

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2021

Open to Public Inspection

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.

A For the **2021** calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization HEADWATERS FOUNDATION FOR JUSTICE		D Employer identification number 36-3359386	
	Doing business as			
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	2801 21ST AVENUE SOUTH	132-B	6128790602	
City or town, state or province, country, and ZIP or foreign postal code MINNEAPOLIS, MN 55407		G Gross receipts \$ 19,076,041.		H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No
F Name and address of principal officer: LEAH OLM SAME AS C ABOVE				H(b) Are all subordinates included? Yes No
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527				If "No," attach a list. See instructions
J Website: WWW.HEADWATERSFOUNDATION.ORG				H(c) Group exemption number ▶
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶		L Year of formation: 1984	M State of legal domicile: MN	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: HEADWATERS FOUNDATION'S MISSION IS TO AMPLIFY THE POWER OF COMMUNITY TO ADVANCE EQUITY AND JUSTICE.		
	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	7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	18
	6 Total number of volunteers (estimate if necessary)	6	45
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	13,311,485.	14,429,606.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	239,956.	529,805.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	313,491.	45,543.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13,864,932.	15,004,954.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	3,887,462.	3,688,797.
	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)	1,229,439.	2,051,329.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 629,672.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	657,281.	609,880.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,774,182.	6,350,006.
19 Revenue less expenses. Subtract line 18 from line 12	8,090,750.	8,654,948.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	20,127,206.	27,986,426.
	22 Net assets or fund balances. Subtract line 21 from line 20	1,050,822.	1,550,136.
		19,076,384.	26,436,290.

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		Date		
	LEAH OLM, TREASURER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	DEIRDRE HODGSON	DEIRDRE HODGSON	11/01/22	<input type="checkbox"/>	P01484710
Firm's name ▶ CLIFTONLARSONALLEN LLP			Firm's EIN ▶ 41-0746749		
Firm's address ▶ 220 S 6TH STREET, SUITE 300 MINNEAPOLIS, MN 55402			Phone no. 612-376-4500		

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: HEADWATERS FOUNDATION FOR JUSTICE (THE FOUNDATION) IS A COMMUNITY FOUNDATION WHOSE MISSION IS TO AMPLIFY THE POWER OF COMMUNITY TO ADVANCE EQUITY AND JUSTICE.

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 \$ 1,220,818. including grants of \$ 550,080.) (Revenue \$ 153.) BLACK SEED FELLOWSHIP: THE BLACK SEED FELLOWSHIP IS A NEW STRATEGY FOR BUILDING LONG-TERM POLITICAL POWER AND INFRASTRUCTURE IN MINNESOTA. IT IS OUR FIRST INITIATIVE COMING OUT OF OUR BLACK MOVEMENT ECOSYSTEM PROGRAM (BME). BY INVESTING DEEPLY IN WOMEN AND FEMME ORGANIZERS FROM DIVERSE BACKGROUNDS, HEADWATERS HELPS FELLOWS DEVELOP A SERIES OF RETREATS TO PROVIDE HEALING AND RECONCILIATION SESSIONS; VISIONING SESSIONS TO BUILD ORGANIZING UNITY AND POLITICAL ALIGNMENT; AND A WORK-INTO-ACTION SESSION TO PLAN AND EXECUTE A COLLABORATIVE CAMPAIGN. IN FISCAL YEAR 2022, BME PROGRAM AWARDED \$550,000 TO 17 ORGANIZATIONS.

4b (Code:) (Expenses \$ 1,145,607. including grants of \$ 1,145,600.) (Revenue \$ 2,230,700.) DONOR ADVISED FUNDS: THIS PROGRAM ENABLES INDIVIDUAL DONORS TO ADVANCE THEIR PHILANTHROPIC GOALS AND DIRECT RESOURCES TO SOCIAL CHANGE GROUPS LOCALLY AND NATIONALLY. DEVELOPMENT STAFF EDUCATES DONORS ABOUT SOCIAL INJUSTICE ISSUES, CONNECTS THEM TO ORGANIZATIONS THAT MATCH THEIR INTERESTS, AND PROVIDES GRANTMAKING ASSISTANCE. IN FISCAL YEAR 2022, HEADWATERS ALLOCATED \$1,145,600 TO 99 ORGANIZATIONS. (INCLUDES GRANTS OF \$244,446 AWARDED TO HEADWATERS).

4c (Code:) (Expenses \$ 866,063. including grants of \$ 510,000.) (Revenue \$ 237,503.) THE GIVING PROJECT GRANT PROGRAM: SINCE 2015, THIS PROGRAM INVESTS IN ORGANIZATIONS THAT ARE LED BY AND FOR BLACK PEOPLE, INDIGENOUS PEOPLE, AND PEOPLE OF COLOR (BIPOC) THAT ALSO USE A COMMUNITY ORGANIZING APPROACH TO ADDRESS ROOT CAUSES OF INJUSTICE. DURING FISCAL YEAR 2022, A CROSS-CLASS, MULTIRACIAL COHORT OF COMMUNITY MEMBERS MANAGED THE GIVING PROJECT GRANTMAKING PROCESS. THE COHORT RAISED MONEY FROM THEIR NETWORKS AND LED THE GRANTMAKING PROCESS; THEY AWARDED \$510,000 IN 17 GENERAL OPERATING GRANTS

4d Other program services (Describe on Schedule O.) (Expenses \$ 1,840,796. including grants of \$ 1,483,117.) (Revenue \$ 203,337.)

4e Total program service expenses 5,073,284.

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>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	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>		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>		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>		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>	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>		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>		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>		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>	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>	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>		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>		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>		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>	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>	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>	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>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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>		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>		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>		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		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>		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>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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>	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, tax-exempt bonds, and business transactions.

