

## Form 990-EZ

## **Short Form** Return of Organization Exempt From Income Tax

OMB No. 1545-0047 2020

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information. Open to Public Inspection

	partment of the Treasury ernal Revenue Service  Go to www.irs.gov/Form990EZ for instructions and the latest information.					Inspection		
	A For the 2020 calendar year, or tax year beginning , 2020, and ending						. 20	
	Check if ap		C Name of organization		9	D Emplo	ver identi	fication number
	Address ch		Conscious Connections Foundation				-160219	
=	Name char	-	Number and street (or P.O. box if mail is not delivered to street address)	Roo	m/suite	E Telep	hone num	nber
=	Initial return	-						
$\overline{\sqcap}_{\mathfrak{l}}$	Final return	/terminated	PO Box 342			(50	9)499-3	3320
$\bar{\sqcap}$	Amended r	eturn	City or town, state or province, country, and ZIP or foreign postal code	II.		F Group		
$\bar{\sqcap}$	Application	pending	Spokane, WA 99210			Numb	er ►	
		ing Method:	X Cash			H Check ►	if the	e organization is not
	Website:	•	consciousconnectionsfoundation.org		-	required to	_	-
J -	Tax-exe		heck only one) -     501(c)(3)   501(c)( )	1) or	527			, or 990-PF).
			☐ Corporation ☐ Trust ☐ Association ☐ Othe			`		,
		_	7b to line 9 to determine gross receipts. If gross receipts are \$200,000 o	r more	e, or if to	otal assets		
			\$500,000 or more, file Form 990 instead of Form 990-EZ				▶ \$	62,939
<u> </u>	art I	( ,,	e, Expenses, and Changes in Net Assets or Fund Balanc			the instruction	ons for F	
			the organization used Schedule O to respond to any question in		•			,   <b>\sqrt</b>
_	1		s, gifts, grants, and similar amounts received				1	60,554
	2		rvice revenue including government fees and contracts				2	
	3	-					3	
	4		ncome				4	195
	5a		int from sale of assets other than inventory	5a		2,190		
			r other basis and sales expenses	5b		2,214		
								(24)
	6							(= .)
		a Gross income from gaming (attach Schedule G if greater than						
Φ				6a				
aun	b				utions		_	
Revenue			sing events reported on line 1) (attach Schedule G if the	00111111	ations			
ш			gross income and contributions exceeds \$15,000)	6b				
			expenses from gaming and fundraising events	6c				
			or (loss) from gaming and fundraising events (add lines 6a and 6b and su					
	"			abtiqui			6d	
		•	of inventory, less returns and allowances	7a			- Ou	
			• '	7b				
		b Less: cost of goods sold						
	8	•	ue (describe in Schedule O)		•••		7c 8	
	9		ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			•	9	60,725
_	10		similar amounts paid (list in Schedule O)				10	75,040
	11		d to or for members				11	70,040
	12		ner compensation, and employee benefits				12	
S	13		I fees and other payments to independent contractors				13	
Expenses	14		rent, utilities, and maintenance				14	
.xb	15		Slications, postage, and shipping				15	
Ш	16	•					16	1,196
	17	,				17	76,236	
	18		deficit) for the year (subtract line 17 from line 9)			<u> </u>	18	(15,511)
"	19	•	or fund balances at beginning of year (from line 27, column (A)) (must agr		h		10	(10,011)
sets	19			ee wil	11		19	1/7 000
t As	20	-	figure reported on prior year's return)				20	147,883
Net Assets	20	20 Other changes in net assets or fund balances (explain in Schedule O)						132 372

