

Form **990EZ**

Short Form

Return of Organization Exempt From Income Tax

OMB No. 1545-

1150

2020

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990EZ for instructions and the latest information.

Department of the Treasury Internal Revenue Service

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: WIXARIKA RESEARCH CENTER. Number and street: 863 LEO WAY. City or town: OAKLAND, CA 946111964

D Employer identification number: 68-0475089. E Telephone number: (510) 420-1116. F Group Exemption Number

G Accounting Method: Cash, Accrual, Other (specify)

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: WWW.WIXARIKA.ORG

J Tax-exempt status (check only one) 501(c)(3), 501(c), 4947(a)(1), 527

K Form of organization: Corporation, Trust, Association, Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ \$ 91,520

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I

Table with 3 columns: Line number, Description, and Amount. Rows include Revenue (1-9), Expenses (10-17), and Net Assets (18-21).

**Part II Balance Sheets** (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

|   | (A) Beginning of year |           | (B) End of year |
|---|-----------------------|-----------|-----------------|
| <b>22</b> Cash, savings, and investments . . . . .                                    | 33,095                | <b>22</b> | 15,361          |
| <b>23</b> Land and buildings . . . . .  |                       | <b>23</b> |                 |
| <b>24</b> Other assets (describe in Schedule O) . . . . .                             | 55,198                | <b>24</b> | 51,552          |
| <b>25</b> Total assets . . . . .  | 88,293                | <b>25</b> | 66,913          |
| <b>26</b> Total liabilities (describe in Schedule O). . . . .                         |                       | <b>26</b> |                 |
| <b>27</b> Net assets or fund balances (line 27 of column (B) must agree with line 21) | 88,293                | <b>27</b> | 66,913          |

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

**Expenses**  
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

What is the organization's primary exempt purpose?  
**ADVOCACY FOR THE HUICHOL INDIANS IN MEXICO, AND PRESERVATION AND PROMOTION OF THE HUICHOL CULTURE AND ARTWORK.**

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**28** OUR MISSION AT THE WIXRIKA RESEARCH CENTER IS TO CONTINUE BUILDING A RICH ARCHIVE OF WIXRIKA HISTORY, CULTURE AND TERRITORY THAT HIGHLIGHTS THE BEAUTY AND IMPORTANCE OF WIXRIKA CULTURAL SURVIVAL, ALONGSIDE OUR CONTINUED SUPPORT OF SELECT INITIATIVES THAT STRENGTHEN WIXRIKA AUTONOMY. WE ARE HAPPY TO SHARE WITH YOU OUR ACTIVITIES DURING OUR 2020 2021 FISCAL YEAR. DURING THIS LAST FISCAL YEAR, WE FOUND OURSELVES IN QUARANTINE AND OUR BOARD OF DIRECTORS WAS UNABLE TO GATHER IN PERSON FOR WORK OR MEETINGS. OUR INTERACTION WAS STRICTLY VIA FACETIME, ZOOM, AND EMAIL. OUR DIRECTOR TOOK ON A GOOD DEAL OF WORK THAT HAD BEEN DONE BY OTHERS PRIOR TO QUARANTINE, ADDING TO THE TIME SHE DEDICATED EACH WEEK TO WORKING FOR THE FOUNDATION. THE PRESIDENT OF OUR BOARD OF DIRECTORS WORKED BY PHONE, EMAIL, AND ZOOM WITH THE WIXRIKA PEOPLE IN MEXICO ON THE DEVELOPMENT OF A NEW PROJECT TO PROMOTE THE ENVIRONMENTAL RESTORATION AND PROTECTION OF THE SACRED DESERT OF WIRIKUTA. SHE ALSO ADVISED WIXRIKA STUDENTS WHO WERE STRUGGLING TO NAVIGATE THE PANDEMIC AND KEEP UP WITH THEIR CLASSES UNDER QUARANTINE AND PROMOTED THE SALE OF THE CATALOGUE WE PUBLISHED IN MEXICO. BETWEEN MAY AND JULY, WE WORKED ON GETTING THE EXHIBIT TRANSPORTED FROM WHERE IT WAS IN STORAGE BACK TO THE UNITED STATES. THE COLLECTION HAD ENTERED MEXICO ON A TEMPORARY PERMIT THAT WAS DUE TO EXPIRE IN JUNE 2020, UNLESS THE EXHIBIT TRAVELED TO ANOTHER MUSEUM IN MEXICO. SINCE ALL MUSEUMS WERE CLOSED FOR THE REMAINDER OF THAT YEAR AND POSSIBLY LONGER, THE MUSEO CABAAS REQUESTED AN EXTENSION FROM THE MEXICAN AUTHORITIES, AND WE WERE GRANTED A ONE-YEAR EXTENSION TO RETURN THE COLLECTION TO THE UNITED STATES. IN JULY THE BORDER REOPENED AND BY MID-AUGUST 2020, ALL THE WORKS HAD BEEN RETURNED TO RADFORD UNIVERSITY AND THE INDIVIDUAL COLLECTORS WHO HAD LOANED PAINTINGS FOR THE EXHIBIT. DURING THIS YEAR IN QUARANTINE, WE PUT TIME INTO LEARNING AND SETTING UP MAIL CHIMP TO DISTRIBUTE OUR NEWSLETTERS AND OTHER ANNOUNCEMENTS MORE EFFICIENTLY. NOW, PEOPLE CAN SIGN UP FOR OUR NEWSLETTERS DIRECTLY THROUGH OUR WEBSITE. THIS HAS BEEN A BIG IMPROVEMENT AND GIVES US VALUABLE FEEDBACK ON HOW OUR MAILINGS ARE BEING RECEIVED AND HOW MANY NEW SUBSCRIBERS SIGN UP. THIS WAS ALSO THE FIRST FULL YEAR THAT OUR ONLINE STORE WAS OPEN, AND WE SEE IS GETTING A FAIR AMOUNT OF TRAFFIC AND IT HAS BEEN GENERATING SALES. OUR DIRECTOR HAS BEEN HANDLING MANAGING THE STORE AND THE PACKING AND SHIPPING AND WILL CONTINUE TO DO SO UNTIL THE END OF THE PANDEMIC. WE STUDIED THE INFORMATION THAT IS AVAILABLE ON THE INTERNET FROM OTHER SOURCES ON WIXRIKA ART AND CULTURE AND BELIEVE OUR WEBSITE IS THE BEST SOURCE FOR SERIOUS AND ACCURATE INFORMATION FOR ACADEMICS, STUDENTS, AND THE PUBLIC AT LARGE. SINCE WE WERE UNABLE TO HAVE ANY IN PERSON EVENTS TO RAISE FUNDS, WE SPENT A GOOD DEAL OF TIME WORKING TO GENERATE FUNDING THROUGH OUR WEBSITE, APPEALS TO OUR GROUPS ON FACEBOOK, THROUGH OUR NEWSLETTERS, PERSONAL COMMUNICATIONS, AND SALES THROUGH OUR ONLINE STORE. WE ALSO WORKED TO GENERATE SALES OF OUR CATALOGUE IN MEXICO IN COORDINATION WITH THE EDITOR AND WIXRIKA CONTACTS. ARTICLES AND PRESS REPORTS WERE TRANSLATED FROM SPANISH INTO ENGLISH AND POSTED TO OUR WEBSITE AND TO FACEBOOK FOR OUR FOLLOWERS WHO DO NOT READ SPANISH. VIDEO CONFERENCES WERE UPLOADED TO OUR YOUTUBE CHANNEL AND TO THE VIDEO SECTION OF OUR WEBSITE. WE WORKED AGAIN THIS YEAR WITH THE INTERNATIONAL FRIENDSHIP CLUB AND THE ROTARY CLUB IN PUERTO VALLARTA TO GIVE FINANCIAL ASSISTANCE TO 14 WIXRIKA UNIVERSITY STUDENTS. SUPPORT FOR THESE STUDENTS HAS BEEN CRUCIAL DURING THE PANDEMIC BECAUSE THEY ARE INCURRING ADDITIONAL EXPENSES SUCH AS PAYING FOR DAILY INTERNET ACCESS TO DO THEIR CLASSES ONLINE, AND MANY WHO PREVIOUSLY HAD WORKED ONE OR TWO PART TIME JOBS ARE NOW COMPLETELY OUT OF WORK. WE EXPECT TO BE ABLE TO HELP MORE STUDENTS NEXT YEAR THANKS TO THE OVERWHELMING INTEREST AND SUPPORT FROM OUR DONORS WHO WISH TO CONTRIBUTE TO THIS PROGRAM. AS WE CONTINUED TO WORK ON IMPROVING AND EXPANDING OUR ONLINE ARCHIVE, WE ATTRACTED MORE ATTENTION AND ADMIRATION FROM THE WIXRIKA PEOPLE AND FROM ACADEMICS AND STUDENTS FROM AROUND THE WORLD. DURING THE PAST YEAR OUR AUDIENCE GREW, AND WE CONTINUED TO PARTICIPATE IN, AND MODERATE, INTERNATIONAL CONFERENCES. WE REGULARLY RECEIVED CORRESPONDENCE FROM BOTH ACADEMICS AND STUDENTS LOOKING FOR GUIDANCE PRIOR TO TRAVELING TO MEXICO TO DO FIELD WORK AND IT IS ALWAYS A PLEASURE TO CONNECT THEM WITH WIXRIKA PEOPLE WHO ARE WILLING TO WORK WITH THEM AND HELP THEM WITH THEIR RESEARCH PROJECTS IN THE FIELD. THIS YEAR SAW MANY DEATHS AMONG THE WIXARITARI, AND WE WERE OFTEN CALLED UPON FOR EMOTIONAL SUPPORT AND ADVICE. SEVERAL TIMES, WE WERE ASKED FOR MONETARY HELP TO ASSIST WITH BURIAL EXPENSES WHICH WE GAVE AS INDIVIDUALS DIRECTLY TO THE FAMILIES IN NEED. THE WIXRIKA RESEARCH CENTER MAINTAINS AN ACTIVE, CONTINUOUS AND BONA FIDE FUNDRAISING PROGRAM DESIGNED TO ATTRACT NEW AND ADDITIONAL PUBLIC AND GOVERNMENTAL SUPPORT. TO GENERATE PUBLIC SUPPORT, THE ORGANIZATION SENDS OUT A BI-ANNUAL NEWSLETTER TO SOLICIT DONATIONS FROM ALL THE PEOPLE WHO HAVE SIGNED UP TO RECEIVE THE ORGANIZATION'S ELECTRONIC NEWSLETTER. THE ORGANIZATION ALSO MAINTAINS TWO FACEBOOK GROUPS CALLED "WIXRIKA CULTURAL SURVIVAL- AND "WIXRIKA RESEARCH CENTER- AND BETWEEN THE TWO WE ARE FOLLOWED BY MORE THAN 7, 000 PEOPLE. BOTH PAGES ARE FOLLOWED BY MANY PEOPLE FROM THE WIXRIKA COMMUNITIES, AND THIS HAS BROUGHT ABOUT AN INCREASED INTERACTION BETWEEN US AND THE WIXRIKA PEOPLE. OFTEN, FUND RAISING EVENTS ON FACEBOOK HAVE BEEN INITIATED BY PEOPLE WHO PUT UP A FUND RAISER TO SUPPORT THE WIXRIKA RESEARCH CENTER IN CELEBRATION OF THEIR BIRTHDAY. WE ARE QUITE HONORED BY THIS

