Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

A For the 2021 calendary sear, or tax year beginning	Inter	nal Rever	nue Service	► Go to www.irs.g	gov/Form990 for instruct	tions and the late	st information.		Inspection				
Doing business are	A	For the	2021 calend	lar year, or tax year beginning	01/01/2021	and ending	12/31/2	021					
Doing business are	В	Check if	applicable:	C Name of organization SOLAR	ELECTRIC LIGHT FUND			D Emplo	oyer identification number				
Name Areange Intelligence Number and street for P.O. box if mails not defined to street address) Room/suite E Telephone number 2021_L Street NW STE 101 box 344 City or from, state or province, country, and 2/P or foreign postal code 2021_L Street NW STE 101 box 344 City or from, state or province, country, and 2/P or foreign postal code 2021_L St NW, ste 101 Box 344, Washington, DC 20036 Falmer and address of principal officer: Robert Frelling High is this grow preunter subdicate? Yes No No Yes No Yes No Yes No Yes No Yes Yes No Yes	_		* *					•	•				
Initial return	П		-		f mail is not delivered to stree	et address)	Room/suite						
Final returnsterminated City or town, state or province, country, and ZIP or foreign postal code Washington, DC 20036 Vestington, DC 20036 Flavor and address of principal officer. Robert Frelling Flavor and address of principal officer. Robert Frelling Yes No Application period Yes No Yes Yes No Yes Ye	П		ŭ					· ·					
Application pending Washington, DC 20036 Sa.233,747 Application pending Films and address of principal officer: Robert Freiling High is this agroup return broatchasted! Ves No Tax-exempt status: Solici(3) Solici(1) Films and address of principal officer: Robert Freiling High is this agroup return broatchasted! Ves No Tax-exempt status: Solici(3) Solici(1) Films and address of principal officer: Robert Freiling High is this agroup return broatchasted! Ves No Tax-exempt status: Solici(3) Solici(1) Films and principal officers High Corporations High Corporations Migh Corporation Tax-exempt status: Solici and Solici High Corporation Tax-exempt status: Solici and Solici High Corporation Tax-exempt status: Tax-exempt status: Solici Electric Light Fund (SELF) provides solar powers and wireless communications to the fifth off the world's population living without access to electricity to meet global challenges of food and water scarcity, climate change, and powerty. Solici Solici Electric Light Fund (SELF) provides solar powers and wireless communications to the fifth off the world's population living without access to electricity to meet global challenges of food and water scarcity, climate change, and powerty. Solici	H					stal code			202 201 1200				
Application pending Name and address of principal officer. Robert Freiling Hole is this agripment with subtricted Ves No Tax-desempt status: 201 L St NW, sto 101 Box 344, Washington, DC 20036 If No. * attach a last. See instructions. No Tax-desempt status: 2010(S) Strict 1 4 (mast no.) 4847(a(t)) or 527 Hold Company No. * attach a last. See instructions. No. * attac	Н				ountry, and zir or foreign po	otal oodo		G Gross	receipts \$ 3 233 747				
2021 L St NW, set 101 Box 344, Washington, DC 20036	Н				ficer: Robert Freling		H(a) Is this a grou		-, -, -,				
Tax-exempt status:	ш	Аррпсан	ion pending			86							
Website: ► wows.self.org H(s) Group exemption number ►	_	Tax-exer	mpt status:				` '						
Part Summary			·) * (incort no.)	0 17 (a)(1) 01 <u>021</u>							
Summary Summary Briefly describe the organization's mission or most significant activities: Solar Electric Light Fund (SELF) provides solar power and wireless communications to the fifth of the world's population living without access to electricity to meet global challenges of food and water scarcity, climate change, and poverty.					ation Other >	I Vear of for							
Priefly describe the organization's mission or most significant activities: Solar Electric Light Fund (SELF) provides solar power and wireless communications to the fifth of the world's population living without access to electricity to meet global challenges of food and water scarcity, climate change, and poverty.	_				ationOther >	L real of for	mation. 1990	W Otate	or legal dornione.				
Description	ш			-	sion or most significant	ootivitioo: Cala	. Floodwin I imbé Fra	- d (CEI	E) massides selen				
4 Number of independent voting members of the governing body (Part VI, line 1b) 4 3 3 5 5 5 5 5 5 6 6 7 7 7 7 7 7 7 7	ø	'											
4 Number of independent voting members of the governing body (Part VI, line 1b) 4 3 3 5 5 5 5 5 5 6 6 7 7 7 7 7 7 7 7	Š					-	ithout access to e	lectrici	ty to meet global				
4 Number of independent voting members of the governing body (Part VI, line 1b) 4 3 3 5 5 5 5 5 5 6 6 7 7 7 7 7 7 7 7	rns	_					d of more than C		ito not consta				
4 Number of independent voting members of the governing body (Part VI, line 1b) 4 3 3 5 5 5 5 5 5 6 6 7 7 7 7 7 7 7 7	ove.			•	•	•		1 . 1	_				
B Net unrelated business taxable income from Form 990-T, Part I, line 11 Tb 0	Ğ			_		•							
B Net unrelated business taxable income from Form 990-T, Part I, line 11 Tb 0	S S												
B Net unrelated business taxable income from Form 990-T, Part I, line 11 Tb 0	įį					· · · · · · · · · · · · · · · · · · ·		_					
B Net unrelated business taxable income from Form 990-T, Part I, line 11 Tb 0	댨			-	= :			-					
Section Prior Year Current Year 1,362,545 2,756,519 9 Program service revenue (Part VIII, line 1b)	⋖	_											
8 Contributions and grants (Part VIII, line 1h)		b	Net unrelat	ed business taxable income	e trom Form 990-1, Par	t I, line 11		7b					
