### **FED**

Locator: 1218PN Account: 568D

Taxpayer Name: American Electric Power Foundation

Return Type: 990, C

 Submitted Date
 11/15/2021 03:49:07 PM

 Acknowledgement Date
 11/15/2021 04:31:18 PM

Status Accepted

**Submission ID** 31175120213195000004

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# Form **8868**

(Rev. January 2020)

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

iling of this f	form, visit www.irs.gov/e-file-providers/e-file-f	or-charities	-and-non-profits.			
Automatic	6-Month Extension of Time. Only subm	it original	(no copies needed).			
All corporation	ons required to file an income tax return othe rm 7004 to request an extension of time to f	r than Forr	m 990-T (including 1120	0-C filers), partnerships, REMIC	s, and trusts	
Гуре or	Name of exempt organization or other filer, see instructions.  Taxpayer identification number (TIN)					
orint	AMERICAN ELECTRIC POWER FOUND	ATION		20-3886453		
File by the lue date for	Number, street, and room or suite no. If a P.O. bo	x, see instruc	ctions.			
iling your	1 RIVERSIDE PLAZA, ATTN: TAX I					
eturn. See nstructions.	City, town or post office, state, and ZIP code. For COLUMBUS, OH 43215	a foreign ad	dress, see instructions.			
Enter the Re	turn Code for the return that this application	is for (file	a separate application fo	or each return)	0 4	
Application		Return	Application		Return	
s For		Code	Is For		Code	
	Form 990-EZ	01	Form 990-T (corporat	ion)	07	
Form 990-BL		02	Form 1041-A	- 1- 1- 1- 1- 1- 1V	08	
Form 4720 ( Form 990-PF	,	03	Form 4720 (other that Form 5227	n individual)	10	
	(sec. 401(a) or 408(a) trust)	05	Form 6069		11	
	(trust other than above)	06	Form 8870		12	
Telephone If the orga If this is foor the whole	anization does not have an office or place of le group, check this box le names and TINs of all members the extension are in the care of le group.	f business in ur digit Gro f it is for pa	Fax No. ▶ the United States, checup Exemption Number (	ck this box	If this is	
for the	st an automatic 6-month extension of time un organization named above. The extension is calendar year 20 20 or	for the org	ganization's return for:		zation return	
2 If the ta	tax year beginningax year entered in line 1 is for less than 12 m hange in accounting period application is for Forms 990-BL, 990-PF, 99	onths, ched	ck reason: Initial re		_•	
	undable credits. See instructions.	.,	, c. ccc, ccc	3a \$	90,000.	
<b>b</b> If this	b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					
	ted tax payments made. Include any prior yea				87,000.	
	e due. Subtract line 3b from line 3a. Include onic Federal Tax Payment System). See instru		ent with this form, if re-	quired, by using EFTPS 3c \$	3,000.	
	are going to make an electronic funds withdrawa		it) with this Form 8868. se			
nstructions.	J	,	,		- · - · - · - · · · · · · · · · · · · ·	
	ct and Paperwork Reduction Act Notice, see instr	uctions.		Form 88	368 (Rev. 1-2020)	

# Form 8453-EO

# Exempt Organization Declaration and Signature for Electronic Filing

► Go to www.irs.gov/Form8453EO for the latest information.

ОМВ	No.	1545-0047	

Department of the Treasury Internal Revenue Service

For calendar year 2020, or tax year beginning

, 2020, and ending For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, and 8868

Name of exempt organization or person subject to tax Taxpayer identification number AMERICAN ELECTRIC POWER FOUNDATION 20-3886453 Type of Return and Return Information (Whole Dollars Only) Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). 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 ▶ b Total revenue, if any (Form 990-EZ, line 9) . . . . . . . . . 2b Form 990-EZ check here ▶ Form 1120-POL check here ▶ b Tax based on investment income (Form 990-PF, Part VI, line 5) - 4b Form 990-PF check here ▶ 5a Form 8868 check here ▶ b Total tax (Form 990-T, Part III, line 4) . . . . . . . . . . 6b Form 990-T check here ▶ Form 4720 check here ▶ Part II **Declaration of Officer or Person Subject to Tax** I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/ 990-PF (as specifically identified in Part I above) to the selected state agency(ies). Under penalties of perjury, I declare that I am an officer of the above named organization or I am the person subject to tax with respect to (name of organization) and that I have examined a copy of the 2020 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.

I declare that I have reviewed the above return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

11/15/2021

PRESIDENT

Title, if applicable

Check if Check if ERO's SSN or PTIN ERO's ERO's also paid selfsignature preparer employed Use Firm's name (or EIN yours if self-employed), Only address, and ZIP code

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

PTIN Print/Type preparer's name Preparer's signature Date Check **Paid** self-employed Preparer Firm's EIN ▶ Firm's name Use Only Firm's address ▶ Phone no.

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Signature of officer or person subject to tax

Form **8453-EO** (2020)

Sign

Here

# Form **990-PF**

# **Return of Private Foundation**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

F	or ca	lendar year 2020 or tax year beginning			, 2020,	and endin	g		, 20
Na	ame of	foundation					1	A Employer identif	ication number
	AME:	RICAN ELECTRIC POWER FOUNDATI	NC					20-388645	3
Νι	ımber	and street (or P.O. box number if mail is not delivered to	street	address)		Room/suite	1	3 Telephone numb	er (see instructions)
	1 R	IVERSIDE PLAZA, ATTN: TAX DEP	Г					(614) 71	6-2605
Ci	ty or to	own, state or province, country, and ZIP or foreign posta	l code						
							- 0	If exemption application pending, check here	
	COL	UMBUS, OH 43215						pending, check here	· · · · · · · · · · · · · · · · · · ·
G	Che	ck all that apply: Initial return		Initial return	of a former p	ublic charit	y ,	<b>D</b> 1. Foreign organiza	tions check here
		Final return		Amended re	turn			2. Foreign organiza	·
		Address change		Name chang	е			85% test, check computation	
Н	Che	ck type of organization: X Section 501(	c)(3)	exempt private f	oundation		╗.	•	
	s	section 4947(a)(1) nonexempt charitable trust		Other taxable pr	ivate foundat	tion	'	•	n status was terminated b)(1)(A), check here
I	Fair	market value of all assets at J Acco	unting	g method: C	ash 🗵 Acc	rual		·	in a 60-month termination
	end	of year (from Part II, col. (c), line O	her (	specify)					)(1)(B), check here
	16)	▶ \$ 85,478,512. (Part I,	colum	in (d), must be on ca	ash basis.)				
F	art l	Analysis of Revenue and Expenses (The	(a	) Revenue and	(h) Not inve	otmont	(0)	Adjusted not	(d) Disbursements for charitable
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in		expenses per	(b) Net inve incom		(C)	Adjusted net income	purposes
_		column (a) (see instructions).)		books					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)							
	2	Check X if the foundation is not required to attach Sch. B.		02.21		2 212			
	3	Interest on savings and temporary cash investments.		23,013.		3,013.			
	4	Dividends and interest from securities		1,911,352.	1,91	1,352.			
	5a	Gross rents							
	b	Net rental income or (loss)		1 110 122					
ne		Net gain or (loss) from sale of assets not on line 10		4,442,433.					
ē	b	Gross sales price for all assets on line 6a 37,600,269.				0 400			
Revenue	7	Capital gain net income (from Part IV, line 2) .			4,44	2,433.			
ш.	8	Net short-term capital gain							
	9 10 a	Income modifications							
		and allowances							
		Less: Cost of goods sold							
		Gross profit or (loss) (attach schedule)							
	11 12	Other income (attach schedule)  Total. Add lines 1 through 11		6,376,798.	6.37	6,798.			
_				0.					
Se	13 1 <i>4</i>	Compensation of officers, directors, trustees, etc.  Other employee salaries and wages							
nse	15	Pension plans, employee benefits							
be		Legal fees (attach schedule)							
Administrative Expense		Accounting fees (attach schedule)							
Ş		Other professional fees (attach schedule)							
ä	17	Interest							
햜	18	Taxes (attach schedule) (see instructions)[1]		94,575.					
Ξ	19	Depreciation (attach schedule) and depletion							
튱	20	Occupancy							
Υ		Travel, conferences, and meetings							
ä	22	Printing and publications							
g	23	Other expenses (attach schedule) ATCH 2		5,895.					
ati	23 24 25	Total operating and administrative expenses.							
ě		Add lines 13 through 23		100,470.					
ŏ	25	Contributions, gifts, grants paid		36,303,206.					35,590,950.
_	26	Total expenses and disbursements. Add lines 24 and 25		36,403,676.					35,590,950.
	27	Subtract line 26 from line 12:							
	а	Excess of revenue over expenses and disbursements		30,026,878.					
		Net investment income (if negative, enter -0-)			6,37	6,798.			
	С	Adjusted net income (if negative, enter -0-).							

