		of time devoted	attributable to
	1. Name		<b>2.</b> Title			
					to business	unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
	Enter here and on Part II, line 1					0.
Part	XI Supplemental Information	see instruc	tions)			

FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 30
DESCRIPTION		NET INCOME OR (LOSS)
EXERBOTICS, LLC - O	RDINARY BUSINESS INCOME (LOSS)	-837.
TOTAL INCLUDED ON SO	CHEDULE A, PART I, LINE 5	-837.

## SCHEDULE A (Form 990-T)

# **Unrelated Business Taxable Income From an Unrelated Trade or Business**

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

Name of the organization

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

B Employer identification number

	HILLE FAMILY CHARITABLE FOUNDATION	ON		73-152	<u> 1975</u>	<u> </u>
	60000	١.			2	. 3
C L	nrelated business activity code (see instructions) 62000	<i>)</i> U		<b>D</b> Sequence:	3	of 3
<b>-</b> -	escribe the unrelated trade or business		C C			
		OKEK				
Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses		(C) Net
1a	Gross receipts or sales					
	Less returns and allowances c Balance	1c				
2	Cost of goods sold (Part III, line 8)	2				
3	Gross profit. Subtract line 2 from line 1c	3				
4 a	Capital gain net income (attach Schedule D (Form 1041 or Form					
	1120)). See instructions	4a				
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b				
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach					
	statement) STATEMENT 31	5	27,012.			27,012.
6	Rent income (Part IV)	6				
7	Unrelated debt-financed income (Part V)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8				
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9				
10	Exploited exempt activity income (Part VIII)	10			$\bot$	
11	Advertising income (Part IX)	11				
12	Other income (see instructions; attach statement)	12				
13	Total. Combine lines 3 through 12	13	27,012.			27,012.
Par	Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business in		limitations on ded	uctions. Deduc	tions r	nust be
	<u> </u>					
1	Compensation of officers, directors, and trustees (Part X)				1	
2	Salaries and wages				2	
3	Repairs and maintenance				3	
4	Bad debts				4	
5	Interest (attach statement). See instructions				5	
6	Taxes and licenses				6	
7	Depreciation (attach Form 4562). See instructions		7			
8	Less depreciation claimed in Part III and elsewhere on return				8b	
9	Depletion				9	
10	Contributions to deferred compensation plans				10	
11 10	Employee benefit programs				11	
12	Excess exempt expenses (Part VIII)				12	
13	Excess readership costs (Part IX)				13	
14 15	Other deductions (attach statement)				14 15	0.
15 16	<b>Total deductions.</b> Add lines 1 through 14  Unrelated business income before net operating loss deduction. S		ing 15 from Port L ling 1		15	
16					16	27,012.
17	column (C)  Deduction for net operating loss. See instructions				16 17	0.
17 18	Unrelated business taxable income. Subtract line 17 from line 10				18	27,012.
	For Paperwork Reduction Act Notice, see instructions.	<u> </u>				A (Form 990-T) 2022

	ule A (Form 990-T) 2022				Page 2
Part		nod of inventory valuat			
1	Inventory at beginning of year				
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year			_	
8	Cost of goods sold. Subtract line 7 from line 6. Enter h	*			Yes No
9 Part	Do the rules of section 263A (with respect to property p				Tes No
1	Description of property (property street address, city, st A NOT APPLICABLE 140 ALCAZ				
		TAR DRIVE, C	ORDIDLERA,	CO 01032	
	B				
	D				
		Δ.	В	С	D
2	Rent received or accrued	A	В	U	U
	From personal property (if the percentage of				
а	rent for personal property is more than 10%				
	but not more than 50%)	0.			
b	From real and personal property (if the	•			
D	percentage of rent for personal property exceeds				
	500/ 1/11 1 1 1 1 1	0.			
•	Total rents received or accrued by property.	•			
·	Add lines 2a and 2b, columns A through D				
	Add iii co za and zb, coldiniio A tili odgir b				
3	Total rents received or accrued. Add line 2c columns A	through D. Enter here	and on Part Lline 6 c	olumn (A)	0.
Ū	Deductions directly connected with the income	tinoagn B. Enter here		oldi i i i i i i i i i i i i i i i i i i	
4	in lines 2(a) and 2(b) (attach statement)	0.			
•	The second section of the section of	<u> </u>			
5	Total deductions. Add line 4 columns A through D. En	ter here and on Part I.	line 6. column (B)		0.
Part '			, , , , , , , , , , , , , , , , , , , ,		
1	Description of debt-financed property (street address, c	city, state, ZIP code). C	heck if a dual-use. See	instructions.	
	A 140 ALCAZAR DRIVE, CORDI		81632		
	В				
	c 🗆				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property	0.			
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)	0.			
b	Other deductions (attach statement)	0.			
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)	0.			
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)	0.			
6	Divide line 4 by line 5	0.000%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6	0.			
8	Total gross income (add line 7, columns A through D).	. Enter here and on Pa	rt I, line 7, column (A)		0.
9	Allocable deductions. Multiply line 3c by line 6	0.			
10	Total allocable deductions. Add line 9, columns A three				0.
11	Total dividends-received deductions included in line	10			0.