**28a** 109,134

|  |   |                   |
|--|---|-------------------|
| <b>29</b>  |   | <b>29a</b>        |
| (Grants \$ )   | If this amount includes foreign grants, check here <input type="checkbox"/> |                   |
| <b>30</b>  |   | <b>30a</b>        |
| (Grants \$ )   | If this amount includes foreign grants, check here <input type="checkbox"/> |                   |
| <b>31</b> Other program services (describe in Schedule O)            |   |                   |
| (Grants \$ )   | If this amount includes foreign grants, check here <input type="checkbox"/> | <b>31a</b>        |
| <b>32 Total program service expenses</b> (add lines 28a through 31a) |   | <b>32</b> 109,134 |

**Part IV List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated — see the instructions for Part IV)  
 Check if the organization used Schedule O to respond to any question in this Part IV.

| (a) Name and title                   | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimated amount of other compensation |
|--------------------------------------|--|--|---|--|
| YVONNE NEGRIN<br>EXECUTIVE DI        | 60.00  | 72,000   | 3,612   |  |
| DIANA NEGRIN<br>PRESIDENT            | 45.00  | 0  |   |  |
| MARIA E CRUZ<br>BOARD MEMBER         | 4.00   | 0  |   |  |
| ANTHONY SOMKIN<br>TREASURER          | 3.00   | 0  |   |  |
| DAVID TUSSMAN<br>BOARD MEMBER        | 1.00   | 0  |   |  |
| STEPHEN ALDRICH<br>BOARD MEMBER      | 000.00   | 0  |   |  |
| VANESSA SEQUIEROS-GARZA<br>SECRETARY | 1.00   | 0  |   |  |

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the

instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V. . . . .

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions.
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N
37a Enter amount of political expenditures, direct or indirect, as described in the instructions.
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed. CA
42a The organization's books are in care of YVONNE NEGRIN Telephone no. (510) 420-1116 Located at 863 LEO WAY OAKLAND, CA ZIP + 4 946111964
42b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:
42c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country:
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

|    |     |    |
|----|-----|----|
|    | Yes | No |
| 46 |     | No |

**46** Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.

**Part VI Section 501(c)(3) Organizations Only**

All section 501(c)(3) organizations must answer questions 47- 49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

|     |     |    |
|-----|-----|----|
|     | Yes | No |
| 47  |     | No |
| 48  |     | No |
| 49a |     | No |
| 49b |     |    |

**47** Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

**48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

**49a** Did the organization make any transfers to an exempt non-charitable related organization?

**b** If "Yes," was the related organization a section 527 organization?

**50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

| (a) Name and title of each employee | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimated amount of other compensation |
|-------------------------------------|--|---|---|--|
| NONE                                |  |   |   |  |
|                                     |  |   |   |  |
|                                     |  |   |   |  |
|                                     |  |   |   |  |

**f** Total number of other employees paid over \$100,000

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

| (a) Name and business address of each independent contractor | (b) Type of service | (c) Compensation |
|--|---------------------|------------------|
| NONE   |                     |                  |
|  |                     |                  |
|  |                     |                  |
|  |                     |                  |