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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 counts, 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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body... 1b Enter the number of voting members included on line 1a... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Did the organization have members or stockholders... 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... 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 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

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b 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 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization 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? 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed MN, WI
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.
[X] Own website [] Another's website [X] 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
LEAH OLM - 612-879-0602
2801 21ST AVE S STE 132B, MINNEAPOLIS, MN 55407

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) MARIA DE LA CRUZ PRESIDENT	32.00			X			176,844.	0.	38,292.	
(2) JULIE REMMELTS VP OF OPERATIONS & FINANCE	32.00			X			146,198.	0.	22,365.	
(3) MELISSA RUDNICK DIRECTOR OF PROGRAM & GRANTMAKING	32.00				X		122,598.	0.	15,364.	
(4) ALLISON JOHNSON HEIST VP OF CULTURE & PARTNERSHIP	32.00				X		115,429.	0.	18,810.	
(5) CAMILLE CYPRIAN CO-CHAIR	1.00	X		X			0.	0.	0.	
(6) ELIZABETH A. COCO CO CHAIR, SECRETARY	1.00	X		X			0.	0.	0.	
(7) ARLETA LITTLE TREASURER	1.00	X		X			0.	0.	0.	
(8) BILAL ALKATOUT SECRETARY (END 1/1/22)	1.00	X		X			0.	0.	0.	
(9) HABON ABDULE BOARD MEMBER	1.00	X					0.	0.	0.	
(10) ALYSSA HAWKINS BOARD MEMBER	1.00	X					0.	0.	0.	
(11) ERIC HOWARD BOARD MEMBER	1.00	X					0.	0.	0.	
(12) FILIBERTO NOLASCO GOMEZ BOARD MEMBER (END 3/1/22)	1.00	X					0.	0.	0.	
(13) LEAH OLM BOARD MEMBER	1.00	X					0.	0.	0.	
(14) JANIECE WATTS BOARD MEMBER (END 2/28/22)	1.00	X					0.	0.	0.	
(15) ASALESOL YOUNG BOARD MEMBER (END 4/1/22)	1.00	X					0.	0.	0.	

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (Individual trustee or director, Institutional trustee, Officer, Key employee, Highest compensated employee, Former), (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes subtotal rows for 1b, 1c, and 1d.

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 4

Table with 3 columns: Question number, Question text, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

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.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a 'NONE' option for (A).

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 0

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					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	14,429,606.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			14,429,606.			
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)		45,427.			45,427.	
	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	4,555,465.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	4,071,087.				
	c Gain or (loss)	7c	484,378.				
	d Net gain or (loss)			484,378.		484,378.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
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 ADMINISTRATIVE REVENUE	Business Code	900099	45,543.		45,543.	
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			45,543.			
12 Total revenue. See instructions			15,004,954.	0.	0.	575,348.	

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 ...	3,688,797.	3,688,797.		
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	442,339.	225,593.	92,891.	123,855.
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	1,241,409.	685,660.	210,070.	345,679.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	298,779.	162,060.	53,414.	83,305.
9 Other employee benefits	44,967.	26,415.	6,088.	12,464.
10 Payroll taxes	23,835.	12,928.	4,261.	6,646.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	88,241.	38,173.	29,497.	20,571.
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.)	122,443.	35,135.	75,718.	11,590.
12 Advertising and promotion				
13 Office expenses	66,727.	14,650.	23,298.	28,779.
14 Information technology	153,452.	60,112.	51,457.	41,883.
15 Royalties				
16 Occupancy	124,671.	65,649.	24,427.	34,595.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	79,312.	26,023.	32,526.	20,763.
20 Interest	4,789.		4,789.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	19,193.		19,193.	
23 Insurance	6,996.	2,465.	3,204.	1,327.
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 MISCELLANEOUS	36,332.	2,009.	15,872.	18,451.
b MEMBERSHIPS	25,258.	25,200.	77.	-19.
c BAD DEBT EXPENSE (RECOV	-117,534.	2,415.	268.	-120,217.
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	6,350,006.	5,073,284.	647,050.	629,672.
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 <input type="checkbox"/> 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)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	3,808,312.	1	7,098,978.
	2 Savings and temporary cash investments	1,201,440.	2	1,776,287.
	3 Pledges and grants receivable, net	8,885,243.	3	14,017,679.
	4 Accounts receivable, net	88,652.	4	0.
	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	88,178.	9	78,453.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 206,685.		
	b Less: accumulated depreciation	10b 48,341.	177,537.	10c 158,344.
	11 Investments - publicly traded securities	4,071,087.	11	3,243,012.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11	510,000.	13	510,000.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,296,757.	15	1,103,673.
16 Total assets. Add lines 1 through 15 (must equal line 33)	20,127,206.	16	27,986,426.	
Liabilities	17 Accounts payable and accrued expenses	73,033.	17	209,386.
	18 Grants payable	850,000.	18	1,235,000.
	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	127,789.	24	97,034.
	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	0.	25	8,716.
	26 Total liabilities. Add lines 17 through 25	1,050,822.	26	1,550,136.
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	2,939,556.	27	4,345,464.
	28 Net assets with donor restrictions	16,136,828.	28	22,090,826.
	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	19,076,384.	32	26,436,290.
33 Total liabilities and net assets/fund balances	20,127,206.	33	27,986,426.	

Form 990 (2021)

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	15,004,954.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,350,006.
3	Revenue less expenses. Subtract line 2 from line 1	3	8,654,948.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	19,076,384.
5	Net unrealized gains (losses) on investments	5	-1,144,344.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	1.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-150,699.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	26,436,290.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual 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?
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:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
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:
 Separate basis Consolidated basis 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?
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?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

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 HEADWATERS FOUNDATION FOR JUSTICE	Employer identification number 36-3359386
--	---

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.")	3,166,245.	2,488,718.	6,924,265.	13,311,485.	14,429,606.	40,320,319.
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	3,166,245.	2,488,718.	6,924,265.	13,311,485.	14,429,606.	40,320,319.
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)						25,558,609.
6 Public support. Subtract line 5 from line 4.						14,761,710.