Form 990-EZ (2020) Conscious Connections Fo	undation		47-16	021	90 Page 2
Part II Balance Sheets (see the instructions for Part	t II)				
Check if the organization used Schedule O to	o respond to any qu	estion in this Part I	<u> </u>		X
			(A) Beginning of year		(B) End of year
22 Cash, savings, and investments			147,883	22	132,372
23 Land and buildings			0	23	0
24 Other assets (describe in Schedule O)			0	24	0
25 Total assets			147,883	25	132,372
26 Total liabilities (describe in Schedule O)			0	26	0
27 Net assets or fund balances (line 27 of column (B) must ag	ree with line 21)		147,883	27	132,372
Part III Statement of Program Service Accomplishing	nents (see the instru	ctions for Part III)			Гупопосо
Check if the organization used Schedule O	to respond to any q	uestion in this Part	III	(D	Expenses
What is the organization's primary exempt purpose? See Sche	edule O				quired for section
Describe the organization's program convice accomplishments for	er analy of its three large	oct program comicos			(c)(3) and 501(c)(4)
Describe the organization's program service accomplishments for as measured by expenses. In a clear and concise manner, descr				_	inizations; optional for
persons benefited, and other relevant information for each progra		ou, the Humber of		othe	rs.)
28 Keeping Girls and Marginalized Children in School					
			_		
(Grants \$ 15.316 ) If this amo	unt includes foreign gra	nts, check here	<b>&gt;</b> \( \Bar{\Bar{\Bar{\Bar{\Bar{\Bar{\Bar{	28a	0
29 Girl's and Women's Menstrual Hygiene Education	ant moradoo for orgin gre	into, oriook floro	·····	200	
23 On 3 and Women's Mensural Hygiene Education					
(Cranta ft 2 400 ) If this ama	untingludes foreign are	nto obook boro		200	
-	unt includes foreign gra	nts, check here		29a	0
30 Disaster Relief					
-					
(0 , 0 ) (11)					
· · · · · · · · · · · · · · · · · · ·	unt includes foreign gra	nts, check here	▶ □	30a	
					ee SERVICES
	unt includes foreign gra		<u> </u>	31a	
32 Total program service expenses (add lines 28a through 31a			<u> </u>	32	<u> </u>
Part IV List of Officers, Directors, Trustees, and Key Emp			ted - see the instruction	ons fo	or Part IV)
Check if the organization used Schedule O to resp	oond to any question in	this Part IV			
	(b) Average	(c) Reportable	<ul><li>(d) Health benefits, contributions to employe</li></ul>		(e) Estimated amount of
(a) Name and title	hours per week	compensation			
		(Forms W-2/1099-MISC)	benefit plans, and	e '	other compensation
	devoted to position	· ·	' '	e '	
Denise Attwood	devoted to position	(Forms W-2/1099-MISC)	benefit plans, and	e '	
Denise Attwood Chair/President	devoted to position 5.00	(Forms W-2/1099-MISC)	benefit plans, and		
Chair/President Cameron Conner	·	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans, and deferred compensation		other compensation
Chair/President Cameron Conner Co-Vice Chair/Vice-President	·	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans, and deferred compensation	)	other compensation
Chair/President Cameron Conner	5.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans, and deferred compensation	)	other compensation
Chair/President Cameron Conner Co-Vice Chair/Vice-President	5.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans, and deferred compensation	)	other compensation
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman	5.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0	benefit plans, and deferred compensation	)	other compensation  0
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck	5.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0	benefit plans, and deferred compensation	)	other compensation  0
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary	5.00 1.00 3.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0	benefit plans, and deferred compensation	)	other compensation  0  0
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer	5.00 1.00 3.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0	benefit plans, and deferred compensation	)	Other compensation  O  O  O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President	5.00 1.00 3.00 1.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0	benefit plans, and deferred compensation  C	)	other compensation  0  0
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell	5.00 1.00 3.00 1.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0	benefit plans, and deferred compensation  C  C  C  C	)	O O O O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member	5.00 1.00 3.00 1.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0	benefit plans, and deferred compensation  C	)	Other compensation  O  O  O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard	5.00 1.00 3.00 1.00 1.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0  0	benefit plans, and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		other compensation  0  0  0  0  0  0
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard Board Member	5.00 1.00 3.00 1.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0	benefit plans, and deferred compensation  C  C  C  C		O O O O O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard Board Member Colleen Cahill	5.00 1.00 3.00 1.00 1.00 1.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0  0  0  0	benefit plans, and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		Other compensation  O  O  O  O  O  O  O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard Board Member Colleen Cahill Board Member/web designer	5.00 1.00 3.00 1.00 1.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0  0	benefit plans, and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		other compensation  0  0  0  0  0  0
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard Board Member Colleen Cahill Board Member/web designer Golie Jansen	5.00 1.00 3.00 1.00 1.00 1.00 2.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0  0  0  0	benefit plans, and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		Other compensation  O  O  O  O  O  O  O  O  O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard Board Member Colleen Cahill Board Member/web designer Golie Jansen	5.00 1.00 3.00 1.00 1.00 1.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0  0  0  0	benefit plans, and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		Other compensation  O  O  O  O  O  O  O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard Board Member Colleen Cahill Board Member/web designer Golie Jansen	5.00 1.00 3.00 1.00 1.00 1.00 2.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0  0  0  0	benefit plans, and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		Other compensation  O  O  O  O  O  O  O  O  O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard Board Member Colleen Cahill Board Member/web designer Golie Jansen	5.00 1.00 3.00 1.00 1.00 1.00 2.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0  0  0  0	benefit plans, and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		Other compensation  O  O  O  O  O  O  O  O  O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard Board Member Colleen Cahill	5.00 1.00 3.00 1.00 1.00 1.00 2.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0  0  0  0	benefit plans, and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		Other compensation  O  O  O  O  O  O  O  O  O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard Board Member Colleen Cahill Board Member/web designer Golie Jansen	5.00 1.00 3.00 1.00 1.00 1.00 2.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0  0  0  0	benefit plans, and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		Other compensation  O  O  O  O  O  O  O  O  O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard Board Member Colleen Cahill Board Member/web designer Golie Jansen	5.00 1.00 3.00 1.00 1.00 1.00 2.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0  0  0  0	benefit plans, and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		Other compensation  O  O  O  O  O  O  O  O  O
Chair/President Cameron Conner Co-Vice Chair/Vice-President Austin Zimmerman Secretary Saskia Peck Treasurer James Conner Co-Vice Chair/Vice-President Martha Newell Board Member Kimberly Maynard Board Member Colleen Cahill Board Member/web designer Golie Jansen	5.00 1.00 3.00 1.00 1.00 1.00 2.00	(Forms W-2/1099-MISC) (if not paid, enter -0-)  0  0  0  0  0  0	benefit plans, and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		Other compensation  O  O  O  O  O  O  O  O  O

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Pai	t V Other Information (Note the Schedule A and personal benefit contract statement requirements in the			
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
	detailed description of each activity in Schedule O	33		Х
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O. See instructions	34		Х
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
00 u	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		Х
h	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
b		330		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	250		V
00	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		Х
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			.,
	during the year? If "Yes," complete applicable parts of Schedule N	36		Х
	Enter amount of political expenditures, direct or indirect, as described in the instructions	_		
	Did the organization file Form 1120-POL for this year?	37b		Х
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		Х
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ► ; section 4912 ► ; section 4955 ►			
b				
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		Х
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			, ,
	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d				
u				
_	40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	40-		V
	transaction? If "Yes," complete Form 8886-T	40e		Х
41	List the states with which a copy of this return is filed   WA			
42 a		199-332	20	
	Located at ► 13212 South Austin Road, Spokane, WA ZIP + 4 ► 99224	1		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		Х
	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		Χ
	If "Yes," enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041-Check here		<b>&gt;</b>	
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44a		Х
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			
5	completed instead of Form 990-EZ	44b		Х
С	Did the organization receive any payments for indoor tanning services during the year?	44c		X
		-140		^
u	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	44-2		
4-	explanation in Schedule O	44d		V
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			.,
	Form 990-EZ. See instructions	45b		Χ

, ,					, -	
	Denise Attwood					
Sign	Signature of officer			Date		
Here	Denise Attwood, Board Chair					
	Type or print name and title					
•	Print/Type preparer's name	Preparer's signature	Date		Check if	PTIN
Paid	Fred Peck, CPA		05-17-2021		self-employed	P00622562
Preparer	Firm's name    Kingfisher Financial PBC			Firm's EIN ▶		
Use Only	Firm's address ► 331 Forest Glen Road					
	Priest River ID 83856			Phone	e no. 509-87	9-4716
May the IRS	discuss this return with the preparer shown	n above? See instructions			<b>&gt;</b>	X Yes No
EEA	<u> </u>					Form 990-EZ (2020)

#### SCHEDULE A (Form 990 or 990-EZ)

## Public Charity Status and Public Support

2020

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Employer identification number Name of the organization Conscious Connections Foundation 47-1602190 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. Enter the number of supported organizations ..... Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes (A) (B) (C) (D) (E)