**d** Total number of other independent contractors each receiving over \$100,000.

**52** Did the organization complete Schedule A? **NOTE.** All section 501(c)(3) organizations must attach a completed Schedule A  Yes  No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

|                  |                                  |            |
|------------------|----------------------------------|------------|
| <b>Sign Here</b> | Signature of officer             | 2022-03-13 |
|                  | YVONNE NEGRIN EXECUTIVE DIRECTOR | Date       |
|                  | Type or print name and title     |            |

|                               |   |   |                    |   |                   |
|-------------------------------|---|---|--------------------|---|-------------------|
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name<br>BETH ATTEBERY | Preparer's signature                        | Date<br>2022-03-13 | Check <input type="checkbox"/> if self-employed | PTIN<br>P01466121 |
|                               | Firm's name                                 | THE HENRY LEVY GROUP                        |                    | Firm's EIN                                      |                   |
|                               | Firm's address                              | 5940 COLLEGE AVE STE A<br>OAKLAND, CA 94618 |                    | 94-3194056                                      |                   |
|                               |   |   |                    | Phone no. (510) 652-1000                        |                   |

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

## **Additional Data**

[Return to Form](#)

**Software ID:**

**Software Version:**

**Form 990-EZ, Special Condition Description:**

**Special Condition Description**

**SCHEDULE A**  
**(Form 990 or**  
**990EZ)**

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section  
4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Department of the Treasury

Internal Revenue Service  
**Name of the organization**  
WIXARIKA RESEARCH CENTER

**Employer identification number**

68-0475089

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . . \_\_\_\_\_
  - g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 10 above (see instructions)) | (iv) Is the organization listed in your governing document? |    | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|------------------------------------|----------|--|---|----|---|---|
|                                    |          |  | Yes   | No |   |   |
|                                    |          |  |   |    |   |   |
|                                    |          |  |   |    |   |   |
| <b>Total</b>                       |          |  |   |    |   |   |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 Value of services or facilities; 4 Total; 5 Portion of total contributions exceeding 2%; 6 Public support.

Section B. Total Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support; 12 Gross receipts from related activities.

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 14: Public support percentage for 2020 (25.440 %). Row 15: Public support percentage for 2019 Schedule A, Part II, line 14 (24.640 %).

- 16a 33 1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here.
b 33 1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here.
17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.
b 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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

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

**Section A. Public Support**

| Calendar year<br>(or fiscal year beginning in) ▶  | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .   |          |          |          |          |          |           |
| <b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose |          |          |          |          |          |           |
| <b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .   |          |          |          |          |          |           |
| <b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .  |          |          |          |          |          |           |
| <b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge  |          |          |          |          |          |           |
| <b>6 Total.</b> Add lines 1 through 5   |          |          |          |          |          |           |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons  |          |          |          |          |          |           |
| <b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.          |          |          |          |          |          |           |
| <b>c</b> Add lines 7a and 7b. .   |          |          |          |          |          |           |
| <b>8 Public support.</b> (Subtract line 7c from line 6.)  |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year<br>(or fiscal year beginning in) ▶  | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| <b>9</b> Amounts from line 6. . . . .   |          |          |          |          |          |           |
| <b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .   |          |          |          |          |          |           |
| <b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.   |          |          |          |          |          |           |
| <b>c</b> Add lines 10a and 10b.   |          |          |          |          |          |           |
| <b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  |          |          |          |          |          |           |
| <b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .   |          |          |          |          |          |           |
| <b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .  |          |          |          |          |          |           |
| <b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here.</b> . . . . . <input type="checkbox"/> |          |          |          |          |          |           |

**Section C. Computation of Public Support Percentage**

|  |           |  |
|--|-----------|--|
| <b>15</b> Public support percentage for 2020 (line 8, column (f) divided by line 13, column (f)) . . . . . | <b>15</b> |  |
| <b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 . . . . .                      | <b>16</b> |  |

**Section D. Computation of Investment Income Percentage**

|   |           |  |
|---|-----------|--|
| <b>17</b> Investment income percentage for <b>2020</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .  | <b>17</b> |  |
| <b>18</b> Investment income percentage from <b>2019</b> Schedule A, Part III, line 17 . . . . .   | <b>18</b> |  |
| <b>19a 33 1/3% support tests—2020.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>        |           |  |
| <b>b 33 1/3% support tests—2019.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/> |           |  |
| <b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . . <input type="checkbox"/>   |           |  |

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

- 11** Has the organization accepted a gift or contribution from any of the following persons?
  - a** A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?
  - b** A family member of a person described in 11a above?
  - c** A 35% controlled entity of a person described in line 11a or 11b above? *If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.*

|            | Yes | No |
|------------|-----|----|
|            |     |    |
| <b>11a</b> |     |    |
| <b>11b</b> |     |    |
| <b>11c</b> |     |    |

**Section B. Type I Supporting Organizations**

- 1** Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*

|          | Yes | No |
|----------|-----|----|
|          |     |    |
| <b>1</b> |     |    |
| <b>2</b> |     |    |

**Section C. Type II Supporting Organizations**

- 1** Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*

|          | Yes | No |
|----------|-----|----|
|          |     |    |
| <b>1</b> |     |    |

**Section D. All Type III Supporting Organizations**

- 1** Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2** Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).*
- 3** By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.*

|          | Yes | No |
|----------|-----|----|
|          |     |    |
| <b>1</b> |     |    |
| <b>2</b> |     |    |
| <b>3</b> |     |    |

**Section E. Type III Functionally-Integrated Supporting Organizations**

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**):
  - a** The organization satisfied the Activities Test. Complete **line 2** below.
  - b** The organization is the parent of each of its supported organizations. Complete **line 3** below.
  - c** The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

**2** Activities Test. **Answer lines 2a and 2b below.**

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*
- b** Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*

|           | Yes | No |
|-----------|-----|----|
|           |     |    |
| <b>2a</b> |     |    |
| <b>2b</b> |     |    |
| <b>3a</b> |     |    |
| <b>3b</b> |     |    |

**3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No" provide details in Part VI.*
- b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI. the role played by the organization in this regard.*

**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1**  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

**Section A - Adjusted Net Income**

(A) Prior Year

(B) Current Year  
(optional)

|   |          |  |  |
|---|----------|--|--|
| <b>1</b> Net short-term capital gain  | <b>1</b> |  |  |
| <b>2</b> Recoveries of prior-year distributions   | <b>2</b> |  |  |
| <b>3</b> Other gross income (see instructions)  | <b>3</b> |  |  |
| <b>4</b> Add lines 1 through 3  | <b>4</b> |  |  |
| <b>5</b> Depreciation and depletion   | <b>5</b> |  |  |
| <b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | <b>6</b> |  |  |
| <b>7</b> Other expenses (see instructions)  | <b>7</b> |  |  |
| <b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)  | <b>8</b> |  |  |

**Section B - Minimum Asset Amount**

(A) Prior Year

(B) Current Year  
(optional)

|  |           |  |  |
|--|-----------|--|--|
| <b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | <b>1</b>  |  |  |
| <b>a</b> Average monthly value of securities   | <b>1a</b> |  |  |
| <b>b</b> Average monthly cash balances   | <b>1b</b> |  |  |
| <b>c</b> Fair market value of other non-exempt-use assets  | <b>1c</b> |  |  |
| <b>d Total</b> (add lines 1a, 1b, and 1c)  | <b>1d</b> |  |  |
| <b>e Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):  |           |  |  |
| <b>2</b> Acquisition indebtedness applicable to non-exempt use assets  | <b>2</b>  |  |  |
| <b>3</b> Subtract line 2 from line 1d  | <b>3</b>  |  |  |
| <b>4</b> Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).                                  | <b>4</b>  |  |  |
| <b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)  | <b>5</b>  |  |  |
| <b>6</b> Multiply line 5 by 0.035  | <b>6</b>  |  |  |
| <b>7</b> Recoveries of prior-year distributions  | <b>7</b>  |  |  |
| <b>8 Minimum Asset Amount</b> (add line 7 to line 6)   | <b>8</b>  |  |  |