P	art II	Balance Sheets Attached schedules and amounts in the	Beginning of year	End o	f year
		description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	52,514,182.	4,461,972.	4,461,972.
		Savings and temporary cash investments			
		Accounts receivable			
		Less: allowance for doubtful accounts ▶			
		Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
		Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
		Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts ▶			
ţ		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
Ÿ	10a	Investments - U.S. and state government obligations (attach schedule).			
	b	Investments - corporate stock (attach schedule)			
	С	Investments - corporate bonds (attach schedule)			
		Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
		Investments - mortgage loans Investments - other (attach schedule)  ATCH 3	57,965,632.	80,974,662.	80,974,662.
		Land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe ► ATCH 4 )	-5,727.	41,878.	41,878.
		Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	110,474,087.	85,478,512.	85,478,512.
	17	Accounts payable and accrued expenses	2,836.	5,695.	
	18	Grants payable	27,433,133.	28,206,319.	
Liabilities	19	Deferred revenue			
藁		Loans from officers, directors, trustees, and other disqualified persons			
<u>ā</u> .		Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)	27,435,969.	28,212,014.	
<u></u>		Foundations that follow FASB ASC 958, check here	2.,100,000	20,222,021	
nces		and complete lines 24, 25, 29, and 30.			
<u>a</u>		Net assets without donor restrictions			
Ba	25	Net assets with donor restrictions			
פ		Foundations that do not follow FASB ASC 958, check here			
בַּ		and complete lines 26 through 30.			
눔	26	Capital stock, trust principal, or current funds	83,038,118.	57,266,498.	
इ	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
Se	28	Retained earnings, accumulated income, endowment, or other funds			
As	29	Total net assets or fund balances (see instructions)	83,038,118.	57,266,498.	
<u>e</u>	24 25 26 27 28 29 30	Total liabilities and net assets/fund balances (see			
		instructions)	110,474,087.	85,478,512.	
		Analysis of Changes in Net Assets or Fund Bala			
1		Il net assets or fund balances at beginning of year - Part		-	02 020 110
_		of-year figure reported on prior year's return)			83,038,118.
_		er amount from Part I, line 27a			-30,026,878.
3		er increases not included in line 2 (itemize)  ATCH 5		3	4,255,258.
4		lines 1, 2, and 3			57,266,498.
5		reases not included in line 2 (itemize)	lino 5) Dort II column /	5 6	57,266,498.
_6	1018	Il net assets or fund balances at end of year (line 4 minus	s iirie 5) - Part II, column (I	o), line 29   <b>6</b>	57,200,490.

Form **990-PF** (2020)

Form 990-PF (2020) Page **3** 

Pai	Part IV Capital Gains and Losses for Tax on Investment Income								
	(a) List and des 2-story br	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)					
1 a									
b									
С									
d									
е									
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu				
a									
b									
c									
d									
е									
	Complete only for assets sh	nowing gain in column (h) and owned	by the foundation on 12/31/69.		Gains (Col. (h) ga				
	(i) FMV as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	col.	(k), but not less to Losses (from co				
а									
b									
c									
d									
е				ļ					
2	Capital gain net income	or (not capital loss)	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2	4.	442,433.			
3	Net short-term capital ga	ain or (loss) as defined in sections	, · · · · · · · · · · · · · · · · · · ·	_	,	,			
-		art I, line 8, column (c). See ins							
	=			3		0.			
Pai	t V Qualification U	Inder Section 4940(e) for Rec	duced Tax on Net Investment	ncome					
			DECEMBER 20, 2019 - DO NOT C						
1	Reserved	, ,							
	(a)	(b)	(c)		(d)				
	Reserved	Reserved	Reserved		Reserved				
	Reserved								
	Reserved								
	Reserved								
	Reserved								
	Reserved								
2	Reserved			2					
3	Reserved			3					
4	Reserved			4					
5	Reserved			5					
6									
7									
′									
8	Reserved			8					

Form **990-PF** (2020)

JSA 0E1430 1.000

По	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instruction	nc)		9
		15)		
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1			
	Date of ruling or determination letter: (attach copy of letter if necessary - see instructions)  Reserved		88,6	37
			00,0	, , , ,
С	All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% of			
_	Part I, line 12, col. (b)			
2			88,6	537.
3	Add lines 1 and 2			0.
4			88,6	
5	Tax based on investment modifie. Custifact fine 4 non-line of the 2010 of 1655, Oriest O			
6	Credits/Payments: 2020 estimated tax payments and 2019 overpayment credited to 2020 6a 87,000.			
a	2020 Collimated tax payments and 2010 overpayment oredited to 2020 1.1.1			
b	2 000			
C C	Tax paid than approach for extension of time to the (1 of the coop).			
d 7	Backup withholding erroneously withheld		90,0	00.
7 8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8			211.
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10		1.1	52.
11	Enter the amount of line 10 to be: Credited to 2021 estimated tax   1,152. Refunded  11			
	rt VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
ıa	participate or intervene in any political campaign?	1a	163	X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	- iu		
b		1b		Х
	instructions for the definition	1.0		
	published or distributed by the foundation in connection with the activities.			
_	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
u	(1) On the foundation.   \$\Bigs \text{ (2) On foundation managers.} \Bigs  \interpretation for tax of point call experient resistance (section 4933) imposed during the year.			
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
-	on foundation managers.   \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	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		Х
12	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
,	If "Yes," attach the statement required by <i>General Instruction T</i> .			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
٠	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 XV	7	Х	
, 8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
Ja	OH,			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
D	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
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 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes,"			
	complete Part XIV.	9		Х
40				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х
		/		ı

Form **990-PF** (2020)

orm	990-PF (2020) AMERICAN ELECTRIC POWER FOUNDATION 20-3886	3453	F	Page \$
Par	t VII-A Statements Regarding Activities (continued)			
			Yes	No
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		Х
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► HTTPS://WWW.AEP.COM/COMMUNITY/GIVINGBACK			
14	The books are in care of $\blacktriangleright$ RUSSELL G. DOYLE Telephone no. $\blacktriangleright$ 614-716-	-260!	5	
	The books are in care of ▶ RUSSELL G. DOYLE  Located at ▶ RIVERSIDE PLAZA COLUMBUS, OH  Section 4947(a)(1) popexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	\$55_		, ,
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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.)			
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		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	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 2020?	1c		Х
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)):			
а	At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2020? Yes X			
	If "Yes," list the years  ,,,			
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			3.7
	all years listed, answer "No" and attach statement - see instructions.)	2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	٥.		
	foundation had excess business holdings in 2020.)	3b		37