Program service revenue (Part VIII, line 2g)		_											
Total revenue (Part VIII, Column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	Р	8		1,30	32,545	2,756,519							
Total revenue (Part VIII, Column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	enr	9	_	· · · · · · · · · · · · · · · · · · ·	6′	18,288	476,980						
Total revenue (Part VIII, Column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	ě	10						0	248				
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	-	11	Other rever	nue (Part VIII, column (A), lin	es 5, 6d, 8c, 9c, 10c, a	ınd 11e)		8,170	0				
14 Benefits paid to or for members (Part IX, column (A), line 4)		12	Total reven	ue-add lines 8 through 11 (r	must equal Part VIII, col	lumn (A), line 12)	1,98	39,003	3,233,747				
Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0 0 17 Total fundraising expenses (Part IX, column (D), line 25) ▶ 178,389 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,419,225 1,365,201 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,377,820 2,046,303 19 Revenue less expenses. Subtract line 18 from line 12 388,817 1,187,444 20 Total assets (Part X, line 16) 459,116 1,507,297 Total liabilities (Part X, line 26) 417,254 147,791 Net assets or fund balances. Subtract line 21 from line 20 41,862 1,359,506 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. Paid Preparer Use Only Firm's name Preparer's signature Print'/pe preparer's name Preparer's signature Print'/pe preparer's name Print'/pe print name and title Print'/pe print name Print'/pe print'/pe print name Print'/pe pr		13	Grants and	similar amounts paid (Part I	IX, column (A), lines 1-	3)		0	0				
16a Professional fundraising fees (Part IX, column (A), line 11e)		14	Benefits pa	aid to or for members (Part I)	X, column (A), line 4)			0	0				
17 Other expenses (Part IX, Column (A), lines 11a-11d, T11-24e)	S	15	Salaries, ot	her compensation, employee	benefits (Part IX, colum	n (A), lines 5-10)	98	58,595	681,102				
17 Other expenses (Part IX, Column (A), lines 11a-11d, T11-24e)	nse	16a	Profession	al fundraising fees (Part IX, c	column (A), line 11e)			0	0				
17 Other expenses (Part IX, Column (A), lines 11a-11d, T11-24e)	ç	b	Total fundr	aising expenses (Part IX, col	lumn (D), line 25) ▶	178,389							
19 Revenue less expenses. Subtract line 18 from line 12	Ш	17	Other expe	enses (Part IX, column (A), lin	nes 11a-11d, 11f-24e)		1,4	19,225	1,365,201				
Beginning of Current Year End of Year		18	Total exper	nses. Add lines 13–17 (must	equal Part IX, column	(A), line 25) .	2,37	77,820	2,046,303				
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 Robert Freling, Executive Director Type or print name and title Paid Preparer Use Only Pirm's name Firm's name Firm's address Phone no.		19	Revenue le	ss expenses. Subtract line 1	18 from line 12		-38	38,817	1,187,444				
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 Robert Freling, Executive Director Type or print name and title Paid Preparer Use Only Pirm's name Firm's name Firm's address Phone no.	or Ses						Beginning of Curre	nt Year	End of Year				
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 Robert Freling, Executive Director Type or print name and title Paid Preparer Use Only Pirm's name Firm's name Firm's address Phone no.	sets	20	Total asset	s (Part X, line 16)			4	59,116	1,507,297				
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 Robert Freling, Executive Director Type or print name and title Paid Preparer Use Only Pirm's name Firm's name Firm's address Phone no.	ASS	21	Total liabili	ties (Part X, line 26)			4	17,254	147,791				
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 Robert Freling, Executive Director Type or print name and title Paid Preparer Use Only Pirm's name Firm's name Firm's address Phone no.	풀	22	Net assets	or fund balances. Subtract I	line 21 from line 20		4	11,862	· ·				
Sign Here Robert Freling, Executive Director Type or print name and title Preparer Firm's name Firm's address Firm's address Phone no.	Pa	art II	Signatu	re Block			•	<u> </u>	, ,				
Sign Here Robert Freling, Executive Director Type or print name and title Paid Preparer Use Only Firm's name Firm's address ► Pate Date Check if self-employed Firm's EIN ► Proparer's signature Firm's address ► Phone no.	Un	der pena	Ities of perjury,	I declare that I have examined this	return, including accompany	ring schedules and s	tatements, and to the	best of i	my knowledge and belief, it is				
Here Robert Freling, Executive Director	tru	e, correct	t, and complete	e. Declaration of preparer (other than	n officer) is based on all inforr	mation of which prep	arer has any knowled	ge.					
Here Robert Freling, Executive Director													
Type or print name and title Paid Preparer Use Only Print/Type preparer's name Preparer's signature Preparer's signature Preparer's signature Preparer's signature Preparer's signature Print/Type preparer's name Firm's name Firm's address ▶ Phone no.	Siç	gn	Signatu	ure of officer			Date						
Type or print name and title Paid Preparer Use Only Print/Type preparer's name Preparer's signature Preparer's signature Preparer's signature Preparer's signature Preparer's signature Print/Type preparer's name Firm's name Firm's address ▶ Phone no.	-		Robe	rt Freling, Executive Director									
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Use Only Firm's name ► Firm's EIN ► Firm's address ► Phone no.													
Firm's address Phone no.		-	Lives's non	ne •	l		Firm'e	FIN ►					
	Us	e Onl	V ——										
	Ma	v the IF			shown above? See ins	tructions	1 110116		. Yes No				

