

** PUBLIC DISCLOSURE COPY **

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2021

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/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p align="center">Joy In Childhood Foundation, Inc.</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p align="center">130 Royall Street - Mail Stop 2WA</p> City or town, state or province, country, and ZIP or foreign postal code <p align="center">Canton, MA 02021</p>	D Employer identification number <p align="center">26-0593784</p>
F Name and address of principal officer: April McGonnigal same as C above		E Telephone number <p align="center">(781) 737-5057</p>
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 9,284,930.
J Website: ▶ www.joyinchildhoodfoundation.org		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 2007 M State of legal domicile: MA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: To provide grants to charitable organizations that provide joy to sick and hungry kids. 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 15 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 15 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 6 70 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. 7b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0.																			
Revenue	8 Contributions and grants (Part VIII, line 1h) 7,313,059. 8,858,245. 9 Program service revenue (Part VIII, line 2g) 0. 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 47,679. 9,117. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -934,872. 63,930. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6,425,866. 8,931,292.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:30%;"></th> <th style="width:35%;">Prior Year</th> <th style="width:35%;">Current Year</th> </tr> <tr> <td>8</td> <td align="right">7,313,059.</td> <td align="right">8,858,245.</td> </tr> <tr> <td>9</td> <td align="right">0.</td> <td align="right">0.</td> </tr> <tr> <td>10</td> <td align="right">47,679.</td> <td align="right">9,117.</td> </tr> <tr> <td>11</td> <td align="right">-934,872.</td> <td align="right">63,930.</td> </tr> <tr> <td>12</td> <td align="right">6,425,866.</td> <td align="right">8,931,292.</td> </tr> </table>		Prior Year	Current Year	8	7,313,059.	8,858,245.	9	0.	0.	10	47,679.	9,117.	11	-934,872.	63,930.	12	6,425,866.	8,931,292.
	Prior Year	Current Year																		
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10	47,679.	9,117.																		
11	-934,872.	63,930.																		
12	6,425,866.	8,931,292.																		
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 5,011,046. 6,159,011. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,023,060. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,040,651. 2,620,735. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 6,051,697. 8,779,746. 19 Revenue less expenses. Subtract line 18 from line 12 374,169. 151,546.																			
Net Assets or Fund Balances	20 Total assets (Part X, line 16) 7,829,809. 7,582,989. 21 Total liabilities (Part X, line 26) 1,269,875. 1,062,422. 22 Net assets or fund balances. Subtract line 21 from line 20 6,559,934. 6,520,567.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:30%;"></th> <th style="width:35%;">Beginning of Current Year</th> <th style="width:35%;">End of Year</th> </tr> <tr> <td>20</td> <td align="right">7,829,809.</td> <td align="right">7,582,989.</td> </tr> <tr> <td>21</td> <td align="right">1,269,875.</td> <td align="right">1,062,422.</td> </tr> <tr> <td>22</td> <td align="right">6,559,934.</td> <td align="right">6,520,567.</td> </tr> </table>		Beginning of Current Year	End of Year	20	7,829,809.	7,582,989.	21	1,269,875.	1,062,422.	22	6,559,934.	6,520,567.						
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Part II Signature Block

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.

Sign Here	Signature of officer April McGonnigal, Director Type or print name and title	Date 8/10/2022 5:29 PM EDT
Paid Preparer Use Only	Print/Type preparer's name Nicholas E. Porto	Preparer's signature Date 08/10/22
Firm's name ▶ Baker Newman & Noyes		Check if self-employed <input type="checkbox"/> PTIN P01310283
Firm's address ▶ P.O. Box 507 Portland, ME 04112		Firm's EIN ▶ 01-0494526 Phone no. (207) 879-2100

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

The Foundation is established to bring together a wide network of stakeholders, including Dunkin' Donuts and Baskin-Robbins franchisees, suppliers, crew members, and employees, to engage in fundraising and grant making to charitable organizations that provide joy to sick and

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 6,341,976. including grants of \$ 6,159,011.) (Revenue \$ 0.)
Charitable grantmaking to ensure the basic needs of communities through hunger relief and children's health.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 6,341,976.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee reporting, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 15		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 15		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official		X
b	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **Karen Raskopf - (781) 737-3821**
130 Royall Street, Canton, MA 02021

See Schedule O for full list of states

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Suzanne Andrade Director	1.00	X						0.	0.	0.
(2) Shaun Cain Director	1.00	X						0.	0.	0.
(3) Ashley Coneff Director	1.00	X						0.	0.	0.
(4) Alex Fernandez Director	1.00	X						0.	0.	0.
(5) Wendy Leveillee Director	1.00	X						0.	0.	0.
(6) Drayton Martin Director (part year)	2.00	X						0.	0.	0.
(7) Daniel Novick Director	1.00	X						0.	0.	0.
(8) Kajal Patel Director	1.00	X						0.	0.	0.
(9) Parag Patel Director	1.00	X						0.	0.	0.
(10) Raj Patel Director	1.00	X						0.	0.	0.
(11) Dana Reid Director	1.00	X						0.	0.	0.
(12) Molly Wiley Director	1.00	X						0.	0.	0.
(13) Kari McHugh Executive Director (part year)	25.00	X		X				0.	0.	0.
(14) Karen Raskopf Executive Director	25.00	X		X				0.	0.	0.
(15) Victor Carvalho Co-Chair	5.00	X		X				0.	0.	0.
(16) Mathias Piercy Co-Chair	5.00	X		X				0.	0.	0.
(17) Jason Maceda Treasurer	5.00	X		X				0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) David Sisson Clerk	1.00	X		X				0.	0.	0.
1b Subtotal								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Dunkin' Brands / Inspire Brands, 130 Royall Street, Mail Stop 2WA, Canton, MA	Management and staffing	647,423.
Red Rocket Social Impact 50 Slough Road, Harvard, MA 01451	Public relations	120,325.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **2**