Page :

	/I Interest, Annu		oyalties, and Re	ents fron	n Control	led Or	ganizations	<b>5</b> (s	ee instruct	ions)	r age <b>o</b>
						E	xempt Contro	lled O	ganization	ıs	
	Name of controlled organization		identification income		unrelated ne (loss) structions)		al of specified ments made	that is	art of colur s included rolling orga s gross inc	in the aniza-	Deductions directly connected with ncome in column 5
<u>(1)</u>											
(2)											
(3)								-			
(4)			No.	navamat C	Santrallad Or	aonizati	iono				
	Taxable Income	Ω	Net unrelated		Controlled Or otal of specif		10. Part o	of colu	ımn 9	11 D	eductions directly
	Taxable interne	ir	ncome (loss) e instructions)		yments mad		that is inc	luded	in the zation's	С	onnected with me in column 10
(1)											
<u>(2)</u>											_
(3)											
(4)											
							Add colum Enter here line 8, c	and o	n Part I,	Enter	columns 6 and 11. here and on Part I, e 8, column (B)
Totals									0.		0.
Part \	/II Investment	Income	of a Section 50	1(c)(7), (	9), or (17)	Orgar	nization (s	ee ins	tructions)	I.	
		cription of			2. Amou incon	nt of	3. Deduction directly connected (attach states	ons ected		asides tatement)	5. Total deductions and set-asides (add cols 3 and 4)
(1) CO	MMODITY BRO	KERAG	E			0.		0.		0.	0.
(2)											
(3)											
(4)											
Totals					Add amou column 2. here and or line 9, colu	Enter n Part I,					Add amounts in column 5. Enter here and on Part I, line 9, column (B)
Part	/III Exploited E	xempt A	Activity Income,	Other T	han Adve		g Income /	see in	structions)		
1	Description of exploite		,,	, 1			, (	JUG 111	<u> </u>		
	Gross unrelated busin	-	e from trade or busir	ness. Ente	r here and or	n Part I,	line 10, columi	n (A)		2	
3	Expenses directly con										
			•							3	
4	Net income (loss) from										
										4	_
	Gross income from ac									5	
6	Expenses attributable	to income	entered on line 5							6	
	Excess exempt expen			6, but do no	ot enter more	e than th	ne amount on l	ine			
	4. Enter here and on F	Part II, line	12							7	