Form 990 (2021) Page **2**

Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Solar Electric Light Fund (SELF) provides solar power and wireless communications to the fifth of the world's population living in
	energy poverty to meet global challenges of food and water scarcity, climate change, and poverty. SELF is working to assign
	greater priority to the importance of sustainable energy among international development banks, international development and
2	(Continued on Schedule O, Statement 2) Did the organization undertake any significant program services during the year which were not listed on the
2	
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
3	
	services?
4	·
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.
	the total expenses, and revenue, if any, for each program out vice reported.
4a	(Code:) (Expenses \$ 1,611,383 including grants of \$) (Revenue \$ 1,761,621)
Ta	Completed installation of 24 new solar powered pumping systems for clean water in villages in remote Northern Benin to provide
	clean water to more than 80,000 people. In cooperation with partner Rape Hurts Foundation, installed new streetlights in
	Bukyerimba, Uganda to improve security for women in the village. Worked with WHO to monitor and troubleshoot vaccine
	reference to the second of the
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
ъu	/E
4e	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0) Total program service expenses ▶ 1,611,383
. •	

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)? If "Yes," complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		\ \
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? If "Yes," complete Schedule C, Part III			
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? If "Yes," complete Schedule D, Part I	5		V
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		✓
8	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	7		✓
9	complete Schedule D, Part III	9		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V </i>	10		\ \ \
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, as applicable.	10		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		~
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		>
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		>
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? If "Yes," complete Schedule D, Part IX	11d	~	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	~	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	~	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		>
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 marg? If "Yes," complete Schodule F. Parte Land IV			
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b	~	
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	•	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		~
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? If "Yes," complete Schedule G, Part I. See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		٧
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20 b		
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? If "Yes," complete Schedule I, Parts I and II	21		~