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	3,166,245.	2,488,718.	6,924,265.	13,311,485.	14,429,606.	40,320,319.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	72,519.	70,564.	63,642.	46,374.	45,427.	298,526.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	884.	96,268.	444,695.	313,491.	45,543.	900,881.
11 Total support. Add lines 7 through 10						41,519,726.
12 Gross receipts from related activities, etc. (see instructions)					12	147,353.
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	35.55 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	40.93 %
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

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support.

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

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 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
19b 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)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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 (<i>explain in detail in Part VI</i>):		
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			

Schedule A (Form 990) 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.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS REVENUE

2017 AMOUNT: \$ 884.

2018 AMOUNT: \$ 96,268.

2019 AMOUNT: \$ 444,695.

2020 AMOUNT: \$ 313,491.

2021 AMOUNT: \$ 45,543.

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

HEADWATERS FOUNDATION FOR JUSTICE

Employer identification number

36-3359386

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 foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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).

Name of organization HEADWATERS FOUNDATION FOR JUSTICE	Employer identification number 36-3359386
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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
1	<hr/> <hr/> <hr/>	\$ <u>9,065,000.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>889,928.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>536,718.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization HEADWATERS FOUNDATION FOR JUSTICE	Employer identification number 36-3359386
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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 HEADWATERS FOUNDATION FOR JUSTICE	Employer identification number 36-3359386
---	--

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

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 HEADWATERS FOUNDATION FOR JUSTICE Employer identification number 36-3359386

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 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Form with multiple questions (1-9) regarding conservation easements, including checkboxes for various purposes, a table for tracking easements at the end of the tax year, and yes/no questions about monitoring and reporting.

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.

Form with questions (1a, 1b, 2) regarding collections of art and historical treasures, including checkboxes and dollar amount fields for revenue and assets.

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	5,877,844.	4,916,948.	4,928,758.	4,927,603.	4,460,372.
b Contributions	24.				
c Net investment earnings, gains, and losses	-825,861.	1,237,537.	172,738.	195,745.	400,628.
d Grants or scholarships					
e Other expenditures for facilities and programs	195,322.	276,641.	184,548.	194,590.	189,802.
f Administrative expenses					
g End of year balance	4,856,685.	5,877,844.	4,916,948.	4,928,758.	4,927,603.

- 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 | X | |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | | |
- 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		191,932.	33,588.	158,344.
d Equipment		14,753.	14,753.	0.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				158,344.

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) DEFERRED RENT PAYABLE	8,716.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	8,716.

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	13,709,911.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-1,144,344.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-150,699.
e	Add lines 2a through 2d	2e	-1,295,043.
3	Subtract line 2e from line 1	3	15,004,954.
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	15,004,954.

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	6,350,006.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	6,350,006.
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	6,350,006.

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 V, LINE 4:

THE FOUNDATION MAINTAINS THE ENDOWMENT TO SUPPORT GENERAL OPERATIONS AND

FUND GRANTMAKING FOR THE BENEFIT OF INDIGENOUS LED GROUPS IN MINNESOTA AND

WISCONSIN.

PART X, LINE 2:

THE FOUNDATION IS TAX EXEMPT UNDER SECTION 501(C)(3) OF THE INTERNAL

REVENUE CODE (IRC) AND MINNESOTA STATUTE 290.05. IT IS CLASSIFIED AS A

FOUNDATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(1) OF THE

IRC AND CONTRIBUTIONS BY DONORS ARE TAX DEDUCTIBLE.

THE FOUNDATION FOLLOWS ACCOUNTING STANDARDS FOR UNCERTAIN TAX POSITIONS

Part XIII Supplemental Information (continued)

AND FILES AS A TAX-EXEMPT ORGANIZATION. DURING 2022 AND 2021, THE
 FOUNDATION HAS NOT RECOGNIZED ANY LIABILITY FOR UNCERTAIN TAX POSITIONS.
 THE FOUNDATION'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY
 FEDERAL AND STATE AUTHORITIES.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN BENEFICIAL INTEREST IN THE MINNEAPOLIS FOUNDATION

FUND	-150,699.
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**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 **HEADWATERS FOUNDATION FOR JUSTICE** Employer identification number **36-3359386**

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
ALL PARKS ALLIANCE FOR CHANGE 2380 WYCLIFF STREET ST. PAUL, MN 55114	41-1386600	501C3	20,000.	0.	N/A	N/A	PROJECT SUPPORT
AMAZE 1380 ENERGY LANE ST. PAUL, MN 55101-1681	41-1972162	501C3	8,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN INDIAN CANCER FOUNDATION 3001 BROADWAY ST NE STE 185 MINNEAPOLIS, MN 55413-2657	27-0300026	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN INDIAN FAMILY CENTER 579 WELLS ST. SAINT PAUL, MN 55130-4134	41-1841352	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
ASIAN AMERICAN ORGANIZING PROJECT 1821 UNIVERSITY AVENUE WEST, STE 20 ST. PAUL, MN 55104	38-3777419	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
AWOOD CENTER 2511 E. FRANKLIN AVENUE MINNEAPOLIS, MN 55406-1028	83-1170235	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 102.

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.

Schedule I (Form 990) 2021

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
BCN COMMUNITIES 986 MARYLAND AVE E SAINT PAUL, MN 55106-2621	84-1962308	501C3	50,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
BLACK DISABILITY COLLECTIVE 552 EAST WHEELLOCK PARKWAY SAINT PAUL, MN 55130	85-4325771	501C3	50,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
BLACK IMMIGRANT COLLECTIVE 2100 STEVENS AVE. S MINNEAPOLIS, MN 55404	38-3777419	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
BODY WISDOM 2273 TELEGRAPH AVENUE OAKLAND, MN 94612-2330	94-3153475	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
BREAST CANCER ACTION 548 MARKET ST PMB 17179 SAN FRANCISCO, MN 94104-5401	94-3138992	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
BRIGID ALLIANCE P.O. BOX 58 NEW YORK, NY 10024	82-3843989	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
BROWN HOPE PO BOX 6807 PORTLAND, OR 97228	82-4843276	501C3	25,000.	0.	N/A	N/A	PROJECT SUPPORT
BUILDING DIGNITY AND RESPECT STANDARDS COUNCIL - 2730 E 31ST ST - MINNEAPOLIS, MN 55406-1923	83-2526232	501C3	15,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
CENTER FOR THIRD WORLD ORGANIZING C/O BLP, 1714 FRANKLIN ST, SUITE 10 OAKLAND, MN 94612-3409	52-1211059	501C3	125,000.	0.	N/A	N/A	PROJECT SUPPORT