Schedule A (Form 990-T) 2022

<b>Part</b>	IX Advertising Income					
1	Name(s) of periodical(s). Check box if repor	ting two or	more periodicals on a	consolidated basi	S.	
	A 📄	Ü	·			
	В П					
	<u> </u>					
	D					
Enter a	amounts for each periodical listed above in th	e correspo	nding column.			
			Α	В	С	D
2	Gross advertising income					
	Add columns A through D. Enter here and o	on Part I, lin	e 11, column (A)			0.
а						
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here and o		e 11 column (B)	•	•	0.
-	, ida solarimo / timoagri D. Eritor noro ana t	5111 GIV 1, 1111				·
4	Advertising gain (loss). Subtract line 3 from	lino				
7	2. For any column in line 4 showing a gain,	IIIIC				
	complete lines 5 through 8. For any column					
	line 4 showing a loss or zero, do not comple					
	lines 5 through 7, and enter zero on line 8			+		
5	Readership costs			-		
6	Circulation income					
7	Excess readership costs. If line 6 is less that	ın				
	line 5, subtract line 6 from line 5. If line 5 is	less				
	than line 6, enter zero					
8	Excess readership costs allowed as a					
	deduction. For each column showing a gair	n on				
	line 4, enter the lesser of line 4 or line 7					
а	Add line 8, columns A through D. Enter the		he line 8a. columns to	otal or zero here an	nd on	•
_	Part II, line 13	-				0.
Part		irectors	and Trustees			
			,	3CC III3ti dCtiOi13j	3. Percentage	4. Compensation
	4 Nama		<b>2.</b> Title		of time devoted	attributable to
	1. Name		<b>2.</b> Title			
					to business	unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
	Enter here and on Part II, line 1					0.
Part	XI Supplemental Information	see instruc	tions)			

FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 31
DESCRIPTION		NET INCOME OR (LOSS)
P3K, LLC - ORDINARY F	BUSINESS INCOME (LOSS)	27,012.
TOTAL INCLUDED ON SCH	HEDULE A, PART I, LINE 5	27,012.

#### 2022 DEPRECIATION AND AMORTIZATION REPORT

21 NORTH GREENWOOD, TULSA, OK

A RENT

4	
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Asset No.	Description	Date Acquired	Method	Life	C o n v	_ine No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS														
	BUILDING COSTS - 21 N														
78	GREENWOOD INC PARKING	03/31/22	SL	39.00	1	L6	28747444.				28747444.			552,835.	552,835.
	TENANT IMPROVEMENTS - 4TH													,	,
79	FLOOR (PW)	10/01/22	150DB	15.00	MQ1	L9E	,588,624.				1,588,624.			19,858.	19,858.
	* 990-T SCH C TOTAL														
	BUILDINGS						30336068.				30336068.	0.		572,693.	572,693.
	FURNITURE & FIXTURES														
	ICE CUBER W/ ICE BIN MAGIC														
81	REFRIGERATOR	04/12/22	200DB	5.00	MQ1	L9B	5,260.				5,260.			1,315.	1,315.
0.0	DODWING DID HOD WIGHT	00/06/00	20000	7 00	1601	. 0.0	F 201				F 201			F70	570
82	PORTABLE BAR FOR VISTA  * 990-T SCH C TOTAL	09/26/22	200DB	7.00	MQ1	190	5,321.				5,321.			570.	570.
	FURNITURE & FIXTURES						10,581.				10,581.	0.		1,885.	1,885.
	FORMITORE & FIXTORES						10,301.				10,301.	0.		1,005.	1,003.
	LAND														
80	21 N GREENWOOD - LAND COSTS	03/31/22	L				890,723.				890,723.			0.	
							,								
	* 990-T SCH C TOTAL LAND						890,723.				890,723.	0.		0.	0.
	OTHER														
83	LOAN COSTS - OK FIDELITY	12/05/22		120M	HY4	12	161,472.				161,472.			1,346.	1,346.
	* 990-T SCH C TOTAL OTHER						161,472.				161,472.	0.		1,346.	1,346.
	* GRAND TOTAL 990-T SCH C						21200044				21200044			E7E 004	E7E 004
	DEPR & AMORT						31398844.				31398844.	0.		575,924.	575,924.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						0.		0.	0.	0.	0.			0.

21 NORTH GREENWOOD, TULSA, OK

A RENT

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	ACQUISITIONS						31398844.		0.	0.	31398844.	0.			575,924.
	DISPOSITIONS/RETIRED						0.		0.	0.	0.	0.			0.
	ENDING BALANCE						31398844.		0.	0.	31398844.	0.			575,924.

# Form **2220**Department of the Treasury Internal Revenue Service

**Underpayment of Estimated Tax by Corporations** 

Attach to the corporation's tax return. FOR Go to www.irs.gov/Form2220 for instructions and the latest information.