Total

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) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") ..... 39,448 54,864 85,031 62,757 60,555 302,655 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 ...... Total. Add lines 1 through 3 ...... 39,448 54,864 85,031 62,757 60,555 302,655 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) ...... Public support. Subtract line 5 from line 4 302,655 Section B. Total Support (b) 2017 (d) 2019 Calendar year (or fiscal year beginning in) (a) 2016 (c) 2018 (e) 2020 (f) Total 7 Amounts from line 4..... 39,448 54,864 85,031 62,757 60,555 302,655 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ..... 216 195 414 Net income from unrelated business activities, whether or not the business is regularly carried on ..... 255 17 327 55 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ..... 11 Total support. Add lines 7 through 10 ... 303,396 12 Gross receipts from related activities, etc. (see instructions) ...... 13 First five 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 14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) ....... 14 99.76 % 15 Public support percentage from 2019 Schedule A, Part II, line 14 ...... 93.01 16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ..... X b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ..... 17a 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ..... b 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ..... 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 .....

Page 3

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.)

Sec	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Se	ction B. Total Support		_				
Cal	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the organ	nization's first,	second, third, t	fourth, or fifth t	ax year as a se	ection 501(c)(3	3)
	organization, check this box and stop here						<b>▶</b> □
-	ction C. Computation of Public Support P						
15	Public support percentage for 2020 (line 8, c	olumn (f), divi	ded by line 13,	column (f))		15	%
<u>16</u>	Public support percentage from 2019 Sched	ule A, Part III,	line 15			16	%
Se	ction D. Computation of Investment Incor	ne Percentaç	ge				
	Investment income percentage for 2020 (line		• •			17	%
	Investment income percentage from 2019 S					18	%
19a	33 1/3% support tests - 2020. If the organiza	ation did not ch	neck the box or	n line 14, and li	ne 15 is more	than 33 1/3%,	and line
	17 is not more than 33 1/3%, check this box	and stop here	. The organiza	tion qualifies a	s a publicly su <sub>l</sub>	oported organ	ization ▶ 🗌
b	33 1/3% support tests - 2019. If the organiza	ation did not ch	neck a box on li	ine 14 or line 1	9a, 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 orga	nization qualifi	es as a publicly	y supported or	ganization 🕨 🗌
20	Private foundation. If the organization did no	t check a box	on line 14, 19a	i, or 19b, check	k this box and	see instruction	s ▶ 🗆

Part IV Supporting

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

- Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
   Did the organization have any supported organization that does not have an IRS determination of status
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- 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)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- 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?
- 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? If "Yes," provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 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)? If "Yes," answer 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	0-		
	3a		
	3b		
)	30		
	3c		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
	10b		
A (For	m 990 o	r 990-E2	Z) 2020

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	44-		
<u>Soot</u>	detail in Part VI.	11c		
Seci	tion B. Type I Supporting Organizations	-	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		163	NO
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u>Caat</u>	the supported organization(s).	1		
Seci	tion D. All Type III Supporting Organizations		V	NIa
4	Did the expenization provide to each of its supported expenizations, by the last day of the fifth month of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have	2		
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	structi	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (	see in		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,	Zu		
٥	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Conscious Connections Foundation

EEA Schedule A (Form 990 or 990-EZ) 2020

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization

Income tax imposed in prior year

(see instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

5

6

Par	t V Type III Non-Functionally Integrated 509(a)(3) S	upporting Organization	ons (continued)		
Sec	tion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exem	pt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt organizations, in excess of income from activity	purposes of supported		2	
3	Administrative expenses paid to accomplish exempt purposes	s of supported organizat	ions	3	
<del></del>	Amounts paid to acquire exempt-use assets	s of supported organizat	10113	4	
<del>-</del> 5	Qualified set-aside amounts (prior IRS approval required) - pr	ovide details in Part \//\		5	
	Other distributions (describe in Part VI). See instructions.	Ovide details in Fait Vij		6	
7	Total annual distributions. Add lines 1 through 6.			7	
	Distributions to attentive supported organizations to which the	organization is respon	sivo		
8		organization is respons	Sive	0	
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		(")	10	/···\
Sec	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	;	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
	From 2016				
	From 2017				
	From 2018				
	From 2019				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
<u>;;</u>	Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
<u></u>	Distributions for 2020 from				
7	Section D, line 7:				
	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
5	any. Subtract lines 3g and 4a from line 2. For result				
	•				
	greater than zero, explain in Part VI. See instructions.  Remaining underdistributions for 2020. Subtract lines 3h				
6	-				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8_	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
d	Excess from 2019				

e Excess from 2020

Schedule A (For	rm 990 or 990-EZ) 2020 Page 8
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.)
•	

lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)				
				_

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization Conscious Connections Foundation 47-1602190 Organization type (check one):

o.gaa					
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 cove	ered by the General Rule or a Special Rule.				
Note: Only a section 501(c)(7), (8 instructions.	), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
General Rule					
	Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 pperty) from any one contributor. Complete Parts I and II. See instructions for determining a utions.				
Special Rules					
regulations under section 13, 16a, or 16b, and that	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 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
contributor, during the ye contributions totaled mor during the year for an ex General Rule applies to the contributions.	ribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ear, contributions exclusively for religious, charitable, etc., purposes, but no such re than \$1,000. If this box is checked, enter here the total contributions that were received acclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the this organization because it received nonexclusively religious, charitable, etc., contributions during the year				
990-EZ, or 990-PF), but it must a	o't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 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 rtify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

Name of organization Employer identification number
Conscious Connections Foundation 47-1602190

Part I	art 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_	Caroline and Willi Kurtz  645 Beverly Avenue  Missoula MT 59801	\$ \$5,000	Person 🔀 Payroll 🔲 Noncash 🗍 (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

47-1602190 Conscious Connections Foundation 01. List of grants and similar amounts paid (Part I, line 10) Keeping Girls and Marginalized Children in School Activity Grantee Grant Recipients-see details below Relationship Grant Recipients-see details below Amount 15,852 Disaster Relief Activity Grantee Grant Recipients-see details below Relationship Grant Recipients-see details below Amount 51,113 Girl's and Women's Menstrual Hygeine Education Activity Grant Recipients-see details below Grantee Grant Recipients-see details below Relationship Amount 3,400 Activity Other Programs Grantee Grant Recipients-see details below Relationship Grant Recipients-see details below 4,675 Amount 02. Description of other expenses (Part I, line 16) Description Amount Bank Fees 514