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
CENTER SCHOOL INC 2421 BLOOMINGTON AVE S MINNEAPOLIS, MN 55404-3918	36-3591386	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
CENTRO DE TRABAJADORES UNIDOS EN LA LUCHA - 3715 CHICAGO AVE. - MINNEAPOLIS, MN 55407-2610	38-3828696	501C3	80,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
CLOSEKNIT 1007 WEST BROADWAY AVENUE MINNEAPOLIS, MN 55413	47-4977811	501C3	20,000.	0.	N/A	N/A	PROJECT SUPPORT
COBALT FOUNDATION P.O. BOX 22485 DENVER, CO 80222	84-6050191	501C3	10,000.	0.	N/A	N/A	PROJECT SUPPORT
CORPORATE ACCOUNTABILITY 10 MILK STREET, SUITE 610 BOSTON, MN 02108-4608	41-1322686	501C3	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
DAKHOTA IAPI OKHODAKICHIYE PO BOX 548 OSSEO, MN 55369-0548	46-3946313	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
DAKOTA WICOHAN P.O. BOX 2 - 230 WEST 2ND STREET MORTON, MN 56270-1308	42-1552956	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
DEFEND GLENDALE AND PUBLIC HOUSING COALITION - PO BOX 14616 - MINNEAPOLIS, MN 55414	75-3210606	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
DIVINE NATURAL ANCESTRY 503 22ND AVE NE MINNEAPOLIS, MN 55418	46-0966610	501C3	50,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT

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
DIVINE'S URBAN GARDENS (D.U.G) 10633 QUEBEC AVE. N BROOKLYN PARK, MN 55445	47-4492457	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
DREAM OF WILD HEALTH 1308 E. FRANKLIN AVENUE MINNEAPOLIS, MN 55404-2924	41-1632662	501C3	75,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
EAST PHILLIPS NEIGHBORHOOD INSTITUTE - 2929 17TH AVE S - MINNEAPOLIS, MN 55436-1013	83-3630254	501C3	45,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
EAST SIDE FREEDOM LIBRARY 1105 GREENBRIER STREET SAINT PAUL, MN 55106-2501	46-3794535	501C3	6,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
FREEDOM FROM THE STREETS P.O. BOX 11084 MINNEAPOLIS, MN 55411-1419	84-5008150	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
GENDER JUSTICE 200 UNIVERSITY AVE W STE 200 SAINT PAUL, MN 55103-2078	80-0603630	501C3	36,500.	0.	N/A	N/A	PROJECT SUPPORT
GRASSROOTS INDIGENOUS MULTIMEDIA 619 W WHEELLOCK PARKWAY ST PAUL, MN 55406-3546	41-1962329	501C4	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
GREATER MINNEAPOLIS CRISIS NURSERY 4544 4TH AVENUE SOUTH MINNEAPOLIS, MN 55419-5145	41-1379021	501C3	25,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
H.O.T.D.I.S.H. MILITIA (HAND OVER THE DECISION IT'S HEALTHCARE) - 32 E 1ST ST, STE 300 - DULUTH, MN 55802	41-1444270	501C3	12,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT

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
HAVEN HOUSING 1803 BRYANT AVE N MINNEAPOLIS, MN 55411-3212	41-1396238	501C3	13,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
HEALTHCARE REPARATIONS COOPERATIVE 3410 GARFIELD AVENUE MINNEAPOLIS, MN 55408	23-7133742	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
HMONG AMERICAN FARMERS ASSOCIATION 149 THOMPSON AVENUE EAST, SUITE 210 - WEST SAINT PAUL, MN 55118-3263	46-0928003	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
HONOR THE EARTH PO BOX 63 CALLAWAY, MN 56521-2120	45-4714238	501C3	10,000.	0.	N/A	N/A	PROJECT SUPPORT
HOUSING EQUITY NOW ST. PAUL 705 RAYMOND AVE STE. 100 ST. PAUL, MN 55114-1967	41-1635130	501C3	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
HUMANIZE MY HOODIE 4444 CINNAMON RIDGE TRAIL EAGAN, MN 55122	45-5392245	501C3	50,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
IN BLACK INK 938 SELBY AVENUE SAINT PAUL, MN 55104-6530	82-4012406	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
INDIGENOUS ROOTS 788 E 7TH ST SAINT PAUL, MN 55106	47-4492457	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
INQUILINXS UNIDXS POR JUSTICIA 3715 CHICAGO AVE S MINNEAPOLIS, MN 55407-2610	47-4987940	501C3	172,500.	0.	N/A	N/A	GENERAL OPERATING SUPPORT & PROJECT SUPPORT

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
INTERNATIONAL INSTITUTE OF MINNESOTA - 1694 COMO AVE - SAINT PAUL, MN 55108	41-0693912	501C3	25,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH COMMUNITY ACTION 2324 UNIVERSITY AVE W ST. PAUL, MN 55114-8755	41-1830619	501C3	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT & PROJECT SUPPORT
JUXTAPOSITION ARTS 2007 EMERSON AVE N MINNEAPOLIS, MN 55411-2507	41-1851915	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
KILIMO MINNESOTA 3677 361 AVE NE CAMBRIDGE, MN 55008	20-0189339	501C3	50,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
LANDMARK CONSERVANCY 500 MAIN ST E, STE 300 MENOMONIE, WI 54751	39-1872550	501C3	6,000.	0.	N/A	N/A	PROJECT SUPPORT
LEECH LAKE FINANCIAL SERVICES, INC 115 SPRUCE AVE. NE CASS LAKE, MN 56633-0848	46-2579700	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
LISTEN UP! YOUTH RADIO 550 VANDALIA STREET, SUITE 170 ST. PAUL, MN 55114	41-1500773	501C3	20,000.	0.	N/A	N/A	PROJECT SUPPORT
LITTLE EARTH RESIDENTS ASSOCIATION 2495 18TH AVE S, MINNEAPOLIS, MN 55 MINNEAPOLIS, MN 55404-4070	36-3309894	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
LOCAL PROGRESS 449 TROUTMAN ST SUITE A BROOKLYN, NY 21224-2251	86-3590543	501C3	20,000.	0.	N/A	N/A	PROJECT SUPPORT