FORM 990-T

OMB No. 1545-0123

Nama

Employer identification number 73-1521975

HILLE FAMILY CHARITABLE FOUNDATION 73-1521975

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

F	Part I Required Annual Payment						
1	Total tax (see instructions)					. 1	5,463.
۰.	<b>a</b> Personal holding company tax (Schedule PH (Form 1120), line	o 06)	included on line 1	ا مو ا			
	<b>b</b> Look-back interest included on line 1 under section 460(b)(2)			2a			
٠	contracts or section 167(g) for depreciation under the income			2b			
	contracts of coordinates for (g) for appropriation and of the mooning	1010					
c	c Credit for federal tax paid on fuels (see instructions)			2c			
	d Total. Add lines 2a through 2c					2d	
	Subtract line 2d from line 1. If the result is less than \$500, do						
	does not owe the penalty					. 3	5,463.
4	Enter the tax shown on the corporation's 2021 income tax retu						
	or the tax year was for less than 12 months, skip this line and	ente	r the amount from line 3 o	on line 5		4	1,475.
_							
5	Required annual payment. Enter the smaller of line 3 or line			•			1 475
-	enter the amount from line 3  Part II Reasons for Filing - Check the boxes belo		at apply. If any boyce are	chacked the corporati	on must file Form	5	1,475.
•	even if it does not owe a penalty. See instructions.	WV LII	at apply. If ally buxes are	checkeu, the corporati	on must me rom	1 2220	
6	The corporation is using the adjusted seasonal installr	nent	method				
7	The corporation is using the annualized income install						
8	The corporation is a "large corporation" figuring its firs			n the prior year's tax.			
	Part III   Figuring the Underpayment			······			
	•		(a)	(b)	(c)		(d)
9	Installment due dates. Enter in columns (a) through (d) the						
	15th day of the 4th (Form 990-PF filers: Use 5th month),						
	6th, 9th, and 12th months of the corporation's tax year	9	05/15/22	06/15/22	09/15	5/22	12/15/22
10	Required installments. If the box on line 6 and/or line 7						
	above is checked, enter the amounts from Sch A, line 38. If						
	the box on line 8 (but not 6 or 7) is checked, see instructions						
	for the amounts to enter. If none of these boxes are checked,						
	enter 25% (0.25) of line 5 above in each column	10	369.	369	•	368.	369.
11	, , , , , , , , , , , , , , , , , , , ,						
	column (a) only, enter the amount from line 11 on line 15.						
	See instructions	11					
	Complete lines 12 through 18 of one column						
	before going to the next column.						
	Enter amount, if any, from line 18 of the preceding column	12					
	Add lines 11 and 12	13		369		738.	1 106
	Add amounts on lines 16 and 17 of the preceding column	14	0.	0		0.	1,106.
	Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0	•	0.	0.
10	If the amount on line 15 is zero, subtract line 13 from line	10		369		738.	
17	14. Otherwise, enter -0- Underpayment. If line 15 is less than or equal to line 10,	16		309	+	130.	
17	subtract line 15 from line 10. Then go to line 12 of the next						
		17	369.	369		368.	369.
18	Overpayment. If line 10 is less than line 15, subtract line 10	<del>''</del>	303.	303	1	<u> </u>	303.
	from line 15. Then go to line 12 of the next column	18					

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Part IV Figuring the Penalty