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020? 4b Form **990-PF** (2020)

4a

Χ

Χ

Page 6

Fal	t VII-B	Statements Regarding Activities	tor which form	4/20 May Be Req	<b>uirea</b> (continue	u)		
5a	During the	e year, did the foundation pay or incur any amo	ount to:				Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influe	ence legislation (section	on 4945(e))?	Yes X	No		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,							
	direct	y or indirectly, any voter registration drive?			Yes X	No		
	(3) Provid	le a grant to an individual for travel, study, or c	ther similar purposes	?	Yes X	No		
	(4) Provid	le a grant to an organization other than a	charitable, etc., org	ganization described i	n			
	section	n 4945(d)(4)(A)? See instructions		, 	Yes X	No		
		le for any purpose other than religious, ch						
	purpo	ses, or for the prevention of cruelty to children	or animals?		Yes X	No		
b		swer is "Yes" to 5a(1)-(5), did any of the				d in		
	Regulation	ns section 53.4945 or in a current notice regar	ding disaster assistan	ce? See instructions.		5b		
	Organizat	ions relying on a current notice regarding disas	ster assistance, check	here				
С	If the an	swer is "Yes" to question 5a(4), does the	foundation claim e	exemption from the t	ax			
	because i	t maintained expenditure responsibility for the	grant?		Yes	No		
	If "Yes," a	ttach the statement required by Regulations s	ection 53.4945-5(d).					
6a	Did the f	oundation, during the year, receive any fur	ds, directly or indir	ectly, to pay premiur	ns			
	on a perso	onal benefit contract?			Yes X	No		
b		undation, during the year, pay premiums, dire				6b		Х
	If "Yes" to	6b, file Form 8870.						
7a	At any tim	e during the tax year, was the foundation a p	arty to a prohibited ta	x shelter transaction?	Yes X	No		
b	If "Yes," o	id the foundation receive any proceeds or have	ve any net income att	ributable to the transacti	on?	7b		
8		ndation subject to the section 4960 tax on pay	. ,					
		tion or excess parachute payment(s) during the	year?			No		
Pa	t VIII	Information About Officers, Directo and Contractors	rs, Trustees, Fou	ındation Managers	s, Highly Paid E	mployees,		
		and oonthactors						
1	List all of	ficers, directors, trustees, and foundat	ion managers and	their compensation	See instructions.			
1	List all of	ficers, directors, trustees, and foundat  (a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expe	nse acco	unt,
1	List all of	ficers, directors, trustees, and foundat  (a) Name and address				(e) Expe	nse acco allowance	unt, es
			(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensat	(e) Expe	nse acco allowance	es 
			(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred compensat	(e) Expe	nse acco allowance	unt, es
1 ATCI			(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensat	(e) Expe	nse acco allowance	es 
			(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensat	(e) Expe	nse acco allowance	es 
			(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensat	(e) Expe	nse acco allowance	es 
			(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensat	(e) Expe	nse acco allowance	es 
			(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensat	(e) Expe	nse acco	es 
ATCI	I 6	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensat	(e) Experience other	allowance	0.
	I 6		(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensat	(e) Experience other	allowance	0.
<b>2</b>	Compens	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those)	(c) Compensation (If not paid, enter -0-)  0 .	(d) Contributions to employee benefit plans and deferred compensat  1 - see instru  (d) Contributions to	(e) Experiment of the control of the	none,	0.
<b>2</b>	Compens	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation of the compensat	(e) Experience other	allowance	0. enter
<b>2</b>	Compens	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0 .	(d) Contributions to employee benefit plans and deferred compensat  1 - see instru  (d) Contributions to employee benefit	(e) Experience other	none,	0. enter
2 (a)	Compens	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0 .	(d) Contributions to employee benefit plans and deferred compensation of the compensat	(e) Experience other	none,	0. enter
2 (a)	Compens "NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0 .	(d) Contributions to employee benefit plans and deferred compensation of the compensat	(e) Experience other	none,	0. enter
2 (a)	Compens "NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0 .	(d) Contributions to employee benefit plans and deferred compensation of the compensat	(e) Experience other	none,	0. enter
2 (a)	Compens "NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0 .	(d) Contributions to employee benefit plans and deferred compensation of the compensat	(e) Experience other	none,	0. enter
2 (a)	Compens "NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0 .	(d) Contributions to employee benefit plans and deferred compensation of the compensat	(e) Experience other	none,	0. enter
2 (a)	Compens "NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0 .	(d) Contributions to employee benefit plans and deferred compensation of the compensat	(e) Experience other	none,	0. enter
2 (a)	Compens "NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0 .	(d) Contributions to employee benefit plans and deferred compensation of the compensat	(e) Experience other	none,	0. enter
2 (a)	Compens "NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0 .	(d) Contributions to employee benefit plans and deferred compensation of the compensat	(e) Experience other	none,	0. enter
2 (a)	Compens "NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than those b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0 .	(d) Contributions to employee benefit plans and deferred compensation of the compensat	(e) Experience other	none,	0. enter

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3 Five high	est-paid independent contractors for professional services. See instructions. If none, enter "NO	NE."
<u></u>	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
otal number of	others receiving over \$50,000 for professional services	•
Part IX-A	Summary of Direct Charitable Activities	•
List the foundation organizations and	on's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of other beneficiaries served, conferences convened, research papers produced, etc.	f Expenses
1 N/A		
		-
		-
2		
		-
		_
3		
4		_
		_
Part IX-B	Summary of Program-Related Investments (see instructions)	
	largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE		_
		-
2		-
		-
All other progran	n-related investments. See instructions.	
•		
3		-

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Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	eign foundation	S,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	80,787,083.
	Average of monthly cash balances	1b	7,629,082.
	Fair market value of all other assets (see instructions)	1c	
	Total (add lines 1a, b, and c)	1d	88,416,165.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	88,416,165.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	1,326,242.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	87,089,923.
6	Minimum investment return. Enter 5% of line 5	6	4,354,496.
Par	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations, check here ▶ and do not complete this part.)	g foundations	
1	Minimum investment return from Part X, line 6	1	4,354,496.
	Tax on investment income for 2020 from Part VI, line 5 2a 88,637.		
	Income tax for 2020. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b.	2c	88,637.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,265,859.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	4,265,859.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	4,265,859.
Par	T XII 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	35,590,950.
b	Program-related investments - total from Part IX-B	1b	
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	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	35,590,950.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	35,590,950.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	alculating wheth	ner the foundation

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qualifies for the section 4940(e) reduction of tax in those years.

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Da	rt XIII Undistributed Income (see instr	uctions)			<del>-</del>
Ρē	rt XIII Undistributed Income (see instr	,			
		(a) Corpus	(b) Years prior to 2019	<b>(c)</b> 2019	(d) 2020
1	Distributable amount for 2020 from Part XI,	Обіриз	Todio prior to 2010	2013	4,265,859.
_	line 7				4,203,037.
	Undistributed income, if any, as of the end of 2020:				
	Enter amount for 2019 only				
	Excess distributions carryover, if any, to 2020: 6,107,316.				
	F 242 400				
	0 254 506				
	12 052 115				
	17 701 260				
	Total of lines 3a through e	51,448,686.			
	Qualifying distributions for 2020 from Part XII,	, , , , , , , , , , , , , , , , , , , ,			
7	line 4: ► \$ 35,590,950.				
а	Applied to 2019, but not more than line 2a				
D	Applied to undistributed income of prior years (Election required - see instructions)				
_					
C	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2020 distributable amount				4,265,859.
	Remaining amount distributed out of corpus	31,325,091.			
	Excess distributions carryover applied to 2020				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as				
Ü	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	82,773,777.			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b.				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions				
е	Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount - see				
	instructions				
f	Undistributed income for 2020. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2021				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2015 not	6,107,316.			
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2021.	76,666,461.			
10	Subtract lines 7 and 8 from line 6a				
	Excess from 2016   5,243,409.				
	Excess from 2017				
	Excess from 2018 13,952,115.				
	Excess from 2019				
	Excess from 2020 31,325,091.				