Schedule O (Form 990 or 990-EZ) (2020) Page 2 Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 Administrative expense 682 03. Other program services (Part III, line 31) 01. Other Program services (Part III, line 31) a. See detail below 04. Part I, response or note to any other line in Part I 02. Description of other Expenses (Part I, line 16) a. Bank Fees: \$513.55 b. Loss of the sale of Stock: \$23.86 c. Administrative Expense: \$682.26 Part 1 Line 16: Other expenses-\$1195.81 a. Administrative fees-\$522.26 b. Bank, Credit Card and Brokerage fees-\$513.55 c. Corporate filing fees-\$160 05. Part II, response or note to any other line in Part II CCF Schedule O-990 EZ- 2020 01. List of grants and similar amounts paid (Part 1, line 10) a. Activity: Keeping Girls and Marginalized Children in School i. Grantee: Grant Recipients-see details below ii. Relationship: Grant Recipients-see details below iii. Amount: \$15,316 b. Activity: Disaster Relief Covid-19 i. Grantee: Grant Recipients-see details below ii. Relationship: Grant Recipients-see details below

iii. Amount: \$51,113

Schedule O (Form 990 or 990-EZ) (2020) Page 2 Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 c. Activity: Girl's and Women's Menstrual Hygiene Education i. Grantee: Grant Recipients-see details below ii. Relationship: Grant Recipients-see details below iii. Amount: \$3400 d. Activity: Other Programs i. Grantee: Grant Recipients-see details below ii. Relationship: Grant Recipients-see details below iii. Amount: \$5211.24 Part II Line 22A: Cash savings and investments beginning of 2020-\$147,883 Breakdown of 2020 starting funds are as follows: 1) Restricted Funds: \$64,144 (totals from last year's ending 2019 balance schedule O) a. Baseri Clinic Funds donated for sole use of maintenance, salaries and normal operating expenses-\$20,727.36 b. Earthquake/Disaster Relief funds-\$34,320.54 i. Baseri disaster relief-\$12,844.64 ii. General disaster relief-\$21,475.90 iii. ACP Covid Survival fund (new in 2020)-\$0 c. Power of 5 Educational stipends-\$5,733.38 d. Girl's Higher Education class 11/12 scholarships- \$1085.87 e. Girl's Education Administrator-\$50 f. Girl's and Women's Menstrual Hygiene Education programs-\$0 g. Ghatbesi Girl's higher education class 11/12 Scholarships-\$2210.76 h. Purni Tamang-individual scholarship award-\$0 i. Solar Light purchases-\$16 2) General Fund (non-restricted)-\$83,739 Part II Line 22A: Cash savings and investments end of 2020-\$132,372

1) Restricted Funds:

Schedule O (Form 990 or 990-EZ) (2020) Page 2 Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 a. Baseri Clinic Funds donated for sole use of maintenance, salaries and normal operating expenses-\$18,331.20 b. Earthquake/Disaster Relief funds-\$31,092.47 (sum of i-iv below) i. Baseri earthquake/disaster relief-\$12,665.28 ii. General earthquake/disaster relief-\$10,875.98 iii. Emergency relief-\$2201.21 iv. ACP Covid Survival Fund-\$5350 c. Power of 5 Educational stipends-\$465.38 d. Girl's Higher Education class 11/12 scholarships- \$535.87 e. Girl's Education Administrator-\$50 f. Individual Scholarship fund- (Purni Tamang)-\$0 g. Girl's and Women's Menstrual Hygiene Education programs-\$1584.00 h. Ghatbesi Girl's higher education class 11/12 Scholarships-\$3330.76 i. Solar Light purchases-\$16 3) General Fund (non-restricted)-\$76,966.32 Part III, response or note to any other line in Part III 01. Part III, response or note to any other line in Part II Short Form Part 1 Line 10: Grants and Similar Amounts Paid- \$75,040.24 a. Line 28: Keeping Girls and Marginalized Children in School-\$15,316 a. Power of 5 Child Education Fund-\$11,316 b. Girl's Higher Education Fund Scholarships (aka Joy Attwood Scholarship Fund)-\$2,000 c. Girl's Education Program Administrator-\$2,000

b. Line 29: Disaster Relief Covid-19- \$51,113 (see breakdown below)

b. General emergency relief due to Covid-19 Lockdown-\$11,113

a. ACP grant to cover operational expenses during Covid-19 Lockdown- \$40,000

a. Line 30: Girl's and Women's Menstrual Hygiene Education programs-\$3400

Schedule O (Form 990 or 990-EZ) (2020) Page 2 Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 a. Reusable menstrual pad kit production for distribution during Covid-19- 400 kits b. Line 31: Other Programs-\$5211.24 a. Rural Healthcare-\$2495.88 b. Clinic Repair and upkeep-\$179.36 c. Girl's leadership training-\$2000 d. Individual Higher Education Award (aka Purni Tamang scholarship)- \$536 Part III: What is the organization's primary exempt purpose? CCF's primary exempt purpose is to raise funds to provide educational stipends and Scholarships, health care, economic skills development and facilities improvement to Marginalized individuals and their families in Nepal. Line 28 Program 1: Keeping Girls in School- Power of 5 educational stipends (grades K-10) & College Scholarships (grades 11/12) at ACP, along with mentoring and program assistance-\$15,316 1) Grantee #1: Association for Craft Producers-\$15,316 Association for Craft Producers, a registered Nepali Non-profit Grantee Address: GPO Box 3701 Ravi Bhawan Mode, Kathmandu, Nepal Grantee Phone: 977-1-427-5108 Grantee email: program@craftacp.org.np Executive Director: Ms. Meera Bhatterai, Social Program Director: Ms. Revita Shrestra, Assistant Social Program Director/Mentor: Ms. Prastuti Dhakal a. Grantee Educational Programs supported: i. Power of 5-117 (K-10) children in need were able to stay in school for one more year (remotely) \$11,316 in educational stipends distributed. \$11,316 grant ii. College Scholarship ACP (aka Joy Attwood College Scholarships)-three need and merit based girls competed for and were awarded scholarships to attend class 11/12 (college in Nepal)- \$2,000 grant

iii. Mentoring and program administrator-120 students and their parents gained access to a

college educated female administrative assistant and mentor who provides educational