Part	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
LL	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	,	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		,
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		V
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	~	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		,
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		,
c b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b 28c		\(\tau \)
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	V	,
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	31		<i>v</i>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		,
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		~
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		,
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	,	
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			
1.	Enter the number reported in box 2 of Form 1006 Enter 0 if not applicable		Yes	No
1a b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	-		
	reportable gaming (gambling) winnings to prize winners?	1c		1

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			
h	If "Yes," enter the name of the foreign country Haiti	4a	'	
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		'
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		~
Ü	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
-	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
b	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		V
10	If "Yes," complete Form 4720, Schedule O.	10		
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (2021) Page **6**

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

Part VI

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . . 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 1 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 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? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a 8b 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 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No **10a** Did the organization have local chapters, branches, or affiliates? 10a **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c Did the organization have a written whistleblower policy? 13 13 ~ 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . ~ 15a 15b 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 16a **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► TN, WA 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Another's website ✓ Own website Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records ▶ 20 2021 L Street NW Suite 101 Box 344, Washington DC 20006, (202)234-7265

Form **990** (2021)

Form 990 (2021) Page **7**

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

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	r any relate	d org	aniz	atic	n c	ompe	ensa	ated any current	officer, director,	or trustee.
				(C)					
(A)	(B)	l , .			ition			(D)	(E)	(F)
Name and title	Average					e than o		Reportable	Reportable	Estimated amount
	hours per week					or/trus		compensation from the	compensation from related	of other
	(list any	or a	Ins	Officer	e e	em Hig	For	organization (W-2/		compensation from the
	hours for	lividu	tituti	icer	Key employee	hest	Former	1099-MISC/	1099-MISC/	organization and
	related organizations	tor	ona		old	ee		1099-NEC)	1099-NEC)	related organizations
	below	Individual trustee or director	tru		/ee	nper				
	dotted line)	8	Institutional trustee			Highest compensated employee				
						8				
Robert Freling	40.00	-		ر ا	,	٠.		400.000		
Executive Director	40.00			~	·	~		189,000	0	20,305
Karen Allen	40.00	-				_		100 101		04.000
Development Director	4.00					· ·		109,131	0	34,666
Steve Swig Chairman	1.00 0.00	·		~				0	0	0
Jonathan W Postal	1.00	<u> </u>						•	0	0
Treasurer	0.00	·		1				0	0	0
Mary Swig	1.00	Ť						•		•
Director	0.00	1						0	0	0
	0.00									
		1								
		1								
		-								
		-								
		-								
	ļ	+								
			-		-					
	 	1								

Part	VII Section A. Officers, Directors,	Trustees,	Key l	Em	plo	yee	s, an	d F	lighest Compe	ensated Emp	loyee	s (continued)
					(0	C)						
	(A)	(B)	/	4 1		ition			(D)	(E)		(F)
	Name and title	Average					e than o is both		Reportable	Reportable	Es	stimated amount
		hours	office	er an			or/trus		compensation	compensation		of other
		per week (list any	Individual trustee or director	Ins	오	Z e	en Hi	Fo	from the organization (W-2/	from related organizations (W-		compensation from the
		hours for	dire	 	Officer	y er	plo	Former	1099-MISC/	1099-MISC/		rganization and
		related	cto	tion	~	nplo	st cc	٦	1099-NEC)	1099-NEC)	rela	ted organizations
		organizations below	ר בל ו	Institutional trustee		Key employee) mg					
		dotted line)	stee	uste			ens					
) W			Highest compensated employee					
		 	1									
		ļ	-									
		 	-									
		 	1									
-												
			1									
			1									
		ļ	-									
		 	1									
1b	Subtotal		<u> </u>	· .					298,131		0	54,971
С	Total from continuation sheets to Part		n A					•	200,101		1	
d	Total (add lines 1b and 1c)								298,131		0	54,971
2	Total number of individuals (including but		d to th	nose	e list	ted	above	e) w	no received mor	e than \$100,0	00 of	
	reportable compensation from the organ	ization ►							2			
•	Did it is a second of										. =	Yes No
3	Did the organization list any former employee on line 1a? <i>If</i> "Yes," complete							-	loyee, or nignes	st compensat		
	• •							•				3 1
4	For any individual listed on line 1a, is the organization and related organizations											
	individual		ан ф	150,	,000): 1	1 16	٥,	complete scriet	uule 3 101 Su		4 .4
5	Did any person listed on line 1a receive of		· ·	nea	tion	fro	m anı	 		tion or individu	ıal 📙	4 1
	for services rendered to the organization											5 1
Secti	on B. Independent Contractors	<u> </u>							,			<u> </u>
1	Complete this table for your five high	nest comp	ensat	ed	inde	epe	ndent	CC	ontractors that i	received more	thar	\$100,000 of
	compensation from the organization. Rep	ort compen	satio	n fo	r the	e ca	lenda	r ye	ear ending with or	r within the org	anizat	ion's tax year.
	(A)								(B)			(C)
	Name and business add	dress							Description of sen	vices	Com	pensation
None								_				
2	Total number of independent contractor	ors (includir	ng bu	ıt n	ot l	limit	ed to	th	nose listed abov	re) who		
	received more than \$100,000 of compens	ation from	the or	gan	izat	ion	>		0			