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Pa	rt XIV Private Op	erating Foundations	s (see instructions a	nd Part VII-A, questi	on 9) 1	NOT APPLICABLE
	If the foundation has		`			
	foundation, and the ruling	· ·			٦	
b	Check box to indicate v	-				i)(3) or 4942(j)(5)
	Enter the lesser of the ad-	Tax year	a a parame speraming	Prior 3 years		),(e) =:
	justed net income from Part	(a) 2020	<b>(b)</b> 2019	(c) 2018	<b>(d)</b> 2017	(e) Total
	I or the minimum investment	(4) 2020	(b) 2013	(6) 2010	(4) 2017	
	return from Part X for each					
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part					
	XII, line 4, for each year listed					
a	Amounts included in line 2c not used directly for active conduct					
_	of exempt activities					
е	Qualifying distributions made directly for active conduct of					
	exempt activities. Subtract line					
3	2d from line 2c Complete 3a, b, or c for the					
•	alternative test relied upon:					
а	"Assets" alternative test - enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest- ment return shown in Part X,					
	line 6, for each year listed					
С	"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 sup-					
	port from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplemer	ntary Information (	Complete this part	only if the founda	ation had \$5,000 c	or more in assets a
	any time d	uring the year - see	instructions.)			
	Information Regarding	-				
а	List any managers of					ved by the foundation
	before the close of any	tax year (but only if tr	iey nave contributed n	nore than \$5,000). (Se	ee section 507 (d)(2).)	
	N/A					
b	List any managers of					y large portion of the
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	interest.	
	N/A					
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:		
		he foundation only				
	unsolicited requests for			ınts, etc., to individua	ls or organizations u	nder other conditions
	complete items 2a, b,					
а	The name, address, a	nd telephone number	or email address of th	ne person to whom app	olications should be add	dressed:
	ATCH 7					
b	The form in which app	lications should be sub	omitted and information	on and materials they	should include:	
С	Any submission deadli	nes:	<u> </u>			
d	Any restrictions or li	mitations on awards	, such as by geogra	aphical areas, charita	able fields, kinds of	institutions, or othe
	factors:					

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Part XV Supplementary Information (continued) Page **11** 

Supplementary information (	continuea)			
3 Grants and Contributions Paid Dur	ing the Year or App	roved for	Future Payment	
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	7 till Out it
a Paid during the year				
ATCH 8				
				25 500 050
Total			▶ 3a	35,590,950.
<b>b</b> Approved for future payment				
ATCH 9				
AICH 9				
Total				28,203,052.
IUldi				1 20,200,002.

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Part XVI	-A Analysis of Income-Prod	ucing Acti	ivities			
	amounts unless otherwise indicated.		ated business income	Excluded by	y section 512, 513, or 514	(e)
	n service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
•	r del vide revenue.					,
f						
	and contracts from government agencies					
-	ship dues and assessments					
	on savings and temporary cash investments			14	23,013.	
	ds and interest from securities			14	1,911,352.	
	al income or (loss) from real estate:					
	-financed property					
<b>b</b> Not o	debt-financed property					
6 Net renta	al income or (loss) from personal property					
7 Other in	vestment income					
8 Gain or (	loss) from sales of assets other than inventory			18	4,442,433.	
9 Net inco	ome or (loss) from special events					
10 Gross p	rofit or (loss) from sales of inventory					
11 Other re	venue: a					
b						
d						
е					6,376,798.	
	. Add columns (b), (d), and (e)					6,376,798.
	dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated				13	0,370,790.
Part XVI-			acamplichment of Ex	vomnt Dur	2000	
Line No. ▼	Explain below how each activit accomplishment of the foundation	y for which	n income is reported in	n column (e	e) of Part XVI-A contrib	•

#### Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Part XVII **Organizations**

1		•	•	ngage in any of the follow 501(c)(3) organizations)	•				Yes	No
		zations?	than section	oor(o)(o) organizations) (	) III 300tic	)	lating to political			
а	_		a foundation to :	a noncharitable exempt org	anization of					
_								1a(1)		Х
								1a(2)		X
b	` '	transactions:						14(2)		
~			ncharitable exem	pt organization				1b(1)		Х
				le exempt organization				1b(2)		X
				issets				-		Х
										Х
		=								Х
		•		o or fundraising solicitations						Х
С				, other assets, or paid empl						Х
			_	," complete the following	-				fair m	arket
				es given by the reporting						
				ement, show in column (d)						
(a) L	ine no.	(b) Amount involved	(c) Name of no	ncharitable exempt organization	(d) Desc	cription of transf	fers, transactions, and sha	ring arra	angeme	nts
		N/A			N/A					
2a	Is the	foundation directly of	or indirectly affil	liated with, or related to,	one or more	e tax-exemp	t organizations			
		•	-	tion $501(c)(3)$ ) or in section				Y	es X	No
b		s," complete the follow	•		<b>02</b>					
		(a) Name of organization		(b) Type of organization			(c) Description of relations	ship		
				ed this return, including accompanying			to the best of my knowledg	je and l	oelief, it	is true,
2i~-		ct, and complete. Declaration of	preparer (other than tax	payer) is based on all information of whi	cn preparer has ar	iy knowledge.	<u></u>			
Sigı		JANELLE COLEMAN	1	11/15/2021	PRESI	DENT	May the IRS with the pre			
ler	e i Sig	nature of officer or trustee		Date	Title		See instruction		Yes	No
		Print/Type preparer's nar	me	Preparer's signature		Date	Check if F	PTIN		
Paid							self-employed			
Pre	parer	Firm's name					Firm's EIN			
	Only	Firm's address								
	•						Phone no.			
		•						m <b>99</b>	0-PF	(2020)

# FORM 990-PF - PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

					<b></b>	P	ENT INCOM	
Kind of P	roperty		Desc	ription		or D	Date acquired	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj. basis	Excess of	Ψ	Gain	
price less expenses of sale	allowed/	other	as of	as of 12/31/69	FMV over		or	
expenses of sale	allowable	basis	12/31/69	12/31/69	adj basis	$\sqcup$	or (loss)	
		PUBLICLY TR	ADED SECURI	ΓΙΕS		P		
		PROPERTY TY						
37,600,269		33,157,83					4,442,433.	
37,000,209		33,137,03	O				4,442,433.	
TAL GAIN(LO	)SS)						4,442,433.	
777111 0771177 (11)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						=	
		I				1		

FORM 990PF, PART I - TAXES

REVENUE

AND

EXPENSES

DESCRIPTION PER BOOKS

EXCISE TAX 94,575.

> 94,575. TOTALS

DESCRIPTION

BANK FEES

STATE OF OHIO FILING FEE

# ATTACHMENT 2

# FORM 990PF, PART I - OTHER EXPENSES

REVENUE

AND

PER BOOKS 200. EXPENSES

5,695.

TOTALS

5,895.

# FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION	ENDING BOOK VALUE	ENDING <u>FMV</u>
VANGUARD EQUITY FUNDS VANGUARD BOND FUNDS	50,660,877. 30,313,785.	50,660,877. 30,313,785.
TOTALS	80,974,662.	80,974,662.

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# FORM 990PF, PART II - OTHER ASSETS

DESCRIPTION	ENDING BOOK VALUE	ENDING <u>FMV</u>
EXCISE TAX (UNDER)/OVERPAYMENT INTEREST RECEIVABLE	1,152.	1,152.
CUSTODIAN (PAYABLE)/RECEIVABLE	40,726.	40,726.
TOTALS	41,878.	41,878.