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Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 resources and mentoring to those who have little knowledge of how to navigate educational systems. This was extremely important during Covid-19 & lockdown since much schooling had to be done remotely. \$2,000 grant b. Program Purpose: CCF understands the positive change that comes from empowering women and educating their daughters in Nepal. We have seen a lack of infrastructural support for women who are often the sole income earners for their entire extended families and the impact that this has had on their daughters, many of whom are taken out of school due to lack of sufficient family finances. The longer a girl is able to stay in school the longer she remains unmarried and the more choice she has in life. Around the world, girls face complex physical, cultural and financial barriers in accessing education. As a girl grows older the fight to get an education becomes even harder. Her family must have the ability to pay school fees and be willing to do so. The stipend program that CCF funds through ACP allows women to keep their daughter in school without drawing resources from the family. It has become one of the most valued social benefit programs at this organization. With the rise the Covid-19 virus and the subsequent lockdowns in Nepal it was even more imperative that these girls stay connected & in school, even if virtually, via the stipend program. One of the most difficult things about Covid-19 is that as family resources dwindled one of the first things to be cut were family investments in girl's education. With the stipend families were able to keep girls in school without sacrificing their own depleted family funds. ACP Child Education Program (aka Power of 5 program): \$11,316 grant Every year CCF raises funds and makes a grant to ACP for their educational stipend program as well as for an endowment for the future of the program. ACP administers the fund to families that are struggling to keep their children in school, girls are the target, but boys will not be left out if there is need. For the stipend, each eligible family receives the stipend and in return provides monthly evidence of the child's attendance and progress in school. If the child is struggling or the family needs help with study issues or

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Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 navigating the system, the administrative assistant/mentor is there to provide the family with resources. The result from this stipend is that 120 children (with an emphasis on girls) are staying in school. CCF's focus is keeping girls in school but some funding does go to boys education as long as the girls of the families in need are enrolled first. CCF and ACP have a goal to make this program financially stable so that each child that receives a stipend is given the chance to remain in school for the full 10 classes (if there is need). This has required ACP and CCF to plan and raise funds for an endowment. 2020 was the final year of CCF's commitment to raise extra funds for the endowment (\$10,600 for future continuation and expansion of the program) along with the \$14,040 for 117 students+ 360 yearly awards program. In 2020 due to Covid-19 and the pressing need for funds to deal with that crisis, CCF and ACP together decided that CCF would only raise funds to cover the educational stipends and not raise funds for the endowment. Instead we would do fundraising to help ACP as an organization stay alive during the extensive lockdown due to Covid-19. Therefore, in 2020 CCF only raised \$11,316 for the educational stipends. Girl's Higher Education Program (aka Joy Attwood scholarship program) Class 11/12: \$2000 grant. This program is a merit and need based scholarship program that CCF started to fund in 2015 to encourage girls who had participated in the Power of 5 program (K-10) to continue on to class 11/12. This program provides 3 scholarships to outstanding girl scholars who have come out of the Power of 5 program and demonstrate need along with the ability and commitment to continue on with their education. The top scholar is provided with a \$1000 scholarship and the 2nd and 3rd place recipients each receive a \$500 scholarship. The emphasis of the scholarship is to provide opportunity to the most outstanding girls scholars with the greatest need but all applicants must have passed their Student Leaving Certificate (SLC) exams with distinction (80%). Since 2015 this higher education scholarship has benefitted 21 girls, some of whom have gone on to University. The girls who receive the scholarship are celebrated in the community and act as examples and

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Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 mentors to the younger children in the Power of 5 program, showing them the abilities and accomplishments of girls who are given the chance to have an education. Child Education Administrator/Mentor Program: \$2,000 grant The funds granted for ACP to hire a mentor/program assistant came from the need for ACP to have more attention focused on the girls and children receiving the Power of 5 stipends and College Scholarships. Many of the girls involved in these programs live in families where many of the women and sometimes the men have very little schooling, if any at all. The difficulty then is that often no one in the family is familiar with navigating the educational system, scheduling time for homework, completing homework and finding resources for future learning. ACP uses the funds provided by CCF to hire a college educated young woman who can be a resource for the children and their families as well as help CCF understand how the program is performing. Prastuti Dhakal is the current assistant and loves helping the girls and their family. Her reporting helps us to provide information about the program to our donors as well. Line 29: Program #2 Covid-19 Disaster Relief -\$51,113 Grantee #1: Association for Craft Producers (ACP)-\$40,000 Association for Craft Producers, a registered Nepali Non-profit Grantee Address: GPO Box 3701 Ravi Bhawan Mode, Kathmandu, Nepal Grantee Phone: 977-1-427-5108 Grantee email: program@craftacp.org.np Executive Director: Ms. Meera Bhatterai, Social Program Director: Ms. Revita Shrestra, Grant: Association for Craft Producers Operational support- \$40,000 Covid-19 disaster relief-operational expenses Program Purpose: ACP is CCF's longest and oldest partner and is where the funds for the Power of 5 and Joy Attwood Scholarship are held as well as the funds for the educational program's endowment. In June, 2020, Meera Bhatterai founder and Executive Director of the

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Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 non-profit ACP sent a letter explaining the dire situation that ACP faced due to the Covid-19 virus and subsequent lockdown. Their existence as an organization was threatened and required outside funding to survive. Since 1986 ACP has helped 1000's of low-income women in Nepal gain access to income, skills development, social benefits and training. Since their inception ACP has provided financial and producer benefits beyond wages and far in excess of what the Nepali government requires. Through ACP women have been given fair wages, a voice and economic control of their resources and as a result have done amazing things for their children and their communities. Through CCF's partnership they have been able to help families keep hundreds of children in school and helped to launch CCF's menstrual hygiene trainings. ACP's work is transformational, long term, focused on women & girls and fully in line with CCF's mission. The Covid-19 pandemic put ACP into a crisis situation in June 2020 when Nepal imposed a more than 80 day lockdown. Since 4 years after their inception in 1984 ACP has been financially self-sufficient and for 30+ years they have been reliant on their own income source for day to day operations. Over the course of their time in operation, mostly on their own resources, they have assisted thousands of low-income artisans, predominantly women to have dignified lives and a stronger voice. Through no fault of their own, however, when Covid-19 hit and the lockdown occurred they faced huge obstacles with far-reaching and devastating consequences to the continuation of their non-profit. CCF recognizes that ACP is an organization that is working tirelessly to create new systems of engagement and financial means for women who otherwise have not had that ability. It is Nepali led and directed and is vocal in the women's rights and fair trade movements in Nepal. They believe strongly in the education and advancement of women and girls and have been a trusted partner of CCF's since our inception. CCF has raised over \$100,000 for an endowment for their educational programs and if their organization collapses we will no longer have their trusted supervision of those funds. CCF cannot allow those funds designated for the education funds to be used for other purposes so with that recognition we realized that it was imperative that we