Page 8

 Statement of Revenue
Statement at Davanua
Statement of nevenue

		Check if Schedule	Осо	ntains a re	spon	se or note to ar	ny line in this Pa	ırt VIII		🗌
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ς, α	1a	Federated campaig	ns .		1a	9,062				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b	0				
اع <u>ح</u>	С	Fundraising events			1c	0				
A, A	d	Related organization			1d	0				
ia i	-	Government grants			1e	0				
is,	f	All other contribution	ns. aif	fts. grants.		•				
ion	-	and similar amounts no			1f	2,747,457				
the	а	Noncash contribution				2,141,451				
	9				1g	\$ 460,004				
on all	h	<u></u>					0.750.540			
- "	h	Total. Add lines 1a-	-11 .		• •	Business Code	2,756,519			
φ l	20	Installation of Colon	D	_			470,000	470,000	•	
Š	2a	Installation of Solar	Powe	<u>r</u>		900099	476,980	476,980	0	0
Ser	b									
m (en	C									
gram Ser Revenue	d									
Program Service Revenue	e	A.IIII					_	_		
Δ	t ~	All other program se					0	0	0	0
	<u>g</u> 3	Total. Add lines 2a- Investment income					476,980			
	3	other similar amoun					040	040		
	4		-				248	248	0	0
	4	Income from investr				-	0	0	0	0
	5	Royalties	<u> </u>	(i) Rea		(ii) Personal	0	0	0	0
	0-	0		(i) Rea						
	6a	Gross rents	6a		0	0				
	b	Less: rental expenses	6b		0	0				
	C	Rental income or (loss)		\	0	0				
	_d	Net rental income o	r (loss	r'		.	0	0	0	0
	7a	Gross amount from		(i) Securit	iles	(ii) Other				
		sales of assets other than inventory	l _							
		•	7a							
Revenue	D	Less: cost or other basis and sales expenses .								
Ver	_	•	7b							
Be		Gain or (loss)	7с		0	0				
er		Net gain or (loss)				<u>-</u>				
Other	8a	Gross income from		ndraising						
		events (not including		0						
		of contributions rep 1c). See Part IV, line			0-					
	h	·			8a 8b					
		Less: direct expension Net income or (loss)				nts ▶				
		Gross income f			g eve	nts ▶				
	Ju	activities. See Part I			9a					
	b	Less: direct expens			9b					
		Net income or (loss)				Les ▶				
		Gross sales of in				, <u>,,, , , , , , , , , , , , , , , , , ,</u>				
		returns and allowan			10a					
	b	Less: cost of goods			10b					
		Net income or (loss)								
<u></u>		31 21 (300)	,	3		Business Code				
Miscellaneous Revenue	11a									
scellaneo Revenue	b									
elk ye	C									
<u>S</u> &	d	All other revenue								
Σ	е	Total. Add lines 11a	a–11d	1		•	0			
	12	Total revenue. See					3,233,747	477,228	0	0