PAGE 20

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

4,255,258. UNREALIZED APPRECIATION FV OF INVESTMENT

> 4,255,258. TOTAL

#### FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	AND OTHER
NICHOLAS K. AKINS 1 RIVERSIDE PLAZA COLUMBUS, OH 43215	DIRECTOR/CHAIRMAN .10	0.		
CHARLES R. PATTON 1 RIVERSIDE PLAZA COLUMBUS, OH 43215	DIRECTOR/VICE PRESIDENT .10	0.		
LISA BARTON 1 RIVERSIDE PLAZA COLUMBUS, OH 43215	DIRECTOR/VICE PRESIDENT .10	0.		
JANELLE N. COLEMAN 1 RIVERSIDE PLAZA COLUMBUS, OH 43215	DIRECTOR/PRESIDENT 1.50	0.		
TERESA L. MCWAIN (UNTIL 7/31/20) 1 RIVERSIDE PLAZA COLUMBUS, OH 43215	DIRECTOR/ED/SECRETARY .10	0.		
DALE E. HEYDLAUFF 1 RIVERSIDE PLAZA COLUMBUS, OH 43215	DIRECTOR/PRESIDENT 1.50			

ATTACHMENT 6

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 6 (CONT'D)

TITLE AND AVERAGE HOURS PER

TO EMPLOYEE

CONTRIBUTIONS EXPENSE ACCT

NAME AND ADDRESS

WEEK DEVOTED TO POSITION

COMPENSATION

BENEFIT PLANS

AND OTHER ALLOWANCES

0.

LANA HILLEBRAND

DIRECTOR/VICE PRESIDENT

.10

1 RIVERSIDE PLAZA COLUMBUS, OH 43215

BRIAN X. TIERNEY (UNTIL 7/1/20) DIRECTOR/TREASURER

.10

1 RIVERSIDE PLAZA COLUMBUS, OH 43215

GRAND TOTALS

ATTACHMENT 6

#### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

AEP OHIO - MARIA HABERMAN 1 RIVERSIDE PLAZA, 23RD FLOOR COLUMBUS, OH 43215 MLHABERMAN@AEP.COM

FORM IN WHICH APPLICATION SHOULD BE SUBMITTED AND INFORMATION THEY SHOULD INCLUDE:

NON-PROFIT 501(C)(3) ORGANIZATIONS MUST SECURE AN INVITATION TO APPLY BY THEIR LOCAL AEP OPERATING COMPANY. THOSE ORGANIZATIONS ACCEPTED FOR APPLICATION WILL BE DIRECTED TO APPLY ONLINE.

#### SUBMISSION DEADLINES:

REQUESTS ARE ACCEPTED THROUGHOUT THE YEAR FOR CONSIDERATION.

#### RESTRICTIONS OR LIMITATIONS ON AWARDS:

TO QUALIFY FOR A GRANT FROM OUR FOUNDATION, YOU MUST:

- BE A 501(C)(3) PUBLIC CHARITY, A STATE OR POLITICAL SUBDIVISION, A GOVERNMENT-OWNED OR OPERATED COLLEGE OR UNIVERSITY, OR AN EXEMPT OPERATING FOUNDATION; AND
- BE LOCATED WITHIN THE AEP SERVICE TERRITORY OR BE NATIONAL OR REGIONAL IN SCOPE AND HAVE A PURPOSE THAT IS BENEFICIAL TO THE GENERAL PUBLIC, THE BROAD ENVIRONMENT OR THE CUSTOMERS OF AMERICAN ELECTRIC POWER.

FOR MORE INFORMATION VISIT THE FOLLOWING WEBSITE: HTTPS://WWW.AEP.COM/COMMUNITY/GIVINGBACK

KENTUCKY POWER - CINDY WISEMAN 1645 WINCHESTER AVE. ASHLAND, KY 41101 CGWISEMAN@AEP.COM

FORM IN WHICH APPLICATION SHOULD BE SUBMITTED AND INFORMATION THEY SHOULD INCLUDE:

NON-PROFIT 501(C)(3) ORGANIZATIONS MUST SECURE AN INVITATION TO APPLY BY THEIR LOCAL AEP OPERATING COMPANY. THOSE ORGANIZATIONS ACCEPTED FOR APPLICATION WILL BE DIRECTED TO APPLY ONLINE.

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FOR MORE INFORMATION VISIT THE FOLLOWING WEBSITE:

#### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

RESTRICTIONS OR LIMITATIONS ON AWARDS:

HTTPS://WWW.AEP.COM/COMMUNITY/GIVINGBACK

AEP TEXAS - TINA SALAZAR 539 N. CARANCAHUA, 17TH FLOOR CORPUS CHRISTI, TX 78478 TMSALAZAR@AEP.COM

FORM IN WHICH APPLICATION SHOULD BE SUBMITTED AND INFORMATION THEY SHOULD INCLUDE:

NON-PROFIT 501(C)(3) ORGANIZATIONS MUST SECURE AN INVITATION TO APPLY BY THEIR LOCAL AEP OPERATING COMPANY. THOSE ORGANIZATIONS ACCEPTED FOR APPLICATION WILL BE DIRECTED TO APPLY ONLINE.

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FOR MORE INFORMATION VISIT THE FOLLOWING WEBSITE: HTTPS://WWW.AEP.COM/COMMUNITY/GIVINGBACK

PSO - TIFFINI JACKSON 1601 NORTH WEST EXPRESSWAY STE 1400 OKLAHOMA CITY, OK 73118 TSJACKSON@AEP.COM

FORM IN WHICH APPLICATION SHOULD BE SUBMITTED AND INFORMATION THEY SHOULD INCLUDE:

NON-PROFIT 501(C)(3) ORGANIZATIONS MUST SECURE AN INVITATION TO APPLY BY THEIR LOCAL AEP OPERATING COMPANY. THOSE ORGANIZATIONS ACCEPTED FOR APPLICATION WILL BE DIRECTED TO APPLY ONLINE.

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#### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

#### RESTRICTIONS OR LIMITATIONS ON AWARDS:

GENERAL PUBLIC, THE BROAD ENVIRONMENT OR THE CUSTOMERS OF AMERICAN ELECTRIC POWER.

FOR MORE INFORMATION VISIT THE FOLLOWING WEBSITE:

HTTPS://WWW.AEP.COM/COMMUNITY/GIVINGBACK

APPALACHIAN POWER - PHIL MOYE 500 LEE STREET EAST, SUITE 800 CHARLESTON, WV 25301 PAMOYE@AEP.COM

FORM IN WHICH APPLICATION SHOULD BE SUBMITTED AND INFORMATION THEY SHOULD INCLUDE:

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HTTPS://WWW.AEP.COM/COMMUNITY/GIVINGBACK

SWEPCO - BRIAN BOND 428 TRAVIS ST. SHREVEPORT, LA 71101 TBBOND@AEP.COM

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#### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

#### RESTRICTIONS OR LIMITATIONS ON AWARDS:

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HTTPS://WWW.AEP.COM/COMMUNITY/GIVINGBACK

INDIANA MICHIGAN PWR - ROB KEISLING 5000 WHEELING AVE., 01 MUNCIE, IN 47304 RJKEISLING@AEP.COM

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FOR MORE INFORMATION VISIT THE FOLLOWING WEBSITE:

HTTPS://WWW.AEP.COM/COMMUNITY/GIVINGBACK

AEP ENERGY - JOYCE WILLIAMS 225 W. WACKER DRIVE CHICAGO, IL 60606 JWILLIAMS@AEPENERGY.COM

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#### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