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
LOVE FIRST COMMUNITY ENGAGEMENT 2825 JOHNSON STREET NE MINNEAPOLIS, MN 55418	85-3542553	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
LOWER PHALEN CREEK PROJECT 60 PLATO BLVD E, SUITE 400 SAINT PAUL, MN 55106-5019	27-5469929	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
MAKOCE IKIKUUPI PO BOX 21 GRANITE FALLS, MN 56241-1426	47-4008717	501C3	15,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
MANIDOO OGITIGAAN 102 FIRST STREET WEST # 110 BEMIDJI, MN 56601-4695	82-4771865	501C3	100,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT & PROJECT SUPPORT
MEWINZHA ONDAADIZIIKE WIIGAMING 802 PAUL BUNYAN DRIVE, SUITE 12 BEMIDJI, MN 56601-9287	46-2523191	501C3	60,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT & PROJECT SUPPORT
MIDWEST FARMERS OF COLOR COLLECTIVE - C/O LAND STEWARDSHIP PROJECT, 821 EAST 35TH STREET, SUITE 200 - MINNEAPOLIS, MN 55407	41-1466054	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
MIGIZI COMMUNICATIONS 3017 27TH AVENUE S. MINNEAPOLIS, MN 55406-1914	41-1379114	501C3	15,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
MILLION ARTIST MOVEMENT 887 RAYMOND AVE UPPER ST. PAUL, MN 55114	41-1690483	501C3	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
MINNEAPOLIS COLLEGE FOUNDATION 1501 HENNEPIN AVE MINNEAPOLIS, MN 55403-1710	41-1288502	501C3	8,000.	0.	N/A	N/A	PROJECT SUPPORT

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
MINNESOTA INDIGENOUS BUSINESS ALLIANCE (MNIBA) - 1765 CARROLL AVENUE, #10 - ST. PAUL, MN 55104-8354	81-5041824	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
MINNESOTA YOUTH COLLECTIVE EDUCATION FUND - 2161 UNIVERSITY AVE W., SUITE 100 - ST. PAUL, MN 55114	82-4719053	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
MN8 550 RICE ST SAINT PAUL, MN 55103	81-0874603	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
NATIONAL NETWORK OF ABORTION FUNDS P.O. BOX 22457 PHILADELPHIA, MN 19110	04-3236982	501C3	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
NATIVE AMERICAN COMMUNITY DEVELOPMENT INSTITUTE - 1414 FRANKLIN AVENUE - MINNEAPOLIS, MN 55404-2134	41-2117257	501C3	60,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT & PROJECT SUPPORT
NATIVE GOVERNANCE CENTER 1730 NEW BRIGHTON BLVD MINNEAPOLIS, MN 55413-1248	47-4901644	501C3	70,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
NATIVE SUN COMMUNITY POWER DEVELOPMENT - 4407 E. LAKE ST. - MINNEAPOLIS, MN 55406-2339	84-4052420	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
NORTHWEST INDIAN COMMUNITY DEVELOPMENT CENTER - 1819 BEMIDJI AVE N - BEMIDJI, MN 56601-3866	36-3505641	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
OUR JUSTICE PO BOX 2105 MINNEAPOLIS, MN 55402-0105	41-0971333	501C3	36,500.	0.	N/A	N/A	GENERAL OPERATING SUPPORT

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
OUTFRONT MINNESOTA COMMUNITY SERVICES - 310 EAST 38TH STREET, SUITE 209 - MINNEAPOLIS, MN 55409-1337	36-3550489	501C3	35,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
PARTNERSHIP IN PROPERTY COMMERCIAL LAND TRUST - 2825 JOHNSON ST NE - MINNEAPOLIS, MN 55418-3055	87-1177063	501C3	20,000.	0.	N/A	N/A	PROJECT SUPPORT
PROJECT FOR CHANGE 1826 MIKRANTIP RD. BEMIDJI, MN 56601-4255	45-0507287	501C3	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
QUEERSPACE COLLECTIVE 4030 WASHBURN AVE N MINNEAPOLIS, MN 55412	41-0916478	501C3	20,000.	0.	N/A	N/A	PROJECT SUPPORT
RED LAKE ENDAZHI-NITAAWIGING 15484 MIGIZI DR. RED LAKE, MN 56671	41-0692381	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
RELATIONSHIPS EVOLVING POSSIBILITIES - 3010 E. LAKE STREET - MINNEAPOLIS, MN 55406	23-7133742	501C3	70,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
RESOURCE GENERATION 1216 BROADWAY, 2ND FLOOR NEW YORK, MN 10013-6023	27-1847561	501C3	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
RESTAURANT OPPORTUNITIES CENTER OF MINNESOTA (ROC-MN) - 2110 NICOLLET AVE., 2ND FLOOR - MINNEAPOLIS, MN 10001-8405	01-0939141	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
SOLIDAIRE NETWORK, INC. 1423 BROADWAY NO 314 OAKLAND, CA 94612-2054	84-2130536	501C3	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT

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
SOMALI AMERICAN FARMERS ASSOCIATION - 2276 E LAKE JESSIE RD SE - ALEXANDRIA, MN 56308	41-1916337	501C3	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
SOUTH SUDANESE FOUNDATION 1132 28TH AVE S MOORHEAD, MN 56560-4420	83-4476088	501C3	50,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT & PROJECT SUPPORT
SPIRAL COLLECTIVE PO BOX 14145 ST. PAUL, MN 55114	47-3439118	501C3	12,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
T.O.N.E. U.P. 2110 NICOLLET AVE S MINNEAPOLIS, MN 55406	47-1890824	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
TAKEACTION MN EDUCATION FUND 705 RAYMOND AVE STE. 100 ST. PAUL, MN 55114-1967	41-1635130	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
THE DIAL GROUP C/O SPRINGBOARD FOR THE ARTS, 308 PRINCE STREET, #270 - MINNEAPOLIS, MN 5540	81-1173255	501C3	20,000.	0.	N/A	N/A	PROJECT SUPPORT
THE FIELDS AT ROOTSPRINGS 13537 47TH ST NW ANNANDALE, MN 55302	27-1709046	501C3	70,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT & PROJECT SUPPORT
THE SEAD PROJECT 1007 W BROADWAY AVE MINNEAPOLIS, MN 55411-2503	47-4088420	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
THE SHALOM CENTER 6711 LINCOLN DRIVE PHILADELPHIA, MN 19119-3119	23-2424621	501C3	7,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT

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
TIWAHE FOUNDATION 570 ASBURY ST N, SUITE 104 ST. PAUL, MN 55407-1226	26-4377588	501C3	40,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
TWIN CITIES INCARCERATED WORKERS ORGANIZING COMMITTEE - 1350 THOMPSON AVE, #316 - SOUTH ST. PAUL, MN 55075	47-5179896	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
UPSTREAM ARTS, INC. 3501 CHICAGO AVE S MINNEAPOLIS, MN 55407	20-4451219	501C3	20,000.	0.	N/A	N/A	PROJECT SUPPORT
URBAN FARM AND GARDEN ALLIANCE 855 AURORA AVE SAINT PAUL, MN 55104	47-1603523	501C3	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
URBAN HOMEWORKS, INC P.O. BOX 11276 MINNEAPOLIS, MN 55411-2507	41-1821520	501C3	20,000.	0.	N/A	N/A	PROJECT SUPPORT
WILD PATH COLLECTIVE 1948 60TH AVE OSCEOLA, WI 54020	87-3644112	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
WOMEN'S ENVIRONMENTAL INSTITUTE P.O. BOX 128 NORTH BRANCH, MN 55056-6807	20-0312344	501C3	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
YO MAMA'S HOUSE 3406 UPTON AVE N MINNEAPOLIS, MN 55412	47-4492457	501C3	30,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
ZAMYA THEATER PROJECT 3501 CHICAGO AVE MINNEAPOLIS, MN 55407-2109	83-2374869	501C3	11,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT

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
FOSTER ADVOCATES 2233 UNIVERSITY AVE W, #235 ST. PAUL, MN 55114-1629	82-5411160	501C3	50,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT & PROJECT SUPPORT
REVIVING THE ISLAMIC SISTERHOOD FOR EMPOWERMENT - 1007 W BROADWAY AVE N - MINNEAPOLIS, MN 55411-2503	81-1236990	501C3	80,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT

132241
11-18-21

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:

WITH AN INITIAL APPLICATION, GROUPS MUST SUPPLY A COPY OF THE DETERMINATION LETTER, A LIST OF BOARD MEMBERS, BUDGET AND FINANCIAL INFORMATION, AND A WRITTEN NARRATIVE PROPOSAL ABOUT THE PROJECT. IF AN AWARD IS MADE, GROUPS MUST SIGN A GRANT AGREEMENT INDICATING THE TERMS OF THE GRANT AND REPORTING REQUIREMENTS. GROUPS MUST ALSO PROVIDE EVIDENCE OF CURRENT REGISTRATION WITH THE MINNESOTA ATTORNEY GENERAL'S CHARITY DIVISION. IF FUNDS ARE DISTRIBUTED TO A FISCAL AGENT, A LETTER IS REQUIRED FROM THAT ORGANIZATION INDICATING THE ORGANIZATION'S WILLINGNESS TO SERVE IN THAT CAPACITY.

Part IV Supplemental Information

ORGANIZATIONS RECEIVING FUNDING ARE REQUIRED TO SUBMIT A FINAL REPORT ONE

YEAR AFTER FUNDS WERE RECEIVED. ORGANIZATIONS THAT WERE FUNDED IN THE

PREVIOUS YEAR ARE REQUIRED TO SUBMIT A SIX-MONTH PROGRESS REPORT WITH THEIR

CURRENT APPLICATION. ORGANIZATIONS THAT WERE FUNDED PREVIOUSLY MUST HAVE

ALL PROGRESS REPORTS SUBMITTED BEFORE ANY ADDITIONAL DOLLARS ARE GRANTED.

Multiple horizontal lines for supplemental information input.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2021

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization: **HEADWATERS FOUNDATION FOR JUSTICE**
 Employer identification number: **36-3359386**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MARIA DE LA CRUZ PRESIDENT	(i)	176,844.	0.	0.	0.	38,292.	215,136.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JULIE REMMELTS VP OF OPERATIONS & FINANCE	(i)	146,198.	0.	0.	0.	22,365.	168,563.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**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

2021

Open to Public
Inspection

Name of the organization

HEADWATERS FOUNDATION FOR JUSTICE

Employer identification number

36-3359386

FORM 990, PART III, LINE 1

THROUGH GRANTMAKING AND CAPACITY BUILDING SUPPORT TO GRASSROOTS

ORGANIZATIONS, OUR GOAL IS TO FOSTER JUST AND SUSTAINABLE COMMUNITIES

THAT EMBRACE SOCIAL, RACIAL, ECONOMIC AND ENVIRONMENTAL EQUITY. TO

ACHIEVE THIS GOAL, ALL OF HEADWATERS' PROGRAMS ARE DESIGNED TO ADVANCE

TWO OBJECTIVES: CHANGING SYSTEMS OF POWER, AND INCREASING THE POWER OF

DISENFRANCHISED COMMUNITIES. OUR COMMUNITY-LED GRANTMAKING PROCESS IS

THE TOUCHSTONE OF OUR FOUNDATION.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THE FUND OF THE SACRED CIRCLE: ACCORDING TO NATIVE AMERICANS IN