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	1,190,529.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	7,667,716.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 35,903.				
	h Total. Add lines 1a-1f		8,858,245.				
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		9,117.			9,117.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c					
d Net gain or (loss)							
8 a Gross income from fundraising events (not including \$ 1,190,529. of contributions reported on line 1c). See Part IV, line 18	8a		409,538.				
			353,638.				
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events			55,900.			55,900.	
9 a Gross income from gaming activities. See Part IV, line 19	9a		8,030.				
			0.				
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities			8,030.			8,030.	
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			8,931,292.	0.	0.	73,047.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	6,159,011.	6,159,011.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management	82,961.		82,961.	
b Legal	19,724.		19,724.	
c Accounting	22,500.		22,500.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	534,916.	151,229.	60,490.	323,197.
12 Advertising and promotion	120,478.	261.	114,075.	6,142.
13 Office expenses	199,421.	16,917.	37,733.	144,771.
14 Information technology	72,994.	13,374.	48,941.	10,679.
15 Royalties				
16 Occupancy				
17 Travel	14,859.		12,062.	2,797.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	30,755.		1,356.	29,399.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	13,803.		13,803.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a Branded merchandise	1,508,324.	1,184.	1,065.	1,506,075.
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	8,779,746.	6,341,976.	414,710.	2,023,060.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,061,560.	1	3,620,544.
	2 Savings and temporary cash investments	2,499,498.	2	746,731.
	3 Pledges and grants receivable, net	249,250.	3	3,164,172.
	4 Accounts receivable, net	3,996,691.	4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	22,810.	9	51,542.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 251,925.		
	b Less: accumulated depreciation	10b 251,925.	0.	10c 0.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	7,829,809.	16	7,582,989.	
Liabilities	17 Accounts payable and accrued expenses	128,309.	17	246,265.
	18 Grants payable	1,141,566.	18	816,157.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	1,269,875.	26	1,062,422.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	5,841,247.	27	5,483,080.
	28 Net assets with donor restrictions	718,687.	28	1,037,487.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	6,559,934.	32	6,520,567.
33 Total liabilities and net assets/fund balances	7,829,809.	33	7,582,989.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,931,292.
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,779,746.
3	Revenue less expenses. Subtract line 2 from line 1	3	151,546.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,559,934.
5	Net unrealized gains (losses) on investments	5	-8,663.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-182,250.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	6,520,567.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2021)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization Joy In Childhood Foundation, Inc.	Employer identification number 26-0593784
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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).)
- 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 **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 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 on 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		
Total						

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 fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5,956,457.	5,842,788.	6,371,778.	7,313,059.	8,858,245.	34,342,327.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	5,956,457.	5,842,788.	6,371,778.	7,313,059.	8,858,245.	34,342,327.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						18,184,947.
6 Public support. Subtract line 5 from line 4.						16,157,380.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	5,956,457.	5,842,788.	6,371,778.	7,313,059.	8,858,245.	34,342,327.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	17,290.	46,213.	50,414.	47,679.	9,117.	170,713.
9 Net income from unrelated business activities, whether or not the business is regularly carried on					63,930.	63,930.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						34,576,970.
12 Gross receipts from related activities, etc. (see instructions)					12	
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)).....	14	46.73 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	61.10 %
16a 33 1/3% support test - 2021. 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. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. 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. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2021. 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. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2020. 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. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
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		<input type="checkbox"/>

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 (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 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

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2021. 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 **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. 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 **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 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>		
2 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>		
3a 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 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>		
c 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>		
4a 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 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>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <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>		
5a 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
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)

	Yes	No
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 on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
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.		
1		
2		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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 on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
1		
2		
3		

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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental 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.	Yes	No
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
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.		
2a		
2b		
3a		
3b		

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> 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
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

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.)

Multiple horizontal lines for supplemental information.

Schedule B
(Form 990)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**▶ Attach to Form 990 or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

Joy In Childhood Foundation, Inc.

Employer identification number

26-0593784

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck 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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.**Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2021)

Name of organization Joy In Childhood Foundation, Inc.	Employer identification number 26-0593784
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	 <hr/> <hr/> <hr/>	\$ <u>7,647,600.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	 <hr/> <hr/> <hr/>	\$ <u>312,938.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	 <hr/> <hr/> <hr/>	\$ <u>200,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	 <hr/> <hr/> <hr/>	\$ <u>187,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
 <hr/> <hr/> <hr/>	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
 <hr/> <hr/> <hr/>	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Joy In Childhood Foundation, Inc.	Employer identification number 26-0593784
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization Joy In Childhood Foundation, Inc.	Employer identification number 26-0593784
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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 info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization Joy In Childhood Foundation, Inc. Employer identification number 26-0593784

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		251,925.	251,925.	0.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				0.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	12,850,314.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-8,663.
b	Donated services and use of facilities	2b	3,574,048.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	353,637.
e	Add lines 2a through 2d	2e	3,919,022.
3	Subtract line 2e from line 1	3	8,931,292.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	8,931,292.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	12,889,681.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	3,574,048.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	535,887.
e	Add lines 2a through 2d	2e	4,109,935.
3	Subtract line 2e from line 1	3	8,779,746.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	8,779,746.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part X, Line 2:

The Foundation is recognized by the Internal Revenue Service (IRS) as an organization described in Internal Revenue Code (IRC) Section 501(c) and is generally exempt from federal income taxes under IRC Section 501(a). The Foundation met the IRS qualifications for public charity status for the 60-month periods ended December 31, 2021 and 2020 and, as such, has terminated private foundation status and is currently operating as a public charity organized under IRS Section 501(c)(3).

The Foundation follows the guidance of FASB ASC 740, Income Taxes, related to uncertainties in income taxes, which prescribes a threshold of more likely than not for recognition and derecognition of tax positions taken

Part XIII Supplemental Information (continued)

or expected to be taken in a tax return. The Foundation believes it has taken no significant uncertain tax positions as of December 31, 2021 and 2020.

Part XI, Line 2d - Other Adjustments:

Fundraising event expenses 353,637.

Part XII, Line 2d - Other Adjustments:

Fundraising event expenses 353,637.

Uncollectible pledges 182,250.

Total to Schedule D, Part XII, Line 2d 535,887.