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

	Check if Schedule O contains a response		IN THIS PART IX .	<u></u>	<u> L</u>
	ot include amounts reported on lines 6b, 7b, o, 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 .	0	0	-	·
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	189,000	94,500	56,700	37,800
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 8	Other salaries and wages	348,555	182,886	97,438	68,231
	section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	98,661	29,361	46,638	22,662
10	Payroll taxes	44,886	24,196	12,250	8,440
11	Fees for services (nonemployees):	·	·	·	·
а	Management	0	0	0	0
b	Legal	0	0	0	0
C	Accounting	20,934	0	20,934	0
d	Lobbying	0	0	20,334	0
	Professional fundraising services. See Part IV, line 17	0	U	U	0
e	· .				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) .	0	0	0	0
	- '	51,582	17,692	8,493	25,397
12	Advertising and promotion	10,803	694	736	9,373
13	Office expenses	12,432	4,982	5,998	1,452
14	Information technology				
15	Royalties				
16	Occupancy	11,486	6,046	3,626	1,814
17	Travel	4,555	4,149	406	0
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	0	0	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance	21,180	16,290	2,976	1,914
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.)				
а	Project Equipment and Expense	1,230,587	1,230,587	0	0
b	Publications	1,642	0	336	1,306
c d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,046,303	1,611,383	256,531	178,389
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)		, , , , ,		2000