**Section C - Distributable Amount**

Current Year

|  |          |  |
|--|----------|--|
| <b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)   | <b>1</b> |  |
| <b>2</b> Enter 85% of line 1   | <b>2</b> |  |
| <b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)  | <b>3</b> |  |
| <b>4</b> Enter greater of line 2 or line 3   | <b>4</b> |  |
| <b>5</b> Income tax imposed in prior year  | <b>5</b> |  |
| <b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | <b>6</b> |  |

- 7**  Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

(continued)

| Section D - Distributions  |           | Current Year |
|--|-----------|--------------|
| <b>1</b> Amounts paid to supported organizations to accomplish exempt purposes   | <b>1</b>  |              |
| <b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity             | <b>2</b>  |              |
| <b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations   | <b>3</b>  |              |
| <b>4</b> Amounts paid to acquire exempt-use assets   | <b>4</b>  |              |
| <b>5</b> Qualified set-aside amounts (prior IRS approval required - provide details in <b>Part VI</b> )  | <b>5</b>  |              |
| <b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions   | <b>6</b>  |              |
| <b>7 Total annual distributions.</b> Add lines 1 through 6.  | <b>7</b>  |              |
| <b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions | <b>8</b>  |              |
| <b>9</b> Distributable amount for 2020 from Section C, line 6  | <b>9</b>  |              |
| <b>10</b> Line 8 amount divided by Line 9 amount   | <b>10</b> |              |

| Section E - Distribution Allocations<br>(see instructions)   | (i)<br>Excess Distributions | (ii)<br>Underdistributions<br>Pre-2020 | (iii)<br>Distributable<br>Amount for 2020 |
|--|-----------------------------|--|---|
| <b>1</b> Distributable amount for 2020 from Section C, line 6  |                             |  |   |
| <b>2</b> Underdistributions, if any, for years prior to 2020 (reasonable cause required-- explain in <b>Part VI</b> ). See instructions.   |                             |  |   |
| <b>3</b> Excess distributions carryover, if any, to 2020:  |                             |  |   |
| <b>a</b> From 2015. . . . .  |                             |  |   |
| <b>b</b> From 2016. . . . .  |                             |  |   |
| <b>c</b> From 2017. . . . .  |                             |  |   |
| <b>d</b> From 2018. . . . .  |                             |  |   |
| <b>e</b> From 2019. . . . .  |                             |  |   |
| <b>f Total</b> of lines 3a through e   |                             |  |   |
| <b>g</b> Applied to underdistributions of prior years  |                             |  |   |
| <b>h</b> Applied to 2020 distributable amount  |                             |  |   |
| <b>i</b> Carryover from 2015 not applied (see instructions)  |                             |  |   |
| <b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.  |                             |  |   |
| <b>4</b> Distributions for 2020 from Section D, line 7:<br>\$  |                             |  |   |
| <b>a</b> Applied to underdistributions of prior years  |                             |  |   |
| <b>b</b> Applied to 2020 distributable amount  |                             |  |   |
| <b>c</b> Remainder. Subtract lines 4a and 4b from line 4.  |                             |  |   |
| <b>5</b> Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions. |                             |  |   |
| <b>6</b> Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.                        |                             |  |   |
| <b>7 Excess distributions carryover to 2021.</b> Add lines 3j and 4c.  |                             |  |   |
| <b>8</b> Breakdown of line 7:  |                             |  |   |
| <b>a</b> Excess from 2016. . . . .   |                             |  |   |
| <b>b</b> Excess from 2017. . . . .   |                             |  |   |
| <b>c</b> Excess from 2018. . . . .   |                             |  |   |
| <b>d</b> Excess from 2019. . . . .   |                             |  |   |
| <b>e</b> Excess from 2020. . . . .   |                             |  |   |