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AEP RENEWABLES - JOYCE WILLIAMS 225 W. WACKER DRIVE CHICAGO, IL 60606 JWILLIAMS@AEPENERGY.COM

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AEP ONSITE PTRS - JOYCE WILLIAMS 225 W. WACKER DRIVE CHICAGO, IL 60606 JWILLIAMS@AEPENERGY.COM

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FOR MORE INFORMATION VISIT THE FOLLOWING WEBSITE: HTTPS://WWW.AEP.COM/COMMUNITY/GIVINGBACK

500 W. WILSON BRIDGE ROAD, SUITE 245

WORTHINGTON, OH 43205

#### FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BALL STATE UNIVERSITY	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
2000 W UNIVERSITY AVE			
MUNCIE, IN 47306			
BRIDGEVALLEY COMMUNITY & TECHNICAL COLLEGE	PC	TO HELP AND IMPROVE AEP COMMUNITIES	343,425.
2001 UNION CARBIDE DRIVE			
SOUTH CHARLESTON, WV 25303			
CAPITAL UNIVERSITY	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
E. MAIN STREET AND COLLEGE AVENUE			
BEXLEY, OH 43209			
CHAMPIONS OF THE COMMUNITY	PC	TO HELP AND IMPROVE AEP COMMUNITIES	267,450.
ONE WEST NATIONWIDE BLVD 1-03-701	10	10 1221 122 1121012 122 001110111120	207,1301
COLUMBUS, OH 43215			
CHILDREN'S HUNGER ALLIANCE	PC	TO HELP AND IMPROVE AEP COMMUNITIES	125,000.
1105 SCHROCK ROAD, SUITE 505			
COLUMBUS, OH 43229			
CHOICES FOR VICTIMS OF DOMESTIC VIOLENCE	PC	TO HELP AND IMPROVE AEP COMMUNITIES	500,000.

1218PN 568D 11/15/2021 12:49:51 PM V 20-7.6F PAGE 30

ATTACHMENT 8

AMERICAN ELECTRIC POWER FOUNDATION

COLUMBUS, OH 43215

#### ATTACHMENT 8 (CONT'D)

#### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CHRISTUS SPOHN HEALTH SYSTEM DEVELOPMENT FDN 600 ELIZABETH STREET CORPUS CHRISTI, TX 78404	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
COLUMBUS ASSOCIATION FOR THE PERFORMING ARTS, INC. 55 EAST STATE STREET COLUMBUS, OH 43215	PC	TO HELP AND IMPROVE AEP COMMUNITIES	200,000.
COLUMBUS METROPOLITAN LIBRARY FOUNDATION 96 SOUTH GRANT AVENUE COLUMBUS, OH 43215-4781	PC	TO HELP AND IMPROVE AEP COMMUNITIES	200,000.
COLUMBUS ZOO AND AQUARIUM PO BOX 400 POWELL, OH 43065	PC	TO HELP AND IMPROVE AEP COMMUNITIES	500,000.
COMMUNITY SHELTER BOARD 111 LIBERTY STREET, SUITE 150 COLUMBUS, OH 43215	PC	TO HELP AND IMPROVE AEP COMMUNITIES	325,000.
COSI 333 WEST BROAD STREET	PC	TO HELP AND IMPROVE AEP COMMUNITIES	350,000.

ATTACHMENT 8
PAGE 31

#### ATTACHMENT 8 (CONT'D)

#### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DIRECTIONS FOR YOUTH & FAMILIES INC. 1515 INDIANOLA AVENUE COLUMBUS, OH 43201	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
ELKHART HEALTH FITNESS AND AQUATICS, INC. 600 EAST BOULEVARD ELKHART, IN 46514	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
FOUNDATION FOR APPALACHIAN OHIO 35 PUBLIC SQUARE PO BOX 456 NELSONVILLE, OH 45764	PC	TO HELP AND IMPROVE AEP COMMUNITIES	250,000.
FRIENDS OF THE CONSERVATORY  1777 EAST BROAD STREET  COLUMBUS, OH 43203	PC	TO HELP AND IMPROVE AEP COMMUNITIES	150,000.
GIRL SCOUTS OF OHIO'S HEARTLAND COUNCIL, INC.  1700 WATERMARK DRIVE  COLUMBUS, OH 43215	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
HABITAT FOR HUMANITY - MIDOHIO 6665 BUSCH BOULEVARD COLUMBUS, OH 43229	PC	TO HELP AND IMPROVE AEP COMMUNITIES	275,000.

COLUMBUS, OH 43271-0811

#### FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

#### ATTACHMENT 8 (CONT'D)

#### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
IVY TECH FOUNDATION, INC.	PC	TO HELP AND IMPROVE AEP COMMUNITIES	159,930.
345 S. HIGH STREET			
MUNCIE, IN 47305			
LAREDO COLLEGE	PC	TO HELP AND IMPROVE AEP COMMUNITIES	401,649.
101 W. HILLSIDE ROAD, SUITE 9			
LAREDO, TX 78041			
LIFECARE ALLIANCE	PC	TO HELP AND IMPROVE AEP COMMUNITIES	250,000
1699 W. MOUND STREET	PC	TO RELE AND IMPROVE ARE COMMUNITIES	250,000.
COLUMBUS, OH 43223-1855			
CONORDOS, ON 43223 1033			
MID-OHIO FOODBANK	PC	TO HELP AND IMPROVE AEP COMMUNITIES	1,200,000.
3960 BROOKHAM DRIVE			
GROVE CITY, OH 43123			
NATIONWIDE CHILDREN'S HOSPITAL FOUNDATION	PC	TO HELP AND IMPROVE AEP COMMUNITIES	441,763.
700 CHILDREN'S DRIVE			
COLUMBUS, OH 43205			
OHIO STATE UNIVERSITY FOUNDATION	PC	TO HELP AND IMPROVE AEP COMMUNITIES	1,250,000.
P.O. BOX 710811			
1480 W. LANE AVENUE			

ATTACHMENT 8

AMERICAN ELECTRIC POWER FOUNDATION

COLUMBUS, OH 43215

#### ATTACHMENT 8 (CONT'D)

#### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

	AND	AND				
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT			
POTAWATOMI ZOOLOGICAL SOCIETY, INC. P.O. BOX 1764	PC	TO HELP AND IMPROVE AEP COMMUNITIES	108,000.			
SOUTH BEND, IN 46634						
ROCK AND ROLL HALL OF FAME MUSEUM 1100 E. 9TH STREET CLEVELAND, OH 44114	PC	TO HELP AND IMPROVE AEP COMMUNITIES	450,000.			
SCIENCE CENTRAL, INC. 1950 NORTH CLINTON STREET FORT WAYNE, IN 46805	PC	TO HELP AND IMPROVE AEP COMMUNITIES	150,000.			
FURI WAINE, IN 40805						
THE CENTER FOR HEALTHY FAMILIES, INC. 500 SOUTH FRONT STREET RM/STE 930	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.			
COLUMBUS, OH 43215						
THE COLUMBUS FOUNDATION 1234 EAST BROAD STREET COLUMBUS, OH 43205	PC	TO HELP AND IMPROVE AEP COMMUNITIES	400,435.			
THE COLUMBUS PARTNERSHIP 150 S. FRONT STREET, SUITE 200	PC	TO HELP AND IMPROVE AEP COMMUNITIES	500,000.			