ILLE	FAMILY	CHARITABLE	FOUNDATION	

			(a)	(b)	(c)		(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier.  (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month.  Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19					
20	Number of days from due date of installment on line 9 to the						
	date shown on line 19	20					
21	Number of days on line 20 after 4/15/2022 and before 7/1/2022	21					
22	Underpayment on line 17 x Number of days on line 21 x 4% (0.04)	22	\$	\$	\$		\$
23	Number of days on line 20 after 6/30/2022 and before 10/1/2022	23					
24	Underpayment on line 17 x Number of days on line 23 x 5% (0.05)	24	\$	\$	\$		\$
25	Number of days on line 20 after 9/30/2022 and before 1/1/2023	25					
26	Underpayment on line 17 x Number of days on line 25 x 6% (0.06)	26	\$	\$	\$		\$
27	Number of days on line 20 after 12/31/2022 and before 4/1/2023	27	SEE	ATTACHED W	ORKSHEET		
28	Underpayment on line 17 x Number of days on line 27 x 7% (0.07)	28	\$	\$	\$		\$
29	Number of days on line 20 after 3/31/2023 and before 7/1/2023	29					
30	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$	\$		\$
31	Number of days on line 20 after 6/30/2023 and before 10/1/2023	31					
32	Underpayment on line 17 x Number of days on line 31 x *% 365	32	\$	\$	\$		\$
33	Number of days on line 20 after 9/30/2023 and before 1/1/2024	33					
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$		\$
35	Number of days on line 20 after 12/31/2023 and before 3/16/2024	35					
36	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$		\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$		\$
38	<b>Penalty.</b> Add columns (a) through (d) of line 37. Enter the to line for other income tax returns		·			38	s 68.

<sup>\*</sup> Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2022)

## FORM 990-T UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying N	umber
HILLE FAMII	Y CHARITABLE	FOUNDATION		73-15	21975
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
Date	Amount	-0-	Daidlice Due	Penalty hate	renally
05/15/22	369.	369.	31	.000109589	1.
06/15/22	369.	738.	15	.000109589	1.
06/30/22	0.	738.	77	.000136986	8.
09/15/22	368.	1,106.	15	.000136986	2.
09/30/22	0.	1,106.	76	.000164384	14.
12/15/22	369.	1,475.	16	.000164384	4.
12/31/22	0.	1,475.	135	.000191781	38.
Penalty Due (Sum of Colu	mn F).				68.

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

## FORM 990-T UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying Nu	ımber
HILLE FAMIL	Y CHARITABLE	FOUNDATION		73-152	21975
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
05/15/22	369.	369.	31	.000109589	1.
06/15/22	369.	738.	15	.000109589	1.
06/30/22	0.	738.	77	.000136986	8.
09/15/22	368.	1,106.	15	.000136986	2.
09/30/22	0.	1,106.	76	.000164384	14.
12/15/22	369.	1,475.	16	.000164384	4.
12/31/22	0.	1,475.	135	.000191781	38.
Penalty Due (Sum of Colun	nn F).				

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

## **Depreciation and Amortization** (Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

Sequence No. 179

73-1521975

Identifying number

Department of the Treasury Internal Revenue Service Name(s) shown on return

Go to www.irs.gov/Form4562 for instructions and the latest information.