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Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 support their ability to operationally survive through this crisis. Ultimately our goal is to help ACP emerge as the strong and fully functioning organization they have been in the past. This support will help them to retain management of the scholarship endowment, continue the educational programs and allow them to continue their work to empower Nepali women. The work that ACP does centers on creating real long term opportunity for women and girls and has made a huge difference over the past 30+ years. If they can survive they will continue to speak on behalf of and work to empower Nepali women. Grantee #2: T.E.A.M. Nepal- Covid-19 Disaster Relief-\$5600 Kolechaour, Talamarang Melamchi 6, Sindhupalchock 00977 Nepal Grantee Phone: 9841278282 Grantee email: teamnepal65@gmail.com Program Director: Neel Shahi Grant: T.E.A.M. Nepal Covid disaster relief grant \$5600 Program Purpose: To cover the basic expenses of running TEAM Nepal's Sindupolchuk Children's Home during the lockdown in Nepal due to Covid-19. TEAM Nepal's typical revenue stream comes from donations made by tourists who come to volunteer at the school. The volunteer program was shut down due to COVID-19 since tourists could no longer visit Nepal and TEAM Nepal's funding source significantly decreased. This grant ensured that TEAM Nepal would have their expenses covered for three months so that the children and families they benefit from their programs were not irreparably harmed by this unforeseeable event. TEAM Nepal is a non-government, non-profit social organization based in Melamchi, Sindupolchuk, Nepal. It was started in 2009 by Neel Bahadur Shahi and focuses on promoting projects related to children's rights, education, environmental protection, and health awareness in rural villages of Nepal. The organization helps to support local schools, offers scholarship funds to underrepresented youth, and runs a children's home for orphans, youth from very poor family backgrounds, and otherwise vulnerable kids. CCF has

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Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 worked with TEAM Nepal in various capacities since 2015 when it provided substantial support to rebuild their children's home following the earthquake. Their annual budget for running their programs is 2,712,300Nrs (\$22,415) and the grant amount of \$5,600 was enough to cover three months out of this total. Grantee #3: Kesang Yudron, Volunteer CCF Program manager in Nepal Grantee Address: Bhagwang Bahal, Tahmel-29, PO Box 10452 Kathmandu, Nepal Grantee Phone: 985-102 0531 Grantee email: Kyudron@gmail.com Kesang Yudron has volunteered on behalf of CCF in Nepal to help with our Menstrual Hygiene trainings and menstrual hygiene kit production. As such, she is familiar with many NGO's in Nepal and when the Covid-19 disaster struck and Nepal locked down in the spring of 2020 Kesang was contacted by some of these NGO's to see if CCF would be willing to help fund emergency food, mask, soap and menstrual hygiene kit distribution. She volunteered to facilitate in the following distributions: Grant: Direct Aid (food, soap, masks, reusable menstrual hygiene supplies) to organizations and individuals suffering from Covid-19 and the effects of lockdown in Nepal- \$5513 Fatima Foundation (www.fatimafoundation.org.np) -relief supplies during covid-19 lockdown- food, masks and menstrual hygiene supplies-\$1000 Kesang Yudron was contacted by Muhammadi Siddique, founder and program director of the Fatima Foundation. Fatima Foundation works to protect extremely marginalized Muslim and Madeshi women and children in the Banke District of Nepal near the Indian border. Ms. Siddique requested CCF supply her foundation with 500 masks, 500 bars of soap, 300 reusable menstrual pad kits and funds for food relief and Covid awareness training. Fatima Foundation works to protect extremely marginalized Muslim and Madeshi women and children in the Banke District of Nepal near the Indian border. Ms. Siddique requested CCF supply her foundation with 500 masks, 500 bars of soap, 300 reusable menstrual pad kits and funds for food relief and Covid awareness training. Fatima Foundation, in cooperation with their

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Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 municipality in Nepal, sought to do relief work and education on Covid-19 with area women. They found that most women and street vendors did not have any awareness of how to protect themselves and their families and as day laborers needed cash to purchase food and supplies to survive. Kesang and the Fatima foundation worked together to identify an urgent need to address Covid-19. CCF was able to provide the funds to make the masks & menstrual kits and provide funds so that the Fatima foundation could purchase the soaps and food for relief. Over 500 women and their children were given aid. ii. Hiteri Foundation (www.hiteri.org) -relief supplies during covid-19 lockdown-food, masks and menstrual hygiene supplies-\$1000 Kesang Yudron was contacted by the Kusum Tamang, Project head of the Hiteri Foundation in Kathmandu to request that CCF fund food packages, soap and masks for Hiteri to distribute to day wage earning families who had lost their income due to Covid-19 and the lockdown in Nepal and were desperate for food. Hiteri agreed to match what CCF donated. CCF was able to provide Hiteri initially with funds to buy enough food to supply 20 families with food for 2 weeks (about \$17.50 per family) and some funding to supply another 120 families with food. 200 reusable Menstrual hygiene kits were also donated and distributed along with masks, soap and food at the Jana Uddhar Secondary school in Buhanilkantha. iii. DSM NGO (www.dsm.org.np) Saptari Community - relief supplies during covid-19 lockdown-food- \$1000 Kesang Yudron was contacted by the DSM foundation who work with the lowest caste (Dalit) community in the Terai region of Nepal in the community of Saptari. They had permission from the Government to distribute funds to families, mostly headed by women, who were urgently in need of food due to Covid-19 and the lockdown in Nepal. Many of these women are landless and facing starvation. They requested and CCF funded the distribution of 4 weeks of food to 27 families. iv. Mitini Nepal (www.mitini.org.np)- relief supplies during covid-19 lockdown-LPG gas, soap, masks-\$600