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

### Facts And Circumstances Test

OUR MISSION AT THE WIXRIKA RESEARCH CENTER IS TO CONTINUE BUILDING A RICH ARCHIVE OF WIXRIKA HISTORY, CULTURE AND TERRITORY THAT HIGHLIGHTS THE BEAUTY AND IMPORTANCE OF WIXRIKA CULTURAL SURVIVAL, ALONGSIDE OUR CONTINUED SUPPORT OF SELECT INITIATIVES THAT STRENGTHEN WIXRIKA AUTONOMY. OUR ONLINE ARCHIVE REMAINS OPEN AND FREE TO THE PUBLIC AND WE DO NOT CHARGE A FEE FOR MEMBERSHIP OR FOR ACCESSING OR DOWNLOADING OUR DOCUMENTS. WE WORK TO GENERATE FUNDING THROUGH OUR WEBSITE, APPEALS TO OUR GROUP ON FACEBOOK, THROUGH AMAZON SMILE, IN OUR NEWSLETTERS, PERSONAL COMMUNICATIONS, AND SALES THROUGH OUR ONLINE STORE. IN THE PAST, WE HOSTED EVENTS TO RAISE FUNDS TO SUPPORT OUR WORK AND PROJECTS. THESE EVENTS WERE AIMED AT EDUCATING PEOPLE ABOUT THE HISTORICAL VALUE OF THE ARCHIVES WE ARE PUBLISHING FOR THE WIXRIKA PEOPLE AND THE PUBLIC AT LARGE, AND THE IMPORTANCE OF OUR WORK IN MEXICO IN SUPPORT OF THE WIXRIKA PEOPLE AND THEIR CULTURE. OFTEN OUR YEARLY EVENT WOULD CONSIST OF A SLIDE SHOW OF PHOTOGRAPHS TAKEN IN THE FIELD OR AN EDUCATIONAL FILM ON WIXRIKA CULTURE. UNFORTUNATELY, WE HAVE NOT BEEN ABLE TO HOLD AN EVENT SINCE MARCH 2020, DUE TO THE COVID-19 PANDEMIC. AS A RESULT, WE HAVE HAD TO RELY ON GENERATING INTEREST AND DONATIONS THROUGH OUR ONLINE ACTIVITIES, OUR NEWSLETTERS, AND PERSONAL COMMUNICATIONS SINCE MARCH 2020. WE LOOK FORWARD TO THE TIME WHEN WE CAN ONCE AGAIN HOST EVENTS AND INTERACT IN PERSON WITH PEOPLE WHO SUPPORT OUR WORK AND MEET AND BRING ABOARD NEW DONORS. IN THIS LIGHT AND GIVEN THE ENORMITY OF THREATS THAT CONTINUE TO AFFECT WIXRIKA LAND AND CULTURE, WE ARE HAPPY TO SHARE WITH YOU OUR ACTIVITIES DURING OUR 2020 - 2021 FISCAL YEAR. IT WAS A DISAPPOINTMENT THAT DUE TO THE PANDEMIC THE MUSEUMS WERE ALL SHUT DOWN FOR THE REMAINDER OF 2020, AND THE EXHIBIT THAT HAD BEEN SUCH AN ENORMOUS SUCCESS AT THE MUSEO CABAAS IN GUADALAJARA, WAS UNABLE TO TRAVEL AS HAD BEEN PLANNED. AS A RESULT, THE EXHIBITION HAD TO BE PUT IN STORAGE IN GUADALAJARA AT THE END OF JANUARY 2020, UNTIL THE INTERNATIONAL BORDER REOPENED AND THE EXHIBIT COULD BE SHIPPED BACK TO THE UNITED STATES AND THE ARTWORKS RETURNED TO THEIR RESPECTIVE OWNERS. WE WERE FORTUNATE TO HAVE DEEP TIES TO PEOPLE IN GUADALAJARA AND WERE ABLE TO STORE THE EXHIBIT FREE OF CHARGE BETWEEN LATE JANUARY AND JULY. THE ONLY EXPENSE WRC INCURRED DURING THOSE 6 MONTHS WAS THE COST OF KEEPING THE EXHIBIT INSURED UNTIL ALL THE ARTWORKS WERE RETURNED TO THEIR OWNERS. THE BORDER FINALLY REOPENED IN JULY 2020, AND BY LATE AUGUST THE COLLECTIONS HAD BEEN RETURNED. ALTHOUGH WE WERE DISAPPOINTED THE EXHIBITION WAS UNABLE TO TRAVEL TO OTHER VENUES, WE WERE VERY PLEASED THAT 65,000 PEOPLE VISITED THE EXHIBIT DURING THE 7 MONTHS IT WAS AT THE MUSEO CABAAS. THERE IS STILL INTEREST IN HOSTING THE EXHIBIT AT OTHER MUSEUMS IN MEXICO, ONCE THEY ARE ABLE TO RECOVER FROM THE LOSS OF REVENUE THEY SUFFERED DURING THE PANDEMIC AND CAN SECURE THE FUNDING TO COVER THE COST OF INSURANCE AND SHIPPING THE EXHIBIT BACK TO MEXICO. THIS YEAR, WE ONCE AGAIN WORKED WITH THE INTERNATIONAL FRIENDSHIP CLUB AND THE ROTARY CLUB IN PUERTO VALLARTA TO GIVE FINANCIAL ASSISTANCE TO WIXRIKA UNIVERSITY STUDENTS. THESE SMALL SCHOLARSHIPS OF 300 A YEAR, HELP THE STUDENTS WITH THE COST OF THEIR BOOKS, TRANSPORTATION AND HOUSING. IN MAY 2020, WE CELEBRATED THE GRADUATION OF A YOUNG WIXRIKA WOMAN FROM LAW SCHOOL AND A YOUNG MAN WHO GRADUATED WITH A DEGREE IN ELECTROMECHANICAL ENGINEERING. IN DECEMBER 2020, WE CELEBRATED THE GRADUATION OF A YOUNG WIXRIKA MAN WHO GRADUATED FROM LAW SCHOOL. SUPPORT FOR THESE STUDENTS HAS BEEN CRUCIAL DURING THE PANDEMIC BECAUSE THEY ARE INCURRING ADDITIONAL EXPENSES SUCH AS PAYING FOR DAILY INTERNET ACCESS TO DO THEIR CLASSES ONLINE, AND MANY WHO PREVIOUSLY HAD WORKED ONE OR TWO PART TIME JOBS ARE NOW COMPLETELY OUT OF WORK. NEXT YEAR, WE EXPECT TO BE ABLE TO HELP MORE STUDENTS THANKS TO THE OVERWHELMING INTEREST AND SUPPORT FROM OUR DONORS WHO WISH TO CONTRIBUTE TO THIS PROGRAM. DURING THE 2020 - 2021 FISCAL YEAR WE CONTINUED TO WORK ON IMPROVING AND EXPANDING OUR ONLINE ARCHIVE, WHICH IS DRAWING MORE ATTENTION AND ADMIRATION FROM THE WIXRIKA PEOPLE AND FROM SCHOLARS AROUND THE WORLD. DURING THE PAST YEAR OUR AUDIENCE HAS GROWN, AND WE CONTINUED TO BE INVITED TO PARTICIPATE IN, AND MODERATE, INTERNATIONAL CONFERENCES. WE REGULARLY RECEIVED CORRESPONDENCE FROM BOTH ACADEMICS AND STUDENTS LOOKING FOR GUIDANCE PRIOR TO TRAVELING TO MEXICO TO DO FIELD WORK. IT IS ALWAYS A PLEASURE TO CONNECT THEM WITH WIXRIKA PEOPLE WHO ARE WILLING TO HELP THEM WITH THEIR RESEARCH PROJECTS. THE WIXRIKA RESEARCH CENTER MAINTAINS AN ACTIVE, CONTINUOUS AND BONA FIDE FUNDRAISING PROGRAM DESIGNED TO ATTRACT NEW AND ADDITIONAL PUBLIC AND GOVERNMENTAL SUPPORT. TO GENERATE PUBLIC SUPPORT, THE ORGANIZATION SENDS OUT A BI-ANNUAL NEWSLETTER TO SOLICIT DONATIONS FROM ALL THE PEOPLE WHO HAVE SIGNED UP TO RECEIVE THE ORGANIZATION'S ELECTRONIC NEWSLETTER. THE ORGANIZATION ALSO MAINTAINS TWO FACEBOOK GROUPS CALLED "WIXRIKA CULTURAL SURVIVAL" WHICH IS NOW FOLLOWED BY MORE THAN 5,000 PEOPLE, AND "WIXRIKA RESEARCH CENTER" WHICH IS FOLLOWED BY MORE THAN 1,000 PEOPLE. BOTH PAGES ARE FOLLOWED BY MANY PEOPLE FROM THE WIXRIKA COMMUNITIES. WE REGULARLY POST NEWS ARTICLES, VIDEOS, AND SHORT FILMS OF INTEREST. THE POSTS ARE OFTEN COMMENTED ON AND FREQUENTLY SHARED, WHICH IN TURN BRINGS NEW PEOPLE TO THE GROUP. OFTEN, FUND RAISING EVENTS ON FACEBOOK ARE INITIATED BY PEOPLE WHO PUT UP A FUND RAISER TO SUPPORT THE WRC TO CELEBRATE THEIR BIRTHDAY. FINALLY, THE ORGANIZATION'S WEBSITE OFFERS EDUCATIONAL PUBLICATIONS, GREETING CARDS, AND T-SHIRTS IN AN EFFORT TO GENERATE FUNDS TO SUPPORT OUR WORK. THE ORGANIZATION ALSO COUNTS ON A GREAT DEAL OF NON- MONETARY SUPPORT IN THE WAY OF TECHNICAL ASSISTANCE, COMPUTER MAINTENANCE, LEGAL ADVICE; HELP WITH TRANSLATING AND EDITING; REPORTING FROM NGOS IN THE FIELD, WIXRIKA PROFESSIONALS, AND ELECTED AUTHORITIES WHO KEEP THE ORGANIZATION CURRENT ON EVENTS TAKING PLACE IN MEXICO. THESE IN-KIND DONATIONS ARE THEREFORE OF SIGNIFICANT IMPORTANCE TO THE ORGANIZATION. ALTHOUGH MOST OF THE ORGANIZATION'S SUPPORT DURING THE 2020 - 2021 TAX YEAR CAME FROM ONE VERY GENEROUS INDIVIDUAL, WE HAD 52 SMALL DONORS. SOME OF THOSE INDIVIDUALS WERE REPEAT DONORS AND OTHERS WERE FIRST TIME DONORS. THE ORGANIZATION'S BASE OF YEARLY DONORS CONTINUES TO GROW; HOWEVER WE KNOW THAT MANY OF THE PEOPLE WHO RELY ON OUR WEBSITE AND SOCIAL MEDIA PAGES FOR ACCURATE INFORMATION AND NEWS OF CURRENT EVENTS, DO NOT HAVE THE FINANCIAL CAPABILITY TO MAKE A DONATION AND THAT IS WHY WE AIM TO KEEP ACCESS TO OUR WEBSITE AND DOCUMENTS FREE TO THE PUBLIC.