PHILANTHROPY, FOUNDATIONS INVEST LESS THAN HALF OF ONE PERCENT OF GRANT

DOLLARS IN NATIVE COMMUNITIES. HEADWATERS WORKS TO ADDRESS THIS

IMBALANCE THROUGH THE FUND OF THE SACRED CIRCLE PROGRAM (FSC). GRANTS

SUPPORTS MINNESOTA- AND WISCONSIN-BASED NATIVE AMERICAN ORGANIZATIONS

THAT ADDRESS SYSTEMIC INJUSTICES. GENERAL OPERATING GRANTS SUPPORTS

WORK THAT FOCUSES ON LANGUAGE AND CULTURAL REVITALIZATION; LAND AND

ENVIRONMENTAL RESTORATION; SOVEREIGNTY AND TREATY RIGHTS; AND

SELF-DETERMINATION AND CIVIL RIGHTS. IN FISCAL YEAR 2022, FSC PROGRAM

AWARDED \$760,000 TO 19 ORGANIZATIONS.

EXPENSES \$ 881,371. INCLUDING GRANTS OF \$ 760,000. REVENUE \$ 2,649.

THE COMMUNITY INNOVATION GRANTS PROGRAM (CIG): THIS IS A LONGTIME

PARTNERSHIP WITH THE BUSH FOUNDATION. GRANTS SUPPORT COMMUNITIES TO USE

PROBLEM SOLVING PROCESSES THAT LEAD TO MORE EFFECTIVE, EQUITABLE, AND

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

Schedule O (Form 990) 2021

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SUSTAINABLE SOLUTIONS. THIS PROJECT-SPECIFIC GRANT ALLOWS ORGANIZATIONS

TO INCREASE COLLECTIVE UNDERSTANDING OF AN ISSUE, GENERATE IDEAS,

AND/OR TEST AND IMPLEMENT SOLUTIONS. IN FISCAL YEAR 2022 CIG PROGRAM

AWARDED \$404,188 TO 17 ORGANIZATIONS

EXPENSES \$ 404,188. INCLUDING GRANTS OF \$ 404,188. REVENUE \$ 0.

RAPID RESPONSE GRANTMAKING: IN FISCAL YEAR 2022, OUR RAPID RESPONSE

GRANTMAKING PROGRAM AWARDED \$174,500 TO EIGHT ORGANIZATIONS.

EXPENSES \$ 176,523. INCLUDING GRANTS OF \$ 174,500. REVENUE \$ 200,688.

OTHER PROGRAMS: HEADWATERS HAS ADDITIONAL PROGRAMMING THAT INCLUDES

SUPPORT BEYOND THE DOLLARS, NATIVE STRATEGIES, AND GENERAL PROGRAMMATIC

WORK TO SUPPORT THE MISSION AND VALUES OF ADVANCING EQUITY, DEMANDING

INCLUSION, TRANSFORMING POWER, AND TRUSTING THE COMMUNITY.

EXPENSES \$ 378,714. INCLUDING GRANTS OF \$ 144,429. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 1A:

THE EXECUTIVE COMMITTEE WILL CONSIST OF AT LEAST THE CHAIR AND VICE CHAIR,

OR CO-CHAIRS, SECRETARY, TREASURER, AND ADDITIONAL DIRECTORS APPOINTED BY

THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE SHALL ACT ONLY DURING THE

INTERVALS BETWEEN MEETINGS OF THE BOARD OF DIRECTORS AND SHALL, AT ALL

TIMES, BE SUBJECT TO THE CONTROL AND DIRECTION OF THE BOARD OF DIRECTORS.

DURING SUCH INTERVALS AND SUBJECT TO SUCH CONTROL AND DIRECTION, THE

EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL THE AUTHORITY AND

POWERS OF THE BOARD OF DIRECTORS IN THE MANAGEMENT OF THE AFFAIRS OF THE

CORPORATION, SUBJECT TO SUCH LIMITATIONS AS THE BOARD OF DIRECTORS MAY

IMPOSE. THE EXECUTIVE COMMITTEE SHALL KEEP REGULAR MINUTES OF ITS

PROCEEDINGS AND REPORT THE SAME TO THE BOARD OF DIRECTORS.

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FORM 990, PART VI, SECTION B, LINE 11B:

THE FINANCE COMMITTEE REVIEWS THE PREPARED FORM 990 AND THEN FORWARDS TO
THE FULL BOARD FOR THEIR CONSIDERATION AND APPROVAL.

FORM 990, PART VI, SECTION B, LINE 12C:

AS NEW BOARD AND KEY STAFF MEMBERS JOIN THE ORGANIZATION, THEY COMPLETE THE
CONFLICT OF INTEREST FORM. AT THE START OF THE NEW FISCAL YEAR, ALL BOARD
MEMBERS AND KEY STAFF MEMBERS COMPLETE THE CONFLICT OF INTEREST FORMS. A
SUMMARY OF THE CONFLICTS IS GIVEN TO THE BOARD CO-CHAIRS.