Business or activity to which this form relates

21 NORTH GREENWOOD,

A RENT

4

HILLE FAMILY CHARITABLE FOUNDATION

TULSA, OK

P	art I Election To Expense Certain Propert	y Under Section 17	79 Note: If you	u have any lis	ted pr	operty, co	mplete Part	V befor	e yo	ou complete Part I.
1	Maximum amount (see instructions)								1	1,080,000.
2	Total cost of section 179 property place	d in service (see	instructions)					2	2	
3	Threshold cost of section 179 property by	pefore reduction	in limitation .					[:	3	2,700,000.
	Reduction in limitation. Subtract line 3 fr			_					4	
5	Dollar limitation for tax year. Subtract line 4 from line 1	. If zero or less, enter -	0 If married filing	separately, see in	structio	ns		!	5	
6	(a) Description of prop	perty		(b) Cost (busine	ess use o	only)	(c) Elected	cost		
7	Listed property. Enter the amount from I	ine 29				7				
8	Total elected cost of section 179 proper	ty. Add amounts	in column (c)	, lines 6 and 7	7			8	В	
9	Tentative deduction. Enter the smaller	of line 5 or line 8						9	9	
	Carryover of disallowed deduction from								0	
11	Business income limitation. Enter the sm	naller of business	income (not	less than zero	o) or lir	ne 5		1	1	
12	Section 179 expense deduction. Add lin	es 9 and 10, but	don't enter m	ore than line	11			1	2	
13	Carryover of disallowed deduction to 20	23. Add lines 9 a	nd 10, less lir	ne 12		13				
	te: Don't use Part II or Part III below for li	sted property. In:	stead, use Pa	rt V.						
P	art II Special Depreciation Allowan	ce and Other De	epreciation (	Don't include	elisted	d property	·.)			
14	Special depreciation allowance for quality	fied property (oth	er than listed	property) pla	ced in	service d	uring			
	the tax year								4	
	Property subject to section 168(f)(1) elec	tion						1	5	
	Other depreciation (including ACRS)							1	6	552,835.
P	art III MACRS Depreciation (Don't	nclude listed pro	-							
_				ction A				<u> </u>	_	
	MACRS deductions for assets placed in	•	0 0					<u>1</u>	7	
<u>18</u>	If you are electing to group any assets placed in service						L			
	Section B - Assets I			depreciation			al Deprecia	tion Sy	ster	m
	(a) Classification of property	(b) Month and year placed in service	(business/in	vestment use nstructions)	(d)	Recovery period	(e) Convention	(f) Metho	od	(g) Depreciation deduction
19a	a 3-year property									
k	<b>b</b> 5-year property			5,260.		YRS.		2001	$\overline{}$	1,315.
	c 7-year property			5,321.	7	YRS.	MQ	2001	DВ	570.
	d 10-year property									
_ 6	e 15-year property		1,58	88,624.	15	YRS.	MQ	150I	DВ	19,858.
f	f 20-year property									
	g 25-year property				2	5 yrs.		S/L		
	h Residential rental property	/			27	'.5 yrs.	MM	S/L		
	n residential rental property	/			27	'.5 yrs.	MM	S/L	$\overline{}$	
i	Nonresidential real property	/			3	9 yrs.	MM	S/L	$\overline{}$	
		/					MM	S/L		
	Section C - Assets PI	aced in Service	During 2022	Tax Year Us	ing th	e Alterna	tive Depreci	ation S	yst	em
<u> 20</u>								S/L	$\neg$	
	b 12-year					2 yrs.		S/L	-	
_	c 30-year	/				0 yrs.	MM	S/L	_	
	d 40-year	/			4	0 yrs.	MM	S/L	.	
	Summary (See instructions.)							ı		
	Listed property. Enter amount from line							2	21	
22	<b>Total.</b> Add amounts from line 12, lines 1									E74 E70
••	Enter here and on the appropriate lines of				ons - s	see instr.		2	22	574,578.
23	For assets shown above and placed in s									
	portion of the basis attributable to section	on ∠63A costs				23				

Part V

Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? No 24b If "Yes," is the evidence written? No Yes Yes (b) (c) (e) (i) (f) (g) **(a)** Type of property Date Business/ Basis for depreciation Elected Cost or Recovery Method/ Depreciation placed in investment (business/investment section 179 (list vehicles first) Convention deduction other basis period use only) use percentage service cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use: % % % 27 Property used 50% or less in a qualified business use % S/L -S/L · % % S/L 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (d) (e) (f) 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle year (don't include commuting miles) Total commuting miles driven during the year ... 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 \_\_\_\_\_ Yes Yes Yes Yes Yes Yes 34 Was the vehicle available for personal use No No No No No No during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners **39** Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles Part VI | Amortization (b) (f) (c) (d) (e) Amortizable amount Description of costs Amortization Amortization for this year Code section period or percentage 42 Amortization of costs that begins during your 2022 tax year 161,472. LOAN COSTS - OK FIDELITY 120522 120M 1.346 43 43 Amortization of costs that began before your 2022 tax year 346 44 Total. Add amounts in column (f). See the instructions for where to report