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

Joy In Childhood Foundation, Inc.

Employer identification number

26-0593784

Part I

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

<p>a <input type="checkbox"/> Mail solicitations</p> <p>b <input type="checkbox"/> Internet and email solicitations</p> <p>c <input type="checkbox"/> Phone solicitations</p> <p>d <input type="checkbox"/> In-person solicitations</p>	<p>e <input type="checkbox"/> Solicitation of non-government grants</p> <p>f <input type="checkbox"/> Solicitation of government grants</p> <p>g <input type="checkbox"/> Special fundraising events</p>
---	--

- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total				▶		

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		Golf Tournament	Virtual Galas	3		
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	639,180.	487,778.	473,109.	1,600,067.
	2	Less: Contributions	597,925.	353,603.	239,001.	1,190,529.
	3	Gross income (line 1 minus line 2)	41,255.	134,175.	234,108.	409,538.
Direct Expenses	4	Cash prizes	9,343.	8,083.	1,145.	18,571.
	5	Noncash prizes	1,440.	35,022.		36,462.
	6	Rent/facility costs	37,489.	1,500.	27,697.	66,686.
	7	Food and beverages	74,820.			74,820.
	8	Entertainment	21,461.	845.	4,042.	26,348.
	9	Other direct expenses	66,416.	17,648.	46,687.	130,751.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				353,638.
	11	Net income summary. Subtract line 10 from line 3, column (d)				55,900.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
Revenue	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Part IV Supplemental Information *(continued)*

Multiple horizontal lines for supplemental information.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization **Joy In Childhood Foundation, Inc.** Employer identification number **26-0593784**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Dana-Farber Cancer Institute 450 Brookline Avenue Boston, MA 02215	04-2263040	501(c)(3)	747,121.	0.			Support Sick and Hungry Kids
Yale New Haven Hospital P.O. Box 1849 New Haven, CT 06508	06-0646652	501(c)(3)	316,753.	0.			Support Sick and Hungry Kids
Canine Assistants 3160 Francis Road Alpharetta, GA 30004	58-1974410	501(c)(3)	290,703.	0.			Support Sick and Hungry Kids
Tufts Medical Center Inc. 800 Washington Street Boston, MA 02111	04-3044706	501(c)(3)	142,500.	0.			Support Sick and Hungry Kids
Boston Children's Hospital Trust 300 Longwood Avenue Boston, MA 02115	04-2774441	501(c)(3)	211,986.	0.			Support Sick and Hungry Kids
Feeding America 161 North Clark Street, Suite 700 Chicago, IL 60601	36-3673599	501(c)(3)	110,000.	0.			Support Sick and Hungry Kids

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **222.**

3 Enter total number of other organizations listed in the line 1 table **0.**

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

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Schedule I (Form 990)

Joy In Childhood Foundation, Inc.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Phoenix Children's Hospital Foundation - 2929 E. Camelback Road, Suite 122 - Phoenix, AZ 85016	74-2421549	501(c)(3)	109,983.	0.			Support Sick and Hungry Kids
Connecticut Children's Medical Center - 282 Washington Street - Hartford, CT 06106	06-0646755	501(c)(3)	100,000.	0.			Support Sick and Hungry Kids
Mary Hitchcock Memorial Hospital 1 Medical Center Drive Lebanon, NH 03756	02-0222140	501(c)(3)	100,000.	0.			Support Sick and Hungry Kids
The Fund for the School District of Philadelphia - 30 South 17th Street, 11th Floor - Philadelphia, PA 19103	20-0153451	501(c)(3)	100,000.	0.			Support Sick and Hungry Kids
Umass Memorial Health Care 306 Belmont Street, Suite 120 Worcester, MA 01604	04-3358566	501(c)(3)	100,000.	0.			Support Sick and Hungry Kids
St. Joseph's Healthcare System Inc. - 703 Main Street - Paterson, NJ 07503	22-2448138	501(c)(3)	89,399.	0.			Support Sick and Hungry Kids
Joe DiMaggio Children's Hospital Foundation, Inc. - 3329 Johnson Street - Hollywood, FL 33021	65-0492343	501(c)(3)	85,300.	0.			Support Sick and Hungry Kids
Massachusetts General Hospital 125 Nashua Street, Suite 540 Boston, MA 02114	04-1564655	501(c)(3)	75,000.	0.			Support Sick and Hungry Kids
Children's Healthcare of Atlanta Foundation Inc. - 1575 Northeast Expressway NE - Brookhaven, GA 30329	58-1710601	501(c)(3)	61,400.	0.			Support Sick and Hungry Kids

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

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St. Joseph's University Medical Center, Inc. - 703 Main Street - Paterson, NJ 07503	22-3484247	501(c)(3)	61,273.	0.			Support Sick and Hungry Kids
Banner Health Foundation 2901 N. Central Avenue, Suite 160 Phoenix, AZ 85012	94-2545356	501(c)(3)	60,250.	0.			Support Sick and Hungry Kids
Nemours Foundation 10140 Centurion Parkway North Jacksonville, FL 32256	59-0634433	501(c)(3)	51,000.	0.			Support Sick and Hungry Kids
Beth Israel Deaconess Hospital Plymouth - 275 Sandwich Street - Plymouth, MA 02360	22-2667354	501(c)(3)	50,000.	0.			Support Sick and Hungry Kids
UCSF Benioff Children's Hospitals Foundation - 2201 Broadway, Suite 600 - Oakland, CA 94612	94-1657474	501(c)(3)	50,000.	0.			Support Sick and Hungry Kids
The Huntsville Hospital Foundation, Inc. - 801 Clinton Avenue East - Huntsville, AL 35801	63-0752604	501(c)(3)	49,564.	0.			Support Sick and Hungry Kids
Hole In The Wall Gang Fund, Inc. 555 Long Wharf Drive New Haven, CT 06511	06-1157655	501(c)(3)	45,000.	0.			Support Sick and Hungry Kids
Orlando Health Arnold Palmer Hospital for Children - 3160 Southgate Commerce Boulevard, Suite 50 - Orlando, FL 32806	59-2244943	501(c)(3)	52,800.	0.			Support Sick and Hungry Kids
Lifespan Corporation, f/b/o Hasbro Children's Hospital - 167 Point Street - Providence, RI 02903	22-2861978	501(c)(3)	29,300.	0.			Support Sick and Hungry Kids