ANY CONTRACTS OR PAYMENTS MADE TO/WITH DIRECTORS MUST BE APPROVED BY THE
BOARD. IF ANY CONFLICT OF INTEREST OR POTENTIAL CONFLICT OF INTEREST ARISES
AFTER THE ANNUAL FORM IS FILLED OUT, THE INTERESTED DIRECTOR OR ANY
DIRECTOR WITH KNOWLEDGE OF SUCH CONFLICT SHALL CALL IT TO THE ATTENTION OF
THE BOARD PRIOR TO BOARD ACTION ON A DECISION INVOLVING THE CONFLICT OF
INTEREST. WHEN THERE IS DOUBT AS TO WHETHER A CONFLICT OF INTEREST EXISTS,
THE MATTER SHALL BE RESOLVED BY A VOTE OF THE BOARD, EXCLUDING THE PERSON
WHO IS THE SUBJECT OF THE POSSIBLE CONFLICT OF INTEREST. IF A CONFLICT OF
INTEREST DOES EXIST, THE BOARD MAY STILL AUTHORIZE, APPROVE, OR RATIFY A
CONTRACT OR TRANSACTION IN GOOD FAITH BY THE AFFIRMATIVE VOTE OF A MAJORITY
OF DIRECTORS; WITH THE CONFLICTED BOARD MEMBER ABSTAINING FROM THE VOTE.
THE DIRECTOR WHO HAS A CONFLICT SHALL NOT PARTICIPATE IN THE BOARD'S
DISCUSSION OF THE MATTER EXCEPT TO DISCLOSE MATERIAL FACTS AND TO RESPOND
TO QUESTIONS. SUCH PERSON SHALL NOT ATTEMPT TO EXERT HIS OR HER PERSONAL
INFLUENCE WITH RESPECT TO THE MATTER, EITHER AT OR OUTSIDE THE MEETING. THE
DIRECTOR HAVING SUCH A CONFLICT SHALL NOT PARTICIPATE IN THE FINAL
DELIBERATION OR DECISION REGARDING THE MATTER UNDER CONSIDERATION AND SHALL
RETIRE FROM THE ROOM IN WHICH THE BOARD IS MEETING AFTER PROVIDING THE

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BOARD WITH ANY AND ALL RELEVANT INFORMATION, ANY DIRECTOR DISCLOSING A
 CONFLICT OF INTEREST MAY BE COUNTED IN DETERMINING THE PRESENCE OF A QUORUM
 AT A MEETING OF THE BOARD OR A COMMITTEE THEREOF. THE MINUTES OF THE
 MEETING OF THE BOARD OR COMMITTEE SHALL REFLECT THAT THE CONFLICT OF
 INTEREST WAS DISCLOSED AND THAT THE INTERESTED DIRECTOR WAS NOT PRESENT
 DURING THE FINAL DISCUSSION OR VOTE AND DID NOT VOTE ON THE MATTER.

FORM 990, PART VI, SECTION B, LINE 15:

CHANGES TO THE PRESIDENT'S SALARY SHALL BE MADE BY THE EXECUTIVE COMMITTEE.
 IN REVIEWING THE COMPENSATION OF THE PRESIDENT, THE EXECUTIVE COMMITTEE OF
 THE HEADWATERS BOARD OF DIRECTORS UTILIZES THE FOLLOWING PROCESS:

1) IMPARTIAL DECISION MAKERS - THE COMPENSATION ARRANGEMENT MUST BE
 APPROVED IN ADVANCE (BEFORE ANY PAYMENT IS MADE) BY THE EXECUTIVE COMMITTEE
 COMPOSED ENTIRELY OF INDIVIDUALS WHO DO NOT HAVE A CONFLICT OF INTEREST
 WITH RESPECT TO THE COMPENSATION ARRANGEMENT.

2) COMPARABILITY DATA - WHEN THE EXECUTIVE COMMITTEE IS CONSIDERING
 COMPENSATION OF THE PRESIDENT, IT MUST RELY ON COMPARABILITY DATA THAT
 DEMONSTRATES THE FAIR VALUE OF THE COMPENSATION IN QUESTION. THIS DATA MAY
 INCLUDE THE FOLLOWING

- EXPERT COMPENSATION STUDIES BY INDEPENDENT FIRMS.
- WRITTEN JOB OFFERS FOR POSITIONS AT SIMILAR ORGANIZATIONS.
- DOCUMENTED TELEPHONE CALLS AND EMAILS ABOUT SIMILAR POSITIONS AT BOTH
 NON-PROFIT AND FOR-PROFIT ORGANIZATIONS.
- INFORMATION OBTAINED FROM THE IRS FORM 990 FILINGS OF SIMILAR
 ORGANIZATIONS
- USE OF SALARY SURVEYS NON-PROFIT AND FOUNDATION WORLD.

EXECUTIVE COMMITTEE PRESENTS FINAL DECISIONS AND ARE DOCUMENTED THROUGH
 BOARD AND COMMITTEE MINUTES. THIS IS CONDUCTED ANNUALLY AND LAST OCCURRED

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IN FISCAL YEAR 2022.

STAFF SALARIES ARE DETERMINED BY PERFORMANCE EVALUATION, YEARS OF EXPERIENCE, EDUCATION, SUPERVISOR DUTIES, AND ENSURING ALL POSITIONS ARE PAID AT LEAST WITHIN 50-75% COMPARED TO OTHER NONPROFIT ORGANIZATIONS BASED ON BUDGET, ASSETS, LOCATION, AND FOCUS AREA. THE DIRECT SUPERVISOR REVIEWS PERFORMANCE AND RECOMMENDS COMPENSATION BASED ON THE SALARY RANGES OF THE ORGANIZATION AND THE PRESIDENT APPROVES ALL SALARIES. THE VP OF OPERATIONS AND FINANCE CONDUCTS SALARY RESEARCH ANNUALLY TO DETERMINE SALARY RANGES FOR THE ORGANIZATION. SALARIES ARE DOCUMENTED IN THE APPROPRIATE PERSONNEL FILE WITH THE REQUEST MEMO AND THE SIGNED SALARY AUTHORIZATION APPROVED BY THE PRESIDENT. THIS IS CONDUCTED ANNUALLY FOR ALL STAFF AND WAS LAST COMPLETED IN FISCAL YEAR 2022.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE ON THE WEBSITE, FOR PERSONAL INSPECTION IN THE OFFICE, OR MAILED UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN BENEFICIAL INTEREST IN THE MINNEAPOLIS FOUNDATION	-150,699.
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FORM 990, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.