20-3886453

COLUMBUS, OH 43215

#### FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

#### ATTACHMENT 8 (CONT'D)

#### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE EDUCATION ALLIANCE 803 QUARRIER ST #500 CHARLESTON, WV 25301	PC	TO HELP AND IMPROVE AEP COMMUNITIES	150,000.
THE FORT WAYNE RESCUE MISSION MINISTRIES 301 WEST SUPERIOR STREET FORT WAYNE, IN 46802	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
TULSA CHILDREN'S MUSEUM 560 N. MAYBELLE AVENUE TULSA, OK 74127	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
TULSA COMMUNITY COLLEGE FOUNDATION 6111 E. SKELLY DRIVE TULSA, OK 74135	PC	TO HELP AND IMPROVE AEP COMMUNITIES	1,144,180.
TULSA COMMUNITY FOUNDATION 7030 S. YALE, SUITE 600 TULSA, OK 74136	PC	TO HELP AND IMPROVE AEP COMMUNITIES	1,750,000.
UNITED WAY OF CENTRAL OHIO 360 SOUTH THIRD STREET	PC	TO HELP AND IMPROVE AEP COMMUNITIES	1,175,000.

COLUMBUS, OH 43206

#### FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

#### ATTACHMENT 8 (CONT'D)

#### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
			<del></del>
UNIVERSITY OF ARKANSAS FOUNDATION	PC	TO HELP AND IMPROVE AEP COMMUNITIES	300,000.
535 RESEARCH CENTER BLVD			
FAYETTEVILLE, AR 72701			
OTHERS (LESS THAN \$100K)	PC	TO HELP AND IMPROVE AEP COMMUNITIES	13,559,164.
1 RIVERSIDE PLAZA			
COLUMBUS, OH 43215			
ABILENE HERITAGE SQUARE INC	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
PO BOX 1699			
ABILENE, TX 796014699			
AKRON-CANTON REGIONAL FOODBANK	PC	TO HELP AND IMPROVE AEP COMMUNITIES	200,000.
350 OPPORTUNITY PARKWAY			
AKRON, OH 443072234			
ANGELO STATE UNIVERSITY FOUNDATION INC	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
ASU STATION #11023			
SAN ANGELO, TX 76909			
BOYS & GIRLS CLUBS OF COLUMBUS, INC.	PC	TO HELP AND IMPROVE AEP COMMUNITIES	250,000.
1108 CITY PARK AVENUE, SUITE 301			

AMERICAN ELECTRIC POWER FOUNDATION

CRISTO REY COLUMBUS HIGH SCHOOL

400 E. TOWN STREET COLUMBUS, OH 43215

#### ATTACHMENT 8 (CONT'D) RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND RECIPIENT NAME AND ADDRESS FOUNDATION STATUS OF RECIPIENT PURPOSE OF GRANT OR CONTRIBUTION AMOUNT COLUMBUS DOWNTOWN DEVELOPMENT PC TO HELP AND IMPROVE AEP COMMUNITIES 334,000. 150 S. FRONT STREET, SUITE 210 COLUMBUS, OH 43215 COLUMBUS STATE COMMUNITY COLLEGE DEVELOPMENT PC TO HELP AND IMPROVE AEP COMMUNITIES 2,000,070. FRANKLIN HALL, ROOM 252 P.O. BOX 1609 COLUMBUS, OH 43215 COLUMBUS SYMPHONY ORCHESTRA, INC. PC TO HELP AND IMPROVE AEP COMMUNITIES 250,000. 55 E. STATE STREET COLUMBUS, OH 43215 COMMUNITY HARVEST FOOD BANK OF NORTHEAST INDIANA PC TO HELP AND IMPROVE AEP COMMUNITIES 200,000. 999 E. TILMAN ROAD P.O. BOX 10967 FORT WAYNE, IN 46816 CONNEC TRAIN CORP PC TO HELP AND IMPROVE AEP COMMUNITIES 125,000. 1116 SMITH STREET CHARLESTON, WV 25301

1218PN 568D 11/15/2021 12:49:51 PM V 20-7.6F PAGE 37

PC

TO HELP AND IMPROVE AEP COMMUNITIES

322,000.

COLUMBUS, OH 43206

#### FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

#### ATTACHMENT 8 (CONT'D)

#### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CULTIVATE CULINARY SCHOOL AND CATERING INC. 1403 PRAIRIE AVENUE SOUTH BEND, IN 46613	PC	TO HELP AND IMPROVE AEP COMMUNITIES	126,000.
DEL MAR COLLEGE FOUNDATION, INC. 101 BALDWIN BLVD. CORPUS CHRISTI, TX 78404	PC	TO HELP AND IMPROVE AEP COMMUNITIES	200,000.
DRISCOLL CHILDRENS HOSPITAL 3533 S. ALAMEDA CORPUS CHRISTI, TX 78411	PC	TO HELP AND IMPROVE AEP COMMUNITIES	150,000.
EARLY CHILDHOOD ALLIANCE INC. 3800 N. ANTHONY BLVD. FORT WAYNE, IN 46805	PC	TO HELP AND IMPROVE AEP COMMUNITIES	219,000.
GREATER COLUMBUS ARTS COUNCIL INC. 182 E. LONG STREET COLUMBUS, OH 43215	PC	TO HELP AND IMPROVE AEP COMMUNITIES	150,000.
I KNOW I CAN 1108 CITY PARK AVENUE, SUITE 301	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.

20-3886453

ATTACHMENT 8

AMERICAN ELECTRIC POWER FOUNDATION

#### ATTACHMENT 8 (CONT'D)

#### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ILLINOIS RIVER WATERSHED PTR P.O. BOX 205 CAVE SPRINGS, AR 72718	PC	TO HELP AND IMPROVE AEP COMMUNITIES	200,000.
KILGORE COLLEGE FOUNDATION KILGORE TEXAS 1100 BROADWAY KILGORE, TX 75662	PC	TO HELP AND IMPROVE AEP COMMUNITIES	140,000.
MARSHALL UNIVERSITY RESEARCH CORPORATION ONE JOHN MARSHALL DRIVE HUNTINGTON, WV 25755	PC	TO HELP AND IMPROVE AEP COMMUNITIES	150,000.
NEW ALBANY COMMUNITY FOUNDATION 220 MARKET STREET, SUITE 205 NEW ALBANY, OH 43054	PC	TO HELP AND IMPROVE AEP COMMUNITIES	150,000.
OHIO GOVERNOR'S IMAGINATION LIBRARY 2168 SUTTER PARKWAY DUBLIN, OH 43016	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
OHIOHEALTH CORPORATION 3430 OHIOHEALTH PARKWAY COLUMBUS, OH 43202	SO-DP	TO HELP AND IMPROVE AEP COMMUNITIES	300,000.

#### ATTACHMENT 8 (CONT'D)

#### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
PURDUE UNIVERSITY 2101 E. COLISEUM BLVD FORT WAYNE, IN 46805	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
RONALD MCDONALD HOUSE CHARITIES OF CENTRAL OHIO 711 EAST LIVINGSTON AVENUE COLUMBUS, OH 43205	PC	TO HELP AND IMPROVE AEP COMMUNITIES	250,000.
SAFETY BLITZ FOUNDATIONS INC. 624 TEXAS CENTRAL PARKWAY WACO, TX 76712	PC	TO HELP AND IMPROVE AEP COMMUNITIES	244,884.
SECOND HARVEST FOOD BANK OF EAST CENTRAL INDIANA 6621 N. OLD SR 3 MUNCIE, IN 47303	PC	TO HELP AND IMPROVE AEP COMMUNITIES	104,000.
STAR HOUSE FOUNDATION 1220 CORRUGATED WAY COLUMBUS, OH 43201	PC	TO HELP AND IMPROVE AEP COMMUNITIES	250,000.
TEXAS A&M UNIVERSITY - TEXARKANA 7101 UNIVERSITY AVENUE TEXARKANA, TX 75503	GOV	TO HELP AND IMPROVE AEP COMMUNITIES	125,000.