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

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Baycare Medical Group, f/b/o St. Joseph's Children's Hospital Foundation - 3503 E. Frontage Road - Tampa, FL 33607	59-3140335	501(c)(3)	27,400.	0.			Support Sick and Hungry Kids
Signature Healthcare Corporation 680 Centre Street Brockton, MA 02302	04-2103554	501(c)(3)	25,000.	0.			Support Sick and Hungry Kids
South Oakland Shelter 46156 Woodward Avenue Pontiac, MI 48342	38-2847849	501(c)(3)	25,000.	0.			Support Sick and Hungry Kids
The Painted Turtle 1300 4th Street, Suite 300 Santa Monica, CA 90401	95-4612481	501(c)(3)	25,000.	0.			Support Sick and Hungry Kids
Tommy's Place Foundation Inc. 90 Shore Avenue Quincy, MA 02169	83-1069410	501(c)(3)	25,000.	0.			Support Sick and Hungry Kids
Monroe Carell Jr. Children's Hospital at Vanderbilt - 3322 West End Avenue, Suite 900 - Nashville, TN 37203	35-2528741	501(c)(3)	34,900.	0.			Support Sick and Hungry Kids
Retts Roost 22 Autumn River Lane Ogunquit, ME 03907	47-3723204	501(c)(3)	24,800.	0.			Support Sick and Hungry Kids
The Fund for PS 84, Inc. 32 W. 92nd Street New York City, NY 10025	13-3953929	501(c)(3)	22,000.	0.			Support Sick and Hungry Kids
Boys & Girls Club of the Tennessee Valley - 967 Irwin Street - Knoxville, TN 37917	62-0475743	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Camp Boggy Creek 30500 Brantley Branch Road Eustis, FL 32736	59-3012889	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
First Descents 3827 Lafayette Street, Suite 161 Denver, CO 80205	81-0539964	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
Greater Chicago Food Depository 4100 W. Ann Lurie Place Chicago, IL 60632	36-2971864	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
Happiness Is Camping Inc. 62 Sunset Lake Road Hardwick, NJ 07825	13-2556242	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
Henry Viscardi School 201 I U Willets Road Albertson, NY 11507	11-2024514	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
Hillside Food Outreach Inc. 2 Westchester Plaza Elmsford, NY 10523	01-0712431	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
Kansas Food Bank Warehouse Inc. 1919 E. Douglas Dichita, KS 67211	48-0959213	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
Lakeview Pantry 3945 N. Sheridan Road Chicago, IL 60613	36-2734184	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
Science & Arts Academy 1825 Miner Street Des Plaines, IL 60016	36-3838771	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Smile-A-Mile 1600 2nd Avenue South Birmingham, AL 35233	63-0907544	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
Special Strides Inc. 118 Federal Road Monroe, NJ 08831	22-3667820	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
The RWJ University Hospital Foundation - 10 Plum Street, Suite 910 - New Brunswick, NJ 08901	22-2378007	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
The Tomorrow Fund 593 Eddy Street Providence, RI 02903	05-0450569	501(c)(3)	20,000.	0.			Support Sick and Hungry Kids
Baystar Family Retreat Inc. 15334 Azra Drive Odessa, FL 33556	82-3018092	501(c)(3)	19,500.	0.			Support Sick and Hungry Kids
Izzy Foundation Inc. P.O. Box 2326 Providence, RI 02906	45-3459440	501(c)(3)	18,200.	0.			Support Sick and Hungry Kids
Bangor Region YMCA 17 Second Street Bangor, ME 04401	01-0211485	501(c)(3)	16,000.	0.			Support Sick and Hungry Kids
Freestore-Foodbank Inc. 1141 Central Parkway Cincinnati, OH 45202	23-7122205	501(c)(3)	16,000.	0.			Support Sick and Hungry Kids
Harvesters-The Community Food Network - 3801 Topping Avenue - Kansas City, MO 64129	43-1208665	501(c)(3)	16,000.	0.			Support Sick and Hungry Kids