| Return Reference  | Explanation  |
|-------------------|--|
| PART II, LINE 10  | OTHER INCOME 72  |
| PART II, LINE 17A | OUR MISSION AT THE WIXRIKA RESEARCH CENTER IS TO CONTINUE BUILDING A RICH ARCHIVE OF WIXRIKA HISTORY, CULTURE AND TERRITORY THAT HIGHLIGHTS THE BEAUTY AND IMPORTANCE OF WIXRIKA CULTURAL SURVIVAL, ALONGSIDE OUR CONTINUED SUPPORT OF SELECT INITIATIVES THAT STRENGTHEN WIXRIKA AUTONOMY. OUR ONLINE ARCHIVE REMAINS OPEN AND FREE TO THE PUBLIC AND WE DO NOT CHARGE A FEE FOR MEMBERSHIP OR FOR ACCESSING OR DOWNLOADING OUR DOCUMENTS. WE WORK TO GENERATE FUNDING THROUGH OUR WEBSITE, APPEALS TO OUR GROUP ON FACEBOOK, THROUGH AMAZON SMILE, IN OUR NEWSLETTERS, PERSONAL COMMUNICATIONS, AND SALES THROUGH OUR ONLINE STORE. IN THE PAST, WE HOSTED EVENTS TO RAISE FUNDS TO SUPPORT OUR WORK AND |

PROJECTS. THESE EVENTS WERE AIMED AT EDUCATING PEOPLE ABOUT THE HISTORICAL VALUE OF THE ARCHIVES WE ARE PUBLISHING FOR THE WIXRIKA PEOPLE AND THE PUBLIC AT LARGE, AND THE IMPORTANCE OF OUR WORK IN MEXICO IN SUPPORT OF THE WIXRIKA PEOPLE AND THEIR CULTURE. OFTEN OUR YEARLY EVENT WOULD CONSIST OF A SLIDE SHOW OF PHOTOGRAPHS TAKEN IN THE FIELD OR AN EDUCATIONAL FILM ON WIXRIKA CULTURE. UNFORTUNATELY, WE HAVE NOT BEEN ABLE TO HOLD AN EVENT SINCE MARCH 2020, DUE TO THE COVID-19 PANDEMIC. AS A RESULT, WE HAVE HAD TO RELY ON GENERATING INTEREST AND DONATIONS THROUGH OUR ONLINE ACTIVITIES, OUR NEWSLETTERS, AND PERSONAL COMMUNICATIONS SINCE MARCH 2020. WE LOOK FORWARD TO THE TIME WHEN WE CAN ONCE AGAIN HOST EVENTS AND INTERACT IN PERSON WITH PEOPLE WHO SUPPORT OUR WORK AND MEET AND BRING ABOARD NEW DONORS. IN THIS LIGHT AND GIVEN THE ENORMITY OF THREATS THAT CONTINUE TO AFFECT WIXRIKA LAND AND CULTURE, WE ARE HAPPY TO SHARE WITH YOU OUR ACTIVITIES DURING OUR 2020 - 2021 FISCAL YEAR. IT WAS A DISAPPOINTMENT THAT DUE TO THE PANDEMIC THE MUSEUMS WERE ALL SHUT DOWN FOR THE REMAINDER OF 2020, AND THE EXHIBIT THAT HAD BEEN SUCH AN ENORMOUS SUCCESS AT THE MUSEO CABAAS IN GUADALAJARA, WAS UNABLE TO TRAVEL AS HAD BEEN PLANNED. AS A RESULT, THE EXHIBITION HAD TO BE PUT IN STORAGE IN GUADALAJARA AT THE END OF JANUARY 2020, UNTIL THE INTERNATIONAL BORDER REOPENED AND THE EXHIBIT COULD BE SHIPPED BACK TO THE UNITED STATES AND THE ARTWORKS RETURNED TO THEIR RESPECTIVE OWNERS. WE WERE FORTUNATE TO HAVE DEEP TIES TO PEOPLE IN GUADALAJARA AND WERE ABLE TO STORE THE EXHIBIT FREE OF CHARGE BETWEEN LATE JANUARY AND JULY. THE ONLY EXPENSE WRC INCURRED DURING THOSE 6 MONTHS WAS THE COST OF KEEPING THE EXHIBIT INSURED UNTIL ALL THE ARTWORKS WERE RETURNED TO THEIR OWNERS. THE BORDER FINALLY REOPENED IN JULY 2020, AND BY LATE AUGUST THE COLLECTIONS HAD BEEN RETURNED. 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IN DECEMBER 2020, WE CELEBRATED THE GRADUATION OF A YOUNG WIXRIKA MAN WHO GRADUATED FROM LAW SCHOOL. SUPPORT FOR THESE STUDENTS HAS BEEN CRUCIAL DURING THE PANDEMIC BECAUSE THEY ARE INCURRING ADDITIONAL EXPENSES SUCH AS PAYING FOR DAILY INTERNET ACCESS TO DO THEIR CLASSES ONLINE, AND MANY WHO PREVIOUSLY HAD WORKED ONE OR TWO PART TIME JOBS ARE NOW COMPLETELY OUT OF WORK. NEXT YEAR, WE EXPECT TO BE ABLE TO HELP MORE STUDENTS THANKS TO THE OVERWHELMING INTEREST AND SUPPORT FROM OUR DONORS WHO WISH TO CONTRIBUTE TO THIS PROGRAM. DURING THE 2020 - 2021 FISCAL YEAR WE CONTINUED TO WORK ON IMPROVING AND EXPANDING OUR ONLINE ARCHIVE, WHICH IS DRAWING MORE ATTENTION AND ADMIRATION FROM THE WIXRIKA PEOPLE AND FROM SCHOLARS AROUND THE WORLD. DURING THE PAST YEAR OUR AUDIENCE HAS GROWN, AND WE CONTINUED TO BE INVITED TO PARTICIPATE IN, AND MODERATE, INTERNATIONAL CONFERENCES. 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SOME OF THOSE INDIVIDUALS WERE REPEAT DONORS AND OTHERS WERE FIRST TIME DONORS. THE ORGANIZATION'S BASE OF YEARLY DONORS CONTINUES TO GROW; HOWEVER WE KNOW THAT MANY OF THE PEOPLE WHO RELY ON OUR WEBSITE AND SOCIAL MEDIA PAGES FOR ACCURATE INFORMATION AND NEWS OF CURRENT EVENTS, DO NOT HAVE THE FINANCIAL CAPABILITY TO MAKE A DONATION AND THAT IS WHY WE AIM TO KEEP ACCESS TO OUR WEBSITE AND DOCUMENTS FREE TO THE PUBLIC.