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Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 Kesang was contacted by Mitini Nepal to request that CCF fund the purchase of LPG Gas, soap and masks as aid for 30 trans women (who are extremely marginalized and mainly work as prostitutes) and who had no funds for cooking supplies due to Covid-19 and the lockdown in Nepal. CCF provided 200 masks and 300 bars of soap to the LGBTQ community along with funds to purchase LPG gas for 30 extremely marginalized trans women who had access to food but no funds to buy gas to cook with. v. Barpak village emergency relief- relief supplies during covid-19 lockdown -\$435 The village of Barpak was the epicenter of the devastating 2015 earthquake in Nepal. Many in that community were struggling to get back on their feet even when the Covid Pandemic hit Nepal. With the pandemic their struggles were even more difficult and many became food insecure. Kesang Yudron was contacted by Kancha Didi, a community leader in Barpak, who requested funds for 33 households in Barpak to help them purchase emergency food and supplies. Each family received 1500 rs (approx. \$13) in emergency relief which would help them to buy rice and dal. vi. Ganden Monestary food relief during Covid-19 lockdown-\$435 Tibetan refugee monks of the Ganden Monestary in Kathmandu had recently lost their head monk and the next in line was a 16 year old boy. Due to the Covid-19 pandemic and lockdown and their dependence on community donations they had no resources and no food. Their communal living required that they sequester themselves to stay healthy. They requested help from CCF and Kesang Yudron was able to provide them with enough funds from CCF for food for several weeks for the 60-70 monks. vii. Dhobichaur & Nayabazaar- food relief during covid-19 lockdown -\$782 Kesang worked with the Dhobichour Municipality Ward office in Kathmandu to distribute food in the Dhobichour and Nayabazaar areas to families of day laborers, widows, homeless and others who were not able to receive government assistance for food and faced starvation. They were able to purchase food wholesale and distribute 575 kg of rice, 173 kg of dal along with cooking oil, salt sugar and tea to approximately 38 families.

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Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 viii. Homeless food relief during covid-19 lockdown -\$261 Kesang and her family purchased wholesale food to give to an organization that distributed meals to destitute families and homeless individuals in their surrounding area during the lockdown. Grantee: Kesang Yudron, Volunteer CCF Program manager in Nepal Grantee Address: Bhagwang Bahal, Tahmel-29, PO Box 10452 Kathmandu, Nepal Grantee Phone: 985-102 0531 Grantee email: Kyudron@gmail.com Kesang Yudron has volunteered with CCF in Nepal to help with our Menstrual Hygiene trainings, the creation of a Nepal-centric menstrual hygiene manual and with training women seamstresses to produce reusable menstrual hygiene kits. Due to Covid-19 and the lockdowns in Nepal all of CCF's menstrual hygiene trainings for 2020 were cancelled. Work continued on the Menstrual Hygiene Manual but it's completion was delayed until January of 2021. CCF had stock of reusable Menstrual Hygiene kits from 2019 but funded the production of 400 more in June of 2020 to provide work and more kits for distribution during the pandemic. The distribution of these kits (and remaining stock of kits that CCF had funded for our cancelled trainings in 2020) was outlined above in the Covid Relief section. Line 31: Other Programs-\$5211.24 Grantee #1: Deurali Community Service Center (aka Baseri Clinic) Grantee address: Dhadagaunm Baseri VDC, Dhading District Nepal Grantee Administrator: Dhane Gurung-Treasurer DCSC email: Gurungdhanee@hotmail.com 1)Total Grants for Baseri Clinic salaries and medicines-\$2495.88 Impact: 3,000 people served per year from Dhadagaun and surrounding villages. The Deurali Community Service Cener's "Baseri Clinic" is located in the remote village of Dhadagaun, Nepal The clinic was established to provide basic healthcare in an area where it was desperately needed. It is operated by a village non-profit board that is registered with the Nepali government. Since 2014 CCF has been responsible for the staff salaries and for maintaining the clinic building. In 2015 the clinic was formally recognized as a

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Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 "model clinic" by the government of Nepal and DCSC entered into a public/private partnership with the government so that now the government pays a portion of the salaries and CCF pays the balance. CCF also pays for the maintenance of the buildings. In 2020 the clinic had 3 dedicated female staff: a certified nurse midwife, a certified medical assistant and an administrative assistant. CCF's portion of salaries for the 3 clinic staff in 2020 was \$2305.88. Due to the fear around Covid-19 and wanting people to be checked and treated if they had any symptoms at all, the DCSC asked that CCF fund 3 months of free medical care for those who wanted to be checked. This grant was for \$190. 2) Total Grants for Baseri Clinic Maintenance- \$179.36 In 2020 the Deurali Community Service Center requested funds to build a new bathroom for the clinic as the old bathroom was no longer functional. The total cost to dig a new hole and provide an outbuilding was \$179.36. Grantee #2: Women LEAD Nepal: Girl's leadership training-\$2000 Grantee Address: Jawalakhel Lalitpur, Nepal GPO 8975, EPC 2234, Kathmandu, Nepal Grantee Administrator: Dipasa Bista, Development Officer Phone: (+977)9860999912 email: dipasab@women-lead.org website: www.women-lead.org Program: Scholarship funding for the LEAD Program for empowering adolescent girls with skills to become future changemakers- \$2000 Impact: CCF's grant to the Women LEAD Course helps fund the opportunity for young women to explore their own value systems and strengths by providing them with a safe space and connecting them with a growing support community of other young women who share their vision. This course is geared to collectively drive unprecedented change and transformation in Nepal. The 2020/21 LEAD Course was conducted virtually via zoom sessions. Even with the pandemic and a virtual recruitment process, they received 122+ applications from adolescent girls (aged 16-18 who were in their final year of high school

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Name of the organization Employer identification number Conscious Connections Foundation 47-1602190 (Grade 12). They received applications from young girls in the Kathmandu Valley and from various districts around the country to secure a spot in their year-long leadership course. 30 participants from a variety of income groups were chosen as the 2020 LEADers. The girls gain critical knowledge and skills in the areas of leadership, communication, management, public speaking, teamwork, and key concepts like sex, gender & sexuality, bias & privilege, among others. Grantee #3: Purni Tamang-Individual Higher Education Award (aka Purni Tamang scholarship)- \$536 Program: Independent educational sponsorship of an outstanding female student In the fall of 2020 Kesang Yudron was approached by a young woman that she knows who was never able to complete high school and wanted to go on to University to become a lawyer. Purni Tamang is originally from a very poor family in Sindupolchowk and although she loved school her family was unable to pay her education fees as her mother is quiet elderly and unable to work and her father is no longer living. She has 8 siblings but no one who can support her during the pandemic or for her education. She has always wanted to continue her studies and pursue law to "provide justice to all" and "provide freedom & justice to everyone, especially the women of our country who are not getting their proper rights and want to make our society women empowered". CCF was able to find an individual who has always wanted to sponsor a young woman's education directly and after communicating with Purni this person has sponsored her first year. This is the first scholarship for CCF where one individual is directly sponsoring all of the school fees for a young woman who wants to pursue higher education!