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Loaves & Fishes P.O. Box 3241 Clarksville, TN 37043	62-1692703	501(c)(3)	16,000.	0.			Support Sick and Hungry Kids
BackPack Beginnings 1852 Banking Street # 9024 Greensboro, NC 27408	46-1251223	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Bay State Community Services, Inc. 1120 Hancock Street Quincy, MA 02169	04-2468492	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Boys & Girls Club of Greater Lowell Inc. - 657 Middlesex Street - Lowell, MA 01851	04-2104396	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Bread of Life 214 Commercial Street, Suite 2019 Malden, MA 02148	22-3199801	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Building Audacity 75 Allen Avenue Lynn, MA 01902	83-4650961	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Camp Happy Days 933 Dupont Road, Suite B Charleston, SC 29407	57-0755466	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Camp Holiday Trails, Inc. 400 Holiday Trails Lane Charlottesville, VA 22903	54-0922028	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Cavett Kids Foundation 730 W. Wilshire Boulevard, Suite 10 Oklahoma City, OK 73116	20-2025503	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Chattanooga Area Food Bank 2009 Curtain Pole Road Chattanooga, TN 37406	62-0867645	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Children's Cancer Association 1200 NW Naito Parkway, Suite 140 Portland, OR 97209	93-1181662	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Children's Cancer Connection 2708 Grand Avenue Des Moines, IA 50312	42-1313167	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Children's Oncology Services, Inc. 213 West Institute Place, Suite 306 Chicago, IL 60610	36-4263831	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Cincinnati Children's Hospital 3333 Burnet Avenue, MLC 9002 Cincinnati, OH 45229	31-0833936	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Clara Maass Foundation 1 Clara Maass Drive Belleville, NJ 07109	22-2132516	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Connecticut Burns Care Foundation Inc. - 601 Boston Post Road, # 2 - Milford, CT 06460	06-1017365	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Cristo Rey Boston High School, Inc. - 100 Savin Hill Avenue - Boston, MA 02125	56-2438544	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Faithful Meals in Motion 1008 Warwick Drive Matteson, IL 60443	47-5372890	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Feeding America Eastern Wisconsin 1700 W. Fond Du Lac Avenue Milwaukee, WI 53205	39-1384593	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Food Bank of Eastern Michigan 2300 Lapeer Road Flint, MI 48503	38-2379678	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Wellfare, Inc., f/b/o Founders Give, Inc. - 609 Greenwich Street, 4th Floor - New York City, NY 10014	85-2658123	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Franciscan Children's (Franciscan Hospital for Children, Inc.) - 30 Warren Street - Brighton, MA 02135	04-2156082	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Friends of Karen 118 Titicus Road North Salem, NY 10560	14-1612290	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Friendship House Inc. P.O. Box 1517 Wilmington, DE 19899	51-0306759	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Greater Somerset County YMCA 140 Mount Airy Road Basking Ridge, NJ 07920	22-1559439	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Jett Foundation 36 Cordage Park Circle, Suite 328 Plymouth, MA 02360	04-3563445	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Jewish Relief Agency 225 East City Avenue, Suite 210 Bala Cynwyd, PA 19004	26-2578017	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Joe Andruzzi Foundation 49 Plain Street, Suite 500 North Attleboro, MA 02760	26-2017043	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Justice Resource Institute, Inc. 160 Gould Street, Suite 300 Needham, MA 02494	04-2526357	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Mid Coast Hunger Prevention Program - 12 Tenney Way - Brunswick, ME 04011	01-0492643	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Naugatuck YMCA 284 Church Street Naugatuck, CT 06770	06-0646770	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Rescuing Leftover Cuisine 25 Broadway, 12th Floor New York City, NY 10004	46-3198412	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Second Helpings Atlanta Inc. P.O. Box 720582 Atlanta, GA 30358	45-3631347	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
St. Mary's Foundation for Children 2901 216th Street Bayside, NY 11360	11-2728736	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
The Periwinkle Foundation 3400 Bissonnet, Suite 185 Houston, TX 77005	76-0093914	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
The Valerie Fund 2101 Millburn Avenue Maplewood, NJ 07040	22-2126867	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids

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Joy In Childhood Foundation, Inc.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Maryland Medical Systems-Corporation - 250 West Pratt Street, Suite 2400 - Baltimore, MD 21201	52-1362793	501(c)(3)	15,000.	0.			Support Sick and Hungry Kids
Barnabas Foundation, Inc. P.O. Box 3200 Springfield, MO 65808	43-1700240	501(c)(3)	14,560.	0.			Support Sick and Hungry Kids
Emporia Rescue Mission P.O. Box 901 Emporia, KS 66801	48-1207357	501(c)(3)	14,000.	0.			Support Sick and Hungry Kids
Wolfson Children's Hospital / Baptist Health - 841 Prudential Drive, Suite 1300 - Jacksonville, FL 32207	59-2487135	501(c)(3)	13,400.	0.			Support Sick and Hungry Kids
Children's Healthcare of Atlanta, Inc. - 1575 Northeast Expressway NE - Brookhaven, GA 30329	58-2367819	501(c)(3)	13,000.	0.			Support Sick and Hungry Kids
The Upstate Foundation f/b/o Golisano Children's Hospital - 750 E. Adams Street, CAB326 - Syracuse, NY 13210	16-1068101	501(c)(3)	12,600.	0.			Support Sick and Hungry Kids
United Way of the Dutchess-Orange Region - 75 Market Street - Ploughkeepsie, NY 12601	06-1045698	501(c)(3)	12,500.	0.			Support Sick and Hungry Kids
Best of the Batch Foundation 2000 West Street Munhall, PA 15120	34-1900914	501(c)(3)	12,000.	0.			Support Sick and Hungry Kids
Boys & Girls Club of Broward County - 877 NW 61st Street - Fort Lauderdale, FL 33309	59-1108790	501(c)(3)	12,000.	0.			Support Sick and Hungry Kids

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Dream Day on Cape Cod 165 Nan-Ke-Rafe Path Brewster, MA 02631	04-3181222	501(c)(3)	12,000.	0.			Support Sick and Hungry Kids
Silverlake Independent Jewish Community Center (SIJCC) - 1110 Bates Avenue - Los Angeles, CA 90029	32-0003071	501(c)(3)	12,000.	0.			Support Sick and Hungry Kids
Boys & Girls Clubs of Metro South 19 Court Street, 2nd Floor Taunton, MA 02780	22-2963214	501(c)(3)	11,000.	0.			Support Sick and Hungry Kids
Feeding South Florida 2501 SW 32 Terrace Pembroke Park, FL 33023	59-2097520	501(c)(3)	11,000.	0.			Support Sick and Hungry Kids
Old Colony YMCA 320 Main Street Brockton, MA 02301	04-2125014	501(c)(3)	11,000.	0.			Support Sick and Hungry Kids
Double H Ranch (a/k/a Healing with Horses Ranch) - 10014 FM 973 - Manor, TX 78653	45-2792151	501(c)(3)	10,500.	0.			Support Sick and Hungry Kids
4Kids of South Florida, Inc. 2717 W. Cypress Creek Road Fort Lauderdale, FL 33309	61-1416525	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Advocate Health Care Network a/k/a Advocate Children's Hospital - 2025 Windsor Drive - Oak Brook, IL 60523	36-2167779	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Akron-Canton Regional Food Bank 350 Opportunity Parkway Akron, OH 44307	34-1369388	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids

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Alice Hyde Medical Center 133 Park Street Malone, NY 12953	15-0346515	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Aloha Harvest 3599 Waiialae Avenue, Suite 23 Honolulu, HI 96816	99-0344209	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
American National Red Cross 431 18th Street NW Washington, DC 20006	53-0196605	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
ASK Childhood Cancer Foundation 5211 West Broad Street, Suite 100 Richmond, VA 23230	51-0173669	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Bethels Heavenly Hands 12660 Sandpiper Drive Houston, TX 77035	05-0574377	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Boys & Girls Club of Greater Salem Inc. - 3 Geremonty Drive - Salem, NH 03079	02-6017326	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Boys & Girls Club of Manchester 555 Union Street Manchester, NH 03104	02-0226033	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Boys & Girls Clubs of the Capital Area - 21 Delaware Avenue - Albany, NY 12210	14-1338574	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Boys & Girls Club of Worcester 65 Tainter Street Worcester, MA 01610	04-2105851	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids

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Bread of The Mighty Food Bank P.O. Box 5086 Gainesville, FL 32627	59-2805577	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Camp Good Days & Special Times 1332 Pittsford-Mendon Road, P.O. Bo Mendon, NY 14506	22-2329654	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Catholic Charities of the Archdiocese of Omaha - P.O. Box 4520 - Omaha, NE 68104	47-0376612	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Central Texas Food Bank 6500 Metropolis Drive Austin, TX 78744	74-2217350	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Childhelp Inc. 6730 N. Scottsdale Road, Suite 150 Scottsdale, AZ 85253	95-2884608	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Children's Diagnostic and Treatment Center - 1401 S. Federal Highway - Fort Lauderdale, FL 33316	65-1026739	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Children's Home Society of Florida 5766 S. Semoran Boulevard Orlando, FL 32822	59-0192430	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Children's Medical Center Foundation - 2777 N. Stemmons Freeway, Suite 1700 - Dallas, TX 75207	75-2062015	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Community Food Bank of New Jersey 31 Evans Terminal Hillside, NJ 07205	22-2423882	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids

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

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Community of Hope Ministries P.O. Box 1004 Garner, NC 27529	20-2004572	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Covenant House California 1325 N. Western Avenue Los Angeles, CA 90027	13-3391210	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Crossroads Community Services 4500 South Cockrell Hill Road Dallas, TX 75236	47-2676714	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Cultivate Abundance, Inc. 17151 Laurelin Center, N Fort Myers, FL 33917	82-2626487	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Cumac Echo, Inc. (CUMAC) P.O. Box 2721 Paterson, NJ 07509	22-2657737	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Cure 4 the Kids Foundation 1 Breakthrough Way Las Vegas, NV 89135	26-0286469	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Dare to Care Food Bank P.O. Box 35458 Louisville, KY 40232	23-7345952	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Detroit Black Community Food Security Network Inc. - 11000 W. McNichols Road, Suite 103 - Detroit, MI 48221	33-1140762	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Dupage Children's Museum 301 N. Washington Street Naperville, IL 60540	36-3565001	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids

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Elisha Project 65 Newport Avenue # 6 Rumford, RI 02916	45-4507647	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Emerald Youth Foundation 1014 Heiskell Avenue Knoxville, TN 37921	62-1474791	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
End 68 Hours of Hunger P.O. Box 676 Somersworth, NH 03878	45-0998251	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Family Service of Rhode Island Inc. - P.O. Box 6688 - Providence, RI 02840	05-0258858	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Feeding Our Communities Partners 2120 Howard Drive W, Suite F North Mankato, MN 56003	27-2374187	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Food Bank of Central New York 7066 Interstate Island Road Syracuse, NY 13209	22-2816988	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Food Bank of Northwest Indiana 6490 Broadway Merrilville, IN 46410	35-1528285	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Food Finders Inc. 10539 Humbolt Street Los Alamitos, CA 90720	33-0412749	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Food for Free Committees Inc. 11 Inman Street Cambridge, MA 02139	22-2561771	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids

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

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Food Bank of Iowa P.O. Box 1517 Des Moines, IA 50305	42-1177880	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Foodlink, Inc. 1999 Mt. Read Boulevard Rochester, NY 14615	22-2428304	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Footprints Inc. (a/k/a Footprints Food Pantry) - P.O. Box 246 - Kittery, ME 03904	22-3149937	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Gather 210 West Road, Unit 3 Portsmouth, NH 03801	02-0226943	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Gilda's Club South Florida, Inc. 119 Rose Rive Fort Lauderdale, FL 33316	65-0528626	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Grahamtastic Connection 21 Bradeen Street, Suite 107 Springvale, ME 04083	51-0468171	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Greater Cleveland Food Bank 15500 South Waterloo Road Cleveland, OH 44110	34-1292848	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Hackensack University Medical Center Foundation - 160 Essex Street, Suite 101 - Lodi, NJ 07644	22-2339534	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Helping Hands Ending Hunger 2014 S. Long Hollow Road Trion, GA 30753	81-3382807	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids

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Integrated Family Community Services - 3370 S. Irving Street - Englewood, CO 80110	84-0579740	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Interfaith Social Services Inc. 105 Adams Street Quincy, MA 02169	04-2104853	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Intervale Center Inc. 180 Intervale Road Burlington, VT 05401	03-0329656	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Jay's Hope Foundation Inc. 1157 Forsyth Street, Suite B Macon, GA 31201	20-5117271	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Kids Meals Inc. 330 Garden Oaks Boulevard Houston, TX 77018	76-0330447	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Lancaster County Food Hub 812 North Queen Street Lancaster, PA 17603	23-1429852	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Latin American Community Center Corp (LACC) - 403 N. Van Buren Street - Wilmington, DE 19805	23-7047048	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Lifting Up Westchester Inc. 35 Orchard Street White Plains, NY 10603	13-3121606	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Loaves and Fishes Too 721 Kasota Avenue SE Minneapolis, MN 55414	41-1421522	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids

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Martin Luther King Community Center Inc. - 20 Dr. Marcus F. Wheatland Boulevard - Newport, RI 02840	05-0271882	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Mechanicville Area Community Services - P.O. Box 30, 6 Main Street - Mechanicville, NY 12118	14-1536118	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Metrowest YMCA 280 Old Connecticut Path Framingham, MA 01701	04-2281530	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Musicians on Call Inc. P.O. Box 60187 Nashville, TN 37206	13-4067116	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Neighborhood Boys & Girls Club 2501 W. Irving Park Road Chicago, IL 60618	36-2139256	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Neighborhood Ministries 1918 W. Van Buren Phoenix, AZ 85009	86-0809052	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Nevada Childhood Cancer Foundation 3711 E. Sunset Road Las Vegas, NV 89120	88-0302673	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Newark Beth Israel Medical Center Inc. - 201 Lyons Avenue - Newark, NJ 07112	22-3452311	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
North Star Reach 674 South Wagner Road Ann Arbor, MI 48103	26-0347065	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids

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Ohio Valley Youth Network 301 N. 4th Street Steubenville, OH 43952	81-3575289	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
One Heart for Women and Children Inc. - 2040 N. Rio Grande Avenue - Orlando, FL 32804	30-0584360	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
One Mission, Inc. 69 Milk Street, Suite 300 Westborough, MA 01581	26-3741880	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Open Heart Magic 67 E. Madison Street, Suite 1504 Chicago, IL 60603	27-0095889	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Options for Youth 1525 E. 53rd Street, Suite 920 Chicago, IL 60615	20-1438278	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Police Athletic League of Philadelphia - Belgrade Clearfield Streets - Philadelphia, PA 19134	23-1507837	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Prisma Health Midlands Foundation 1600 Marion Street Columbia, SC 29201	57-0725669	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Roadrunner Food Bank, Inc. 5840 Office Boulevard NE Albuquerque, NM 87109	85-0278525	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Second Harvest Food Bank of East TN - 136 Harvest Lane - Maryville, TN 37801	58-1450139	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids

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Second Harvest Foodbank of Southern Wisconsin - 2802 Dairy Drive - Madison, WI 53718	39-1490691	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Shenendehowa Educational Foundation - P.O. Box 768 - Clifton Park, NY 12065	55-0912092	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Shepherd's Hope Ltd 838 W. Marquette Road, P.O. Box 210 Chicago, IL 60621	26-2744380	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
So What Else, Inc. One Preserve Parkway, Suite 150 Rockville, MD 20852	27-1219231	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Sojourner House Inc. 386 Smith Street Providence, RI 02908	05-0370419	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Suncoast Charities For Children Inc. - 5317 Fruitville Road, Suite 43 - Sarasota, FL 34232	65-0397846	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Sunrise Day Camps Association Inc. 15 Neil Court Oceanside, NY 11572	46-5555854	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Table to Table 611 US Highway, 46 W., Suite 240 Hasbrouck Heights, NJ 07604	22-3646125	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
The Food Bank For Westchester, Inc. (a/k/a Feeding Westchester) - 200 Clearbrook Road - Elmsford, NY 10523	13-3507988	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids

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Urban Farming Institute P.O. Box 260371 Mattapan, MA 02126	45-3961022	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
The Urban Outreach Center of NYC 1745 1st Avenue New York City, NY 10128	82-0642308	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
The Toby Keith Foundation Inc. 818 NE 8th Street Oklahoma City, OK 73104	20-4089800	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
UNC Health Foundation 123 W. Franklin Street, Suite 510 Chapel Hill, NC 27516	56-6057494	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
United Food Bank 245 South Nina Drive Mesa, AZ 85210	86-0505273	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Upper Valley Haven Inc. 713 Hartford Avenue White River Junction, VT 05001	03-0277908	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Vermont Children's Trust Foundation - 95 St. Paul Street, Suite 330 - Burlington, VT 05401	03-0328193	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Vineyard Family Services of Central Alabama Inc. - P.O. Box 2458 - Alabaster, AL 35007	13-4362029	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Wakefield Food Pantry P.O. Box 1624 Wakefield, MA 01880	04-3656505	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids

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West Islip Youth Enrichment Services Inc. - 90 Higbie Lane - West Islip, NY 11795	11-2832268	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Weymouth Council For The Hungry P.O. Box 890009 East Weymouth, MA 02189	04-3099272	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
Womens Center of Greater Danbury Conn Inc. - 2 West Street - Danbury, CT 06810	06-0983819	501(c)(3)	10,000.	0.			Support Sick and Hungry Kids
East Tennessee Children's Hospital P.O. Box 15010 Knoxville, TN 37901	62-6002604	501(c)(3)	9,800.	0.			Support Sick and Hungry Kids
Children's Place Inc. 310 Barnwell Avenue NE Aiken, SC 29801	57-0407808	501(c)(3)	9,000.	0.			Support Sick and Hungry Kids
Covenant House 461 Eighth Avenue New York City, NY 10001	13-2725416	501(c)(3)	9,000.	0.			Support Sick and Hungry Kids
Sisters of the Order of St Dominic 555 Albany Avenue Amityville, NY 11701	11-1635109	501(c)(3)	9,000.	0.			Support Sick and Hungry Kids
Project Pin Incorporated 18 Mountain View Danielson, CT 06239	36-4747513	501(c)(3)	8,500.	0.			Support Sick and Hungry Kids
Safe Future Foundation Inc. 9140 Golfside Drive, Suite 14 N Jacksonville, FL 32256	83-2012254	501(c)(3)	8,000.	0.			Support Sick and Hungry Kids

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Camp Casco P.O. Box 330 Sudbury, MA 01776	47-2125590	501(c)(3)	7,760.	0.			Support Sick and Hungry Kids
Atlanta Growing Leadership of Women Inc. - 109 Anderson Street SE, Suite 602 - Marietta, GA 30060	85-0530070	501(c)(3)	7,500.	0.			Support Sick and Hungry Kids
Community Harvest Food Bank Of Northeast Indiana - 999 East Tillman Road - Fort Wayne, IN 46816	31-1100607	501(c)(3)	7,500.	0.			Support Sick and Hungry Kids
Manna House Inc. 3241 Robinson Road, Suite A Midlothian, TX 76065	75-2442266	501(c)(3)	7,500.	0.			Support Sick and Hungry Kids
Massasoit Community College Foundation Inc. - One Massasoit Boulevard - Brockton, MA 02302	23-7100537	501(c)(3)	7,500.	0.			Support Sick and Hungry Kids
McLeod's Health Foundation 555 E. Cheves Street Florence, SC 29506	57-0818672	501(c)(3)	7,500.	0.			Support Sick and Hungry Kids
Our Open Umbrella Inc. P.O. Box 506 North Attleboro, MA 02761	85-0524617	501(c)(3)	7,500.	0.			Support Sick and Hungry Kids
Roundup River Ranch 10 W. Beaver Creek Boulevard Avon, CO 81620	20-4632248	501(c)(3)	7,500.	0.			Support Sick and Hungry Kids
Waltham Boys & Girls Club, Inc. 20 Exchange Street Waltham, MA 02451	04-2103927	501(c)(3)	7,500.	0.			Support Sick and Hungry Kids