## **Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

|  |   |
|--|---|
| Name of the organization<br>WIXARIKA RESEARCH CENTER | <b>Employer identification number</b><br>68-0475089 |
|--|---|

**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

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

**General Rule**

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

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

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

Name of organization  
WIXARIKA RESEARCH CENTER

**Employer identification number**  
68-0475089

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4 | (c)<br>Total contributions | (d)<br>Type of contribution  |
|------------|-----------------------------------|----------------------------|--|
| RESTRICTED |                                   | \$ RESTRICTED              | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.) |
| -          |                                   | \$                         | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.) |
| -          |                                   | \$                         | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.) |
| -          |                                   | \$                         | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.) |
| -          |                                   | \$                         | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.) |
| -          |                                   | \$                         | <input type="checkbox"/> Person<br><input type="checkbox"/> Payroll<br><input type="checkbox"/> Noncash<br>(Complete Part II for noncash contributions.) |

Name of organization  
 WIXARIKA RESEARCH CENTER

**Employer identification number**  
 68-0475089

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a)<br>No. from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
|---------------------------|--|--|----------------------|
| -                         | _____<br>_____<br>_____                      | _____<br>\$                                    | _____                |
| -                         | _____<br>_____<br>_____                      | _____<br>\$                                    | _____                |
| -                         | _____<br>_____<br>_____                      | _____<br>\$                                    | _____                |
| -                         | _____<br>_____<br>_____                      | _____<br>\$                                    | _____                |
| -                         | _____<br>_____<br>_____                      | _____<br>\$                                    | _____                |
| -                         | _____<br>_____<br>_____                      | _____<br>\$                                    | _____                |
| -                         | _____<br>_____<br>_____                      | _____<br>\$                                    | _____                |
| -                         | _____<br>_____<br>_____                      | _____<br>\$                                    | _____                |
| -                         | _____<br>_____<br>_____                      | _____<br>\$                                    | _____                |
| -                         | _____<br>_____<br>_____                      | _____<br>\$                                    | _____                |

|  |  |
|--|--|
| Name of organization<br>WIXARIKA RESEARCH CENTER | Employer identification number<br>68-0475089 |
|--|--|

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

| (a)<br>No. from<br>Part I             | (b) Purpose of gift | (c) Use of gift                          | (d) Description of how gift is held |
|---------------------------------------|---------------------|--|-------------------------------------|
|                                       | _____<br>_____      | _____<br>_____                           | _____<br>_____                      |
| (e) Transfer of gift                  |                     |  |                                     |
| Transferee's name, address, and ZIP 4 |                     | Relationship of transferor to transferee |                                     |
| _____<br>_____                        |                     | _____<br>_____                           |                                     |
| (a)<br>No. from<br>Part I             | (b) Purpose of gift | (c) Use of gift                          | (d) Description of how gift is held |
|                                       | _____<br>_____      | _____<br>_____                           | _____<br>_____                      |
| (e) Transfer of gift                  |                     |  |                                     |
| Transferee's name, address, and ZIP 4 |                     | Relationship of transferor to transferee |                                     |
| _____<br>_____                        |                     | _____<br>_____                           |                                     |
| (a)<br>No. from<br>Part I             | (b) Purpose of gift | (c) Use of gift                          | (d) Description of how gift is held |
|                                       | _____<br>_____      | _____<br>_____                           | _____<br>_____                      |
| (e) Transfer of gift                  |                     |  |                                     |
| Transferee's name, address, and ZIP 4 |                     | Relationship of transferor to transferee |                                     |
| _____<br>_____                        |                     | _____<br>_____                           |                                     |
| (a)<br>No. from<br>Part I             | (b) Purpose of gift | (c) Use of gift                          | (d) Description of how gift is held |
|                                       | _____<br>_____      | _____<br>_____                           | _____<br>_____                      |
| (e) Transfer of gift                  |                     |  |                                     |
| Transferee's name, address, and ZIP 4 |                     | Relationship of transferor to transferee |                                     |
| _____<br>_____                        |                     | _____<br>_____                           |                                     |

## **Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

**SCHEDULE O**  
**(Form 990 or 990-**  
**EZ)****Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**2020****Open to Public  
Inspection**