Form 8879-EO

## IRS e-file Signature Authorization for an Exempt Organization

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OMB No. 1545-0047

	For calendar year 2020, or fiscal year be	ginning	_ , and ending		l	
Department of the Treasury	► Do not sen	d to the IRS. Keep for your	records.		20	)20
Internal Revenue Service	► Go to www.irs.gov/	Form8879EO for the latest	information.			
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Conscious Connections	s Foundation			47-160	2190	
Name and title of officer or person s	subject to tax					
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7a Form 4720 check here		Part III, line 1)			7b	
	n and Signature Authorization					
Under penalties of perjury,	I declare that U am an officer of	the above organization or	☐ I am a person s	subject to ta	ax with respect to	
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of the 2020 electronic return	n and accompanying schedules and st	atements, and, to the best o	of my knowledge an	nd belief, the	ey are	
true, correct, and complete	I further declare that the amount in Pa	irt I above is the amount sho	own on the copy of	the electro	nic return.	
I consent to allow my interr	nediate service provider, transmitter, o	r electronic return originator	r (ERO) to send the	return to t	he IRS and	
to receive from the IRS (a)	an acknowledgement of receipt or re	ason for rejection of the tra	nsmission, (b) the	reason for	any delay in	
processing the return or re	fund, and (c) the date of any refund. I	f applicable, I authorize the	U.S. Treasury and	I its design	ated Financial	
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software for payment of the	federal taxes owed on this return, and	the financial institution to de	ebit the entry to this	account. T	o revoke	
a payment, I must contact th	ne U.S. Treasury Financial Agent at 1-	888-353-4537 no later than	2 business days p	rior to the	payment	
(settlement) date. I also aut	thorize the financial institutions involve	d in the processing of the e	lectronic payment o	of taxes to r	receive	
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that I am submitting this re	turn in accordance with the requireme	ents of Pub. 4163, Modernia	zed e-File (MeF) In	formation f	for Authorized	
IRS e-file Providers for Bus	siness Returns.					

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

Date > 05-17-2021

	Statement of Program Service Accomplishments	2020 PG01
Name(s) as shown on return		Your Social Security Number
Conscious Connect	ions Foundation	47-1602190
	Form 990EZ-Part III-Line 31	Statement #4
Program Service Ex Grants and allocation Includes Foreign G	ons included in above expense	\$0 \$5211 No
Explanation See other program	services Schedule O	

## FOR YOUR RECORDS ONLY Federal Supporting Statements 2020 PG01 Name(s) as shown on return Tax ID Number **Conscious Connections Foundation** 47-1602190 Form 990EZ - Part I - Line 5(c) Gain(Loss) from Sale of Public Securities Schedule Statement #101 **Gross Sales** \$ 2,190 \$ 2,214 Basis Sales Expense \$\_ \$(24)\_\_\_\_ **Total Net**

Form 990	Schedule A, Line 5 - Excess 2% Limitation Contributors								
Vorksheet	et (Keep for your records)					2020	2020		
ame(s) as shown on return						Tax ID Numbe	er		
Conscious Connections Foundation						47-16021	90		
	(a)	(b)	(c)	(d)	(e)	(f)			
	204.0	2047					(g)		
Name	2016	2017	2018	2019	2020	Total	(g) Excess contributions		
Name	2016	2017	2018	2019	2020	Total	,		
Name	2016	2017	2018	2019	2020	Total	Excess contributions		

Total\_\_\_\_

## 2020 Filing Instructions Conscious Connections Foundation Tax year ending 12-31-2020

Form filed:

Form 990-EZ and supplemental forms and schedules

Filing method:

The return has been e-filed, do not mail.

Due date:

05-17-2021

The return reflects neither a refund nor a balance due.

Please note:

The Taxpayer First Act requires tax-exempt organizations to electronically file all information returns in the 990 series and related forms for tax years beginning after July 1, 2019. Mailing these returns is no longer allowed.

FILEINST.LD

# 990 Tax Exempt Diagnostic Summary Name Conscious Connections Foundation Tax Exempt Diagnostic Summary Employer Identification # 47-1602190

Demographics

Mailing Address: Phone: (509)499-3320

PO Box 342

Spokane, WA 99210

Resident State: WA

Diagnostics

Preparer: Fred Peck, CPA Invoice: Date: 06-05-2021

## Return Information

Itom on Datum	2020	2019 Federal
Item on Return	Federal	(If available)
Total Revenue	60,725	
Total Expenses	76,236	
Net Excess (Deficit)	(15,511)	
Net Assets or Fund		
Balances	132,372	147,883

## State/City Information

State/City	<u>Taxable</u>	Total	Change Fund	<u>UBIT</u>	<u>Total</u>	Refund/
	Revenue	Expenses	<u>Balance</u>		<u>Tax</u>	(Balance Due)

## Acknowledgement and General Information for 2020 **Entities That File Returns Electronically** Name(s) as shown on return Employer Identification Number \*\*-\*\*\*2190 Conscious Connections Foundation Entity address PO Box 342 Spokane, WA 99210 Thank you for participating in IRS e-file. 1. X 2020 990EZ income tax return for Federal was filed electronically. The electronic filing services were provided by Kingfisher Financial PBC 2. X income tax return was accepted on 05-17-2021 using a Personal Identification Number (PIN) as an electronic signature. The entity entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN signature. The submission ID assigned to this return is 8213502021137ip25jq3 PLEASE DO NOT SEND A PAPER COPY OF ENTITY'S RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.