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Creative Hub Worcester 2 Ionic Avenue Worcester, MA 01608	81-2613929	501(c)(3)	7,000.	0.			Support Sick and Hungry Kids
Harvest Community Charities P.O. Box 400 Pelham, AL 35124	27-4022552	501(c)(3)	7,000.	0.			Support Sick and Hungry Kids
Northern Nevada Dream Center P.O. Box 2666 Carson City, NV 89702	47-1124003	501(c)(3)	7,000.	0.			Support Sick and Hungry Kids
Watervliet Civic Chest Inc. 14th Street, 1st Avenue Watervliet, NY 12189	14-1387856	501(c)(3)	7,000.	0.			Support Sick and Hungry Kids
Akron Children's Hospital Mahoning Valley - 6505 Market Street - Youngstown, OH 44512	34-0714357	501(c)(3)	6,000.	0.			Support Sick and Hungry Kids
Beverly Bootstraps Community Services Inc. - 35 Park Street - Beverly, MA 01915	04-3254507	501(c)(3)	6,000.	0.			Support Sick and Hungry Kids
Regional Food Bank of Northeast New York - 965 Albany-Shaker Road - Latham, NY 12110	22-2470885	501(c)(3)	6,000.	0.			Support Sick and Hungry Kids
United Church of Rogers Park 1545 W. Morse Avenue Chicago, IL 60626	36-2677402	501(c)(3)	5,500.	0.			Support Sick and Hungry Kids
La Casa de Amistad Inc. 3423 S. Michigan Street South Bend, IN 46614	35-1350013	501(c)(3)	5,250.	0.			Support Sick and Hungry Kids

Schedule I (Form 990)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

Part I, Line 2:

The Foundation has a grant approval process for all grant funds that are distributed. The grant awards are first approved by the Board of Directors and then the funds are dispersed. The grants are tracked in the accounting software by recipient.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization **Joy In Childhood Foundation, Inc.** Employer identification number **26-0593784**

Part I		Types of Property			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods	X		12,725.	Retail value
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles	X	22	10,850.	Retail value
19	Food inventory	X	4	880.	Retail value
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (<u>Equipment</u>)	X	2	8,033.	Retail value
26	Other ▶ (<u>Jewelry</u>)	X	1	1,865.	Retail value
27	Other ▶ (<u>Electronics</u>)	X	3	1,250.	Retail value
28	Other ▶ (<u>Sports Gear</u>)	X	1	300.	Retail value
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement		29		
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?				Yes No
	b If "Yes," describe the arrangement in Part II.				
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?				Yes No
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?				Yes No
	b If "Yes," describe in Part II.				
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.				

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

Schedule M (Form 990) 2021

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

Multiple horizontal lines for supplemental information.

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021Open to Public
Inspection

Name of the organization

Joy In Childhood Foundation, Inc.

Employer identification number

26-0593784

Form 990, Part III, Line 1, Description of Organization Mission:

hungry kids. The Foundation is also established to more generally support those who serve in their communities in an effort to improve community strength and capacity.

Form 990, Part VI, Section A, line 6:

The sole member of the Foundation is Dunkin'.

Form 990, Part VI, Section A, line 7b:

The Foundation's initial sole member has the power to remove one or more members of the Foundation's board. However, vacancies are not filled by the sole-member and the remaining board members must approve any potential nominations. Accordingly, per IRS instructions for Schedule R, the Foundation's sole member does not have a control relationship over the Foundation and is therefore an unrelated organization to the Foundation.

Form 990, Part VI, Section B, line 11b:

The Finance Committee and each member of the Board of Directors will review the final Form 990 and approve the final Form 990 before the return is filed with the IRS.

Form 990, Part VI, Section B, Line 12c:

The Foundation has a conflict of interest policy and an annual sign off. The board of directors is asked annually to verify and confirm that there are no new conflicts of interest, and/or to disclose any potential or new conflicts of interest that may have occurred.

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization Joy In Childhood Foundation, Inc.	Employer identification number 26-0593784
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Form 990, Part VI, Section B, Line 15:

The Organization did not compensate its top management official or other officers of the Organization. The Organization did not have any employees during the year.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990:

AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, WI, NY
NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV

Form 990, Part VI, Section C, Line 19:

All documents required by law are provided to the public upon request.

Form 990, Part VII, Line 5:

The Foundation receives in-kind services from volunteers, some of which are employees of an unrelated organization (per definition in the IRS instructions), Dunkin', including several individuals listed in Form 990, Part VII. Some of these individuals are compensated by Dunkin' for services rendered to the Foundation. Total amount of compensation and benefits paid to these individuals for their services rendered to the Foundation during 2021 was \$94,988. However, as Dunkin' is a taxable entity the Foundation is not required to report an additional breakdown of these in-kind services in accordance with IRS instructions.

Form 990, Part XI, line 9, Changes in Net Assets:

Uncollectible pledges -182,250.

Name of the organization Joy In Childhood Foundation, Inc.	Employer identification number 26-0593784
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Form 990, Part XII, Line 2c:

For its 2021 tax year, the Foundation engaged a different independent public accounting firm to perform an audit of the Foundation's financial statements, and to assist in the preparation of the Foundation's Form 990 than it has used in the past. The audit was subject to the review and oversight by the Foundation's Finance Committee and Executive Director.