20-3886453

ATTACHMENT 8

AMERICAN ELECTRIC POWER FOUNDATION

#### ATTACHMENT 8 (CONT'D)

RELATIONSHIP	TO	${\tt SUBSTANTIAL}$	CONTRIBUTOR
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	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE HOMELESS FAMILIES FOUNDATION	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
33 N. GRUBB STREET			
COLUMBUS, OH 43215			
THE TSTC FOUNDATION	PC	TO HELP AND IMPROVE AEP COMMUNITIES	300,000.
3801 CAMPUS DRIVE			
WACO, TX 76705			
UNITED WAY OF ST. JOSEPH COUNTY INC.	PC	TO HELP AND IMPROVE AEP COMMUNITIES	100,000.
3517 E. JEFFERSON BLVD.			
SOUTH BEND, IN 46615			
WEXNER CENTER FOUNDATION	SO III FI	TO HELP AND IMPROVE AEP COMMUNITIES	125,000.
1234 E. BROAD STREET			
COLUMBUS, OH 43205			
YOUNG MEN'S CHRISTIAN ASSOCIATION OF CENTRAL OHIO	PC	TO HELP AND IMPROVE AEP COMMUNITIES	250,000.
1907 LEONARD AVENUE, SUITE 150			
COLUMBUS, OH 43219			

ATTACHMENT 8

TOTAL CONTRIBUTIONS PAID

35,590,950.

#### FORM 990PF, PART XV - CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

		ATT	CACHMENT 9
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DUE IN 2021	PC	TO HELP AND IMPROVE AEP COMMUNITIES	15,978,573.
1 RIVERSIDE PLAZA			
COLUMBUS, OH 43215			
DUE IN 2022	PC	TO HELP AND IMPROVE AEP COMMUNITIES	7,337,293.
1 RIVERSIDE PLAZA			
COLUMBUS, OH 43215			
DUE IN 2023	PC	TO HELP AND IMPROVE AEP COMMUNITIES	3,389,483.
1 RIVERSIDE PLAZA			
COLUMBUS, OH 43215			
DUE IN 2024	PC	TO HELP AND IMPROVE AEP COMMUNITIES	1,497,703.
1 RIVERSIDE PLAZA			
COLUMBUS, OH 43215			
		TOTAL CONTRIBUTIONS APPROVED	28,203,052.

# Department of the Treasury

AMERICAN ELECTRIC POWER FOUNDATION

# Underpayment of Estimated Tax by Corporations

► Attach to the corporation's tax return.

► Go to www.irs.gov/Form2220 for instructions and the latest information.

OMB No. 1545-0123

Internal Revenue Service Name

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty

**Employer identification number** 20-3886453

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 88,637. 1 Total tax (see instructions) 2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 . . Look-back interest included on line 1 under section 460(b)(2) for completed long-term 2b contracts or section 167(g) for depreciation under the income forecast method. . . . . Credit for federal tax paid on fuels (see instructions) 2c Total. Add lines 2a through 2c d Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation 3 88,637. 3 does not owe the penalty Enter the tax shown on the corporation's 2019 income tax return. See instructions. Caution: If the tax is zero or 53,741. the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 . . . . . . 4 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter 53,741. Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty. See instructions. 6 The corporation is using the adjusted seasonal installment method. 7 The corporation is using the annualized income installment method. The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. Part III Figuring the Underpayment (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 05/15/2020 06/15/2020 09/15/2020 12/15/2020 of the corporation's tax year. Filers with installments due on or after April 1, 2020, and before July 15, 2020, see instructions 10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule 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 13,435 30,884. 22,159 22,159. each column Estimated tax paid or credited for each period. For column (a) only, enter the amount from 28,000 24,000 35,000. line 11 on line 15. See instructions Complete lines 12 through 18 of one column before going to the next column. 14,565 12 Enter amount, if any, from line 18 of the preceding column . . 24,000 35,000. 14,565 13 Add lines 11 and 12 14,478. 16,319 14 Add amounts on lines 16 and 17 of the preceding column 28,000 14,565 7,681 20,522. 15 15 Subtract line 14 from line 13. If zero or less, enter -0-16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-

16,319

14,478

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.

14,565.

17

. 18

For Paperwork Reduction Act Notice, see separate instructions.

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 column. Otherwise, go to

Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line

12 of the next column

Form **2220** (2020)

17

18

line 18 . .

1,637.

Form 2220 (2020) Page **2** 

	rt IV Figuring the Penalty					, .	/ r
0	Enter the date of payment or the 15th day of the 4th month after		(a)		(b)	(c)	(d)
	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					
	Number of days from due date of installment on line 9 to the						
	•	20					
	date shown on line 19	20					
	Number of days on line 20 after 4/15/2020 and before 7/1/2020	21					
	······································						
2	Underpayment on line 17 x Number of days on line 21 x 5% (0.05)	22	\$	\$		\$	\$
	366					*	-
į	Number of days on line 20 after 6/30/2020 and before 10/1/2020	23	ATTACHME	NT	1		
	Number of days on line 20 diter 0/30/2020 and belofe 10/1/2020						
	Underpayment on line 17 x Number of days on line 23 x 3% (0.03)	24	¢	\$		\$	\$
•	366	24	SEE PENAI	_	COMPUTA	т	PAPER DETA
			SEE PENAL	111	COMPUIA	TITON MUTIF	PAPER DETA.
)	Number of days on line 20 after 9/30/2020 and before 1/1/2021	25					-
	Underpayment on line 17 x Number of days on line 25 x 3% (0.03)		<b>.</b>	φ.		<b>c</b>	<u></u>
	Underpayment on line 17 x (0.03)	26	<b>\$</b>	\$		\$	\$
	300						
•	Number of days on line 20 after 12/31/2020 and before 4/1/2021	27					
	Number of days on line 27						
3	Underpayment on line 17 x Number of days on line 27 x 3% (0.03)	28	\$	\$		\$	\$
	305						
)	Number of days on line 20 after 3/31/2021 and before 7/1/2021	29					
)	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$		\$	\$
	365						
	Number of days on line 20 after 6/30/2021 and before 10/1/2021	31					
	Trained of days of line 20 and 0/00/2021 and bolote 10/1/2021	-					
	Underpayment on line 17 x Number of days on line 31 $_{ m X}$ *%	32	œ.	\$		\$	\$
	365	32	Φ	Ψ		Φ	Φ
•	Number of days on line 20 after 9/30/2021 and before 1/1/2022	33					
	Number of days on line 22						
Ļ	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$		\$	\$
	365						
	Number of days on line 20 after 12/31/2021 and before 3/16/2022	35					
	No. 1 C. 1 C. 1						
3	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$		\$	\$
	365						
,	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$		\$	\$
						e comparable	

\*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** (2020)

# PENALTY COMPUTATION DETAIL - FORM 2220

DATE I	PD UNDERPAYMENT	BEG.DATE	END DATE	DAYS	%	PENALTY
QUARTER 2	, RATE PERIOD 1 ((	7/15/2020 -	12/31/2020)	=		
	020 16,319. OTAL TO FORM 2220			62	3	<u>83.</u> <u>83.</u>
QUARTER 3	, RATE PERIOD 1 (	9/15/2020 -1	12/31/2020 )	=		
	020 14,478. DTAL TO FORM 2220			91	3	108. 108.
QUARTER 4	, RATE PERIOD 1 (1	2/15/2020 -	12/31/2020)	=		
T	1,637. DTAL TO FORM 2220		12/31/2020 OLUMN D	16	3	<u>2.</u> <u>2.</u>
QUARTER 4	, RATE PERIOD 2 (1	2/31/2020 -	05/15/2021)	=		
TO	1,637. OTAL TO FORM 2220		05/15/2021 OLUMN D	135	3	<u>18.</u> 18.
TOTAL UNI	DERPAYMENT PENALT	Y				211.