Department of the Treasury

Name of the organization  
WIXARIKA RESEARCH CENTER

Employer identification number

68-0475089

| Return Reference               | Explanation  |
|--------------------------------|--|
| FORM 990-EZ, PART I, LINE 8    | CREDIT CARD CASH REWARDS 50 TOTAL 50   |
| FORM 990-EZ, PART I, LINE 16   | EXPENSES OFFICE EXPENSE 409 COMPUTER 121 INTERNET 514 WEB HOSTING 773 WEBSITE MANAGEMENT & EXP. 4,626 TRAVEL 72 BANK & CREDIT CARD FEES 151 DUES & SUBSCRIPTIONS 708 LICENSE, PERMITS, FEES 75 PROGRAM-EXHIBIT MUSEO 3,837 PENALTIES 94 TELEPHONE 351 TOTAL 11,731   |
| FORM 990-EZ, PART II, LINE 24  | INVENTORIES FOR SALE OR USE 14,428 10,782 OTHER DEPRECIABLE ASSET 55,494 55,494 LESS ACCUMULATED DEPRECIATION 55,494 55,494 FILM MATERIALS 28,510 28,510 YARN PAINTINGS BY JOSE BENITEZ SANCH 12,260 12,260 TOTAL 55,198 51,552  |
| FORM 990-EZ, PART III          | ADVOCACY FOR THE HUICHOL INDIANS IN MEXICO, AND PRESERVATION AND PROMOTION OF THE HUICHOL CULTURE AND ARTWORK.   |
| FORM 990-EZ, PART III, LINE 28 | OUR MISSION AT THE WIXRIKA RESEARCH CENTER IS TO CONTINUE BUILDING A RICH ARCHIVE OF WIXRIKA HISTORY, CULTURE AND TERRITORY THAT HIGHLIGHTS THE BEAUTY AND IMPORTANCE OF WIXRIKA CULTURAL SURVIVAL, ALONGSIDE OUR CONTINUED SUPPORT OF SELECT INITIATIVES THAT STRENGTHEN WIXRIKA AUTONOMY. WE ARE HAPPY TO SHARE WITH YOU OUR ACTIVITIES DURING OUR 2020 2021 FISCAL YEAR. DURING THIS LAST FISCAL YEAR, WE FOUND OURSELVES IN QUARANTINE AND OUR BOARD OF DIRECTORS WAS UNABLE TO GATHER IN PERSON FOR WORK OR MEETINGS. OUR INTERACTION WAS STRICTLY VIA FACETIME, ZOOM, AND EMAIL. OUR DIRECTOR TOOK ON A GOOD DEAL OF WORK THAT HAD BEEN DONE BY OTHERS PRIOR TO QUARANTINE, ADDING TO THE TIME SHE DEDICATED EACH WEEK TO WORKING FOR THE FOUNDATION. THE PRESIDENT OF OUR BOARD OF DIRECTORS WORKED BY PHONE, EMAIL, AND ZOOM WITH THE WIXRIKA PEOPLE IN MEXICO ON THE DEVELOPMENT OF A NEW PROJECT TO PROMOTE THE ENVIRONMENTAL RESTORATION AND PROTECTION OF THE SACRED DESERT OF WIRIKUTA. SHE ALSO ADVISED WIXRIKA STUDENTS WHO WERE STRUGGLING TO NAVIGATE THE PANDEMIC AND KEEP UP WITH THEIR CLASSES UNDER QUARANTINE AND PROMOTED THE SALE OF THE CATALOGUE WE PUBLISHED IN MEXICO. BETWEEN MAY AND JULY, WE WORKED ON GETTING THE EXHIBIT TRANSPORTED FROM WHERE IT WAS IN STORAGE BACK TO THE UNITED STATES. THE COLLECTION HAD ENTERED MEXICO ON A TEMPORARY PERMIT THAT WAS DUE TO EXPIRE IN JUNE 2020, UNLESS THE EXHIBIT TRAVELED TO ANOTHER MUSEUM IN MEXICO. SINCE ALL MUSEUMS WERE CLOSED FOR THE REMAINDER OF THAT YEAR AND POSSIBLY LONGER, THE MUSEO CABAAS REQUESTED AN EXTENSION FROM THE MEXICAN AUTHORITIES, AND WE WERE GRANTED A ONE-YEAR EXTENSION TO RETURN THE COLLECTION TO THE UNITED STATES. IN JULY THE BORDER REOPENED AND BY MID-AUGUST 2020, ALL THE WORKS HAD BEEN RETURNED TO RADFORD UNIVERSITY AND THE INDIVIDUAL COLLECTORS WHO HAD LOANED PAINTINGS FOR THE EXHIBIT. DURING THIS YEAR IN QUARANTINE, WE PUT TIME INTO LEARNING AND SETTING UP MAIL CHIMP TO DISTRIBUTE OUR NEWSLETTERS AND OTHER ANNOUNCEMENTS MORE EFFICIENTLY. NOW, PEOPLE CAN SIGN UP FOR OUR NEWSLETTERS DIRECTLY THROUGH OUR WEBSITE. THIS HAS BEEN A BIG IMPROVEMENT AND GIVES US VALUABLE FEEDBACK ON HOW OUR MAILINGS ARE BEING RECEIVED AND HOW MANY NEW SUBSCRIBERS SIGN UP. THIS WAS ALSO THE FIRST FULL YEAR THAT OUR ONLINE STORE WAS OPEN, AND WE SEE IS GETTING A FAIR AMOUNT OF TRAFFIC AND IT HAS BEEN GENERATING SALES. OUR DIRECTOR HAS BEEN HANDLING MANAGING THE STORE AND THE PACKING AND SHIPPING AND WILL CONTINUE TO DO SO UNTIL THE END OF THE PANDEMIC. WE STUDIED THE INFORMATION THAT IS AVAILABLE ON THE INTERNET FROM OTHER SOURCES ON WIXRIKA ART AND CULTURE AND BELIEVE OUR WEBSITE IS THE BEST SOURCE FOR SERIOUS AND ACCURATE INFORMATION FOR ACADEMICS, STUDENTS, AND THE PUBLIC AT LARGE. SINCE WE WERE UNABLE TO HAVE ANY IN PERSON EVENTS TO RAISE FUNDS, WE SPENT A GOOD DEAL OF TIME WORKING TO GENERATE FUNDING THROUGH OUR WEBSITE, APPEALS TO OUR GROUPS ON FACEBOOK, THROUGH OUR NEWSLETTERS, PERSONAL COMMUNICATIONS, AND SALES THROUGH OUR ONLINE STORE. WE ALSO WORKED TO GENERATE SALES OF OUR CATALOGUE IN MEXICO IN COORDINATION WITH THE EDITOR AND WIXRIKA CONTACTS. ARTICLES AND PRESS REPORTS WERE TRANSLATED FROM SPANISH INTO ENGLISH AND POSTED TO OUR WEBSITE AND TO FACEBOOK FOR OUR FOLLOWERS WHO DO NOT READ SPANISH. VIDEO CONFERENCES WERE UPLOADED TO OUR YOUTUBE CHANNEL AND TO THE VIDEO SECTION OF OUR WEBSITE. WE WORKED AGAIN THIS YEAR WITH THE INTERNATIONAL FRIENDSHIP CLUB AND THE ROTARY CLUB IN PUERTO VALLARTA TO GIVE FINANCIAL ASSISTANCE TO 14 WIXRIKA UNIVERSITY STUDENTS. SUPPORT FOR THESE STUDENTS HAS BEEN CRUCIAL DURING THE PANDEMIC BECAUSE THEY ARE INCURRING ADDITIONAL EXPENSES SUCH AS PAYING FOR DAILY INTERNET ACCESS TO DO THEIR CLASSES ONLINE, AND MANY WHO PREVIOUSLY HAD WORKED ONE OR TWO PART TIME JOBS ARE NOW COMPLETELY OUT OF WORK. WE EXPECT TO BE ABLE TO HELP MORE STUDENTS NEXT YEAR THANKS TO THE OVERWHELMING INTEREST AND SUPPORT FROM OUR DONORS WHO WISH TO CONTRIBUTE TO THIS PROGRAM. AS WE CONTINUED TO WORK ON IMPROVING AND EXPANDING OUR ONLINE ARCHIVE, WE ATTRACTED MORE ATTENTION AND ADMIRATION FROM THE WIXRIKA PEOPLE AND FROM ACADEMICS AND STUDENTS FROM AROUND THE WORLD. DURING THE PAST YEAR OUR AUDIENCE GREW, AND WE CONTINUED TO PARTICIPATE IN, AND MODERATE, INTERNATIONAL CONFERENCES. WE REGULARLY RECEIVED CORRESPONDENCE FROM BOTH ACADEMICS AND STUDENTS LOOKING FOR GUIDANCE PRIOR TO TRAVELING TO MEXICO TO DO FIELD WORK AND IT IS ALWAYS A PLEASURE TO CONNECT THEM WITH WIXRIKA PEOPLE WHO ARE WILLING TO WORK WITH THEM AND HELP THEM WITH THEIR RESEARCH PROJECTS IN THE FIELD. THIS YEAR SAW MANY DEATHS AMONG THE WIXARITARI, AND WE WERE OFTEN CALLED UPON FOR EMOTIONAL SUPPORT AND ADVICE. SEVERAL TIMES, WE WERE ASKED FOR MONETARY HELP TO ASSIST WITH BURIAL EXPENSES WHICH WE GAVE AS INDIVIDUALS DIRECTLY TO THE FAMILIES IN NEED. THE WIXRIKA RESEARCH CENTER MAINTAINS AN ACTIVE, CONTINUOUS AND BONA FIDE FUNDRAISING PROGRAM DESIGNED TO ATTRACT NEW AND ADDITIONAL PUBLIC AND GOVERNMENTAL SUPPORT. TO GENERATE PUBLIC SUPPORT, THE ORGANIZATION SENDS OUT A BI-ANNUAL NEWSLETTER TO SOLICIT DONATIONS FROM ALL THE PEOPLE WHO HAVE SIGNED UP TO RECEIVE THE ORGANIZATION'S ELECTRONIC NEWSLETTER. THE ORGANIZATION ALSO MAINTAINS TWO FACEBOOK GROUPS CALLED "WIXRIKA CULTURAL SURVIVAL- AND "WIXRIKA RESEARCH CENTER- AND BETWEEN THE TWO WE ARE FOLLOWED BY MORE THAN 7, 000 PEOPLE. BOTH PAGES ARE FOLLOWED BY MANY PEOPLE FROM THE WIXRIKA COMMUNITIES, AND THIS HAS BROUGHT ABOUT AN INCREASED INTERACTION BETWEEN US AND THE WIXRIKA PEOPLE. OFTEN, FUND RAISING EVENTS ON FACEBOOK HAVE BEEN INITIATED BY PEOPLE WHO PUT UP A FUND RAISER TO SUPPORT THE WIXRIKA RESEARCH CENTER IN CELEBRATION OF THEIR BIRTHDAY. WE ARE QUITE HONORED BY THIS GESTURE OF SUPPORT. OUR ONLINE ARCHIVE REMAINS OPEN AND FREE TO THE PUBLIC AND WE DO NOT CHARGE A FEE FOR MEMBERSHIP OR FOR ACCESSING OR DOWNLOADING OUR DOCUMENTS. |

## **Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

## TY 2020 IRS 990 e-File Render

**Name:** WIXARIKA RESEARCH CENTER

**EIN:** 68-0475089

| Person Name            | Explanation |
|------------------------|-------------|
| YVONNE NEGRIN          |             |
| DIANA NEGRIN           |             |
| MARIA E CRUZ           |             |
| ANTHONY SOMKIN         |             |
| DAVID TUSSMAN          |             |
| STEPHEN ALDRICH        |             |
| VANESSA SEQUIEROSGARZA |             |