#### 2022 DEPRECIATION AND AMORTIZATION REPORT

#### - CURRENT YEAR FEDERAL - HILLE FAMILY CHARITABLE FOUNDATION

Asset No.	Description	Dai Acqu		Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
85	BUILDING COSTS - 21 N GREENWOOD INC PAR	0333	122	SL	39.00	16	28747444.			28747444.			552,835.
88	ICE CUBER W/ ICE BIN MAGIC REFRIGERA	0412	222	SL	5.00	16	5,260.			5,260.			789.
90		0926	5 2 2	SL	7.00	16	5,321.			5,321.			190.
	LOAN COSTS - OK FIDELITY	120!	522		120M	42	161,472.			161,472.			1,346.
93	TENANT IMPROVEMENTS - 4TH FLOOR (PW)	1101			15.00		1588624.			1588624.			17,651.
		0331	122	L			890,723.			890,723.			0.
	* 990-PF RENTAL TOTAL OTHER						31398844.		0.	31398844.	0.		572,811.
25	PRINTER	0601	109	SL	5.00	16	2,508.			2,508.	2,508.		0.
28	COMPUTER	072	110	SL	5.00	16	2,150.			2,150.	2,150.		0.
29	GRANT MGMT SOFTWARE	0101	114	SL	3.00	16	24,800.			24,800.	24,800.		0.
30	APPLE COMPUTERS	1001	114	SL	5.00	16	8,470.			8,470.	8,470.		0.
		0204	119	SL	7.00	16	5,154.			5,154.	2,147.		736.
	LAPTOPS, IPAD & DESKTOP COMPUTERS	0509	919	SL	7.00	16	12,843.			12,843.	4,893.		1,835.
74	SHREDDER	0320	003	SL	5.00	16	303.			303.	303.		0.
75	SONICWALL TX37005	0503	322	SL	3.00	16	1,548.			1,548.			344.
76	COMPUTER EQUIPMENT	0513	322	SL	5.00	16	5,910.			5,910.			788.
		1130	22	SL	3.00	16	8,200.			8,200.			228.
	* 990-PF PG 1 TOTAL OTHER						71,886.		0.	71,886.	45,271.		3,931.

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#### 2022 DEPRECIATION AND AMORTIZATION REPORT

#### - CURRENT YEAR FEDERAL - HILLE FAMILY CHARITABLE FOUNDATION

Asset No.	Description		ate uired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	BUILDINGS												
	BUILDING COSTS - 21												
	N GREENWOOD INC PAR	033	122	SL	39.00	16	28747444.			28747444.			552,835.
	TENANT IMPROVEMENTS - 4TH FLOOR (PW)	1 0 0	100	1 5 0 D B	15 00	100	1588624.			1588624.			19,858.
	* 990-T SCH C TOTAL	100	122	T 2 ODB	13.00	цэв	1300024.			1500024.			19,050.
	BUILDINGS						30336068.		0.	30336068.	0.		572,693.
	FURNITURE & FIXTURES												
	ICE CUBER W/ ICE												
	BIN MAGIC REFRIGERA	041	222	200DB	5.00	19в	5,260.			5,260.			1,315.
	PORTABLE BAR FOR VISTA	002	600	200DB	7 00	19C	5,321.			5,321.			570.
	* 990-T SCH C TOTAL	092	022	120008	7.00	цэC	5,341.			5,321.			570.
	FURNITURE & FIXTURE						10,581.		0.	10,581.	0.		1,885.
	LAND 21 N GREENWOOD -												
		033	122	2т.			890,723.			890,723.			0.
	* 990-T SCH C TOTAL									000,:200			
	LAND						890,723.		0.	890,723.	0.		0.
	OTHER												
	LOAN COSTS - OK												
		120	522	2	120M	42	161,472.			161,472.			1,346.
	* 990-T SCH C TOTAL												
	OTHER * GRAND TOTAL 990-T						161,472.		0.	161,472.	0.		1,346.
	SCH C DEPR & AMORT						31398844.		0.	31398844.	0.		575,924.
													,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	CURRENT YEAR												
	ACTIVITY												
	BEGINNING BALANCE						56,228.		0.	56,228.	45,271.		

- CURRENT YEAR FEDERAL - HILLE FAMILY CHARITABLE FOUNDATION

Asset No.	Description	Date Acquired		Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	ACQUISITIONS						62813346.		0.	62813346.	0.		
	DISPOSITIONS						0.		0.	0.	0.		
	ENDING BALANCE						62869574.		0.	62869574.	45,271.		