Part X Balance Sheet

9 Prepaid expenses and deferred charges 10 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—publicly traded securities 14 Intangible assets 15 Investments—program-related. See Part IV, line 11 16 Investments—program-related. See Part IV, line 11 17 Investments—program-related. See Part IV, line 11 18 Investments—program-related. See Part IV, line 11 19 Investments—program-related. See Part IV, line 11 10 Investments—program-related. See Part IV, line 11 11 Investments—program-related. See Part IV, line 11 12 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Intangible assets 16 Intangible assets 17 Intangible assets 18 Intangible assets 19 Intangible assets 10 Intangible			Check if Schedule O contains a response or note to any line in this Pa	ırt X		
2 Savings and temporary cash investments 32,6388 3 420,556						` ,
2 Savings and temporary cash investments 32,6388 3 420,556		1	Cash-non-interest-bearing	1.495	1	1.495
3 Pledges and grants receivable, net 326,988 3 420,555			<u> </u>		2	
Accounts receivable, net 0 4 0				•		
Secure Securities Securi				,		-,
Controlled entity or family member of any of these persons Controlled entity or family member of any of these persons (as defined under section 4958(h(1)), and persons described in section 4958(h(3)(B) Controlled entity or family member of any of these persons (as defined under section 4958(h(1)), and persons described in section 4958(h(3)(B) Controlled entity or family member of any of these persons (as defined under section 4958(h(3)(B) Controlled entity or family member of any of these persons (as defined under section 4958(h(3)(B) Controlled entity or family member of any of these persons (as defined under section 4958(h(3)(B) Controlled entity or family member of any of these persons (as defined under section 4958(h(3)(B) Controlled entity or family member of any of these persons (as defined under section 4958(h(3)(B) Controlled entity or family member of any of these persons (as defined under section 4958(h(3)(B) Controlled entity or family member of any of these persons (as defined under section 4958(h(3)(B) Controlled entity or family member of any of these persons (as defined under section 4958(h(3)(B) Controlled entity or family member of any of these persons (as defined under section 4958(h(1)(B) Controlled entity or family member of any of these persons (as defined under section 4958(h(1)(B) Controlled entity or family member of any of these persons (as defined under the payables to unrelated third parties (as defined under the payable to unrelated third parties (as defined under the payable to unrelated third parties (as defined under the payable to unrelated third parties (as defined under the payable to unrelated third parties (as defined under the payable to unrelated third parties (as defined under the payable to unrelated third parties (as defined under the payable to unrelated third parties (as defined under the payable to unrelated third parties (as defined under the payable to unrelated third parties (as defined under the payable to unrelated third parties (as d		_	Loans and other receivables from any current or former officer, director,			· ·
6 Loans and other receivables from other disqualified persons (as defined under section 4958(h)(1)), and persons described in section 4958(c)(3)(B). 7 Notes and loans receivable, net					E	
7 Notes and loans receivable, net 0 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 8 10 7 0 0 10 10 10 10 10 10 10 10 10 10 10 10		6	Loans and other receivables from other disqualified persons (as defined	0	3	
8 Inventories for sale or use			under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	0		
10a Land, bulldings, and equipment: cost or other basis. Complete Part VI of Schedule D	ţ	7	Notes and loans receivable, net	0	7	0
10a Land, bulldings, and equipment: cost or other basis. Complete Part VI of Schedule D	sse	8	Inventories for sale or use	0	8	0
b Less: accumulated depreciation . 10b 10c 11 Investments — publicly traded securities . 20,698 11 0 12 Investments — publicly traded securities . 20,698 11 0 13 Investments — other securities. See Part IV, line 11 0 13 0 14 Intangible assets . 0 14 0 15 Other assets. See Part IV, line 11 2,753 15 395,108 16 Total assets. See Part IV, line 11 2,753 15 395,108 17 Accounts payable and accrued expenses 153,413 17 69,028 18 Grants payable 0 18 0 19 Deferred revenue 53,641 19 28,763 20 Tax-exempt bond liabilities 0 20 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D 0 21 0 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 80,000 22 50,000 23 Secured mortgages and notes payable to unrelated third parties 130,200 24 0 24 Unsecured notes and loans payable to unrelated third parties 130,200 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 0 26 Total liabilities. Add lines 17 through 25 417,254 26 147,791 27 Net assets with donor restrictions -273,901 27 416,170 28 Net assets with donor restrictions -273,901 27 416,170 29 Capital stock or trust principal, or current funds 29 29 Capital stock or trust principal, or current funds 30 31 Retained earnings, endowment, accumulated income, or other funds 31 32 Total net assets or fund balances 41,862 32 1,359,566	ğ	9	Prepaid expenses and deferred charges	12,947	9	7,632
b Less: accumulated depreciation 10b 10c 11		10a				
11 Investments – publicly traded securities 20,698 11 0 12 0 12 10 13 10 13 10 13 10 14 10 13 10 14 10 14 10 15 15 15 15 15 15 15		h			100	
12 Investments—other securities. See Part IV, line 11 0 12 0 0 13 10 14 13 10 14 14 10 14 14 10 15 15 15 15 15 15 15			•	20.000		
13 Investments — program-related. See Part IV, line 11				•		
14 Intangible assets 0 14 0 0 15 15 0			,			
15 Other assets. See Part IV, line 11 2,753 15 395,108 16 Total assets. Add lines 1 through 15 (must equal line 33) 459,116 16 1,507,297 17 Accounts payable and accrued expenses 153,413 17 69,028 18 Grants payable 0 18 0 0 18 0 0 19 Deferred revenue 53,641 19 28,763 19 28,763 20 Tax-exempt bond liabilities 0 20 0 0 21 0 0 21 0 0 21 0 0 21 0 0 21 0 0 0 21 0 0 0 0 0 0 0 0 0			,			
16 Total assets. Add lines 1 through 15 (must equal line 33) 459,116 16 1,507,297 17 Accounts payable and accrued expenses 153,413 17 69,028 18 Grants payable 0 18 0 19 Deferred revenue 53,641 19 28,763 20 Tax-exempt bond liabilities 0 20 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 80,000 22 50,000 23 Secured mortgages and notes payable to unrelated third parties 0 23 0 24 Unsecured notes and loans payable to unrelated third parties 130,200 24 0 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 0 26 Total liabilities. Add lines 17 through 25 417,254 26 147,791 27 Net assets with donor restrictions -273,901 27 416,170 28 Net assets with donor restrictions -273,901 27 416,170 29 Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 31 Retained earnings, endowment, accumulated income, or other funds 31 13,59,506 41,862 32 1,3						
17			·	· ·	_	
18 Grants payable 0 18 0 18 0 19 Deferred revenue 53,641 19 28,763 20 Tax-exempt bond liabilities 0 20 0 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D 10 21 0 21 0 21 0 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 80,000 22 50,000 23 0 24 0 0 23 0 0 24 0 0 25 0 0 25 0 0 25 0 0 0 25 0 0 0 0 0 0 0 0 0				,		· · · · · ·
19 Deferred revenue			· ·	· ·		•
Tax-exempt bond liabilities						
21 Escrow or custodial account liability. Complete Part IV of Schedule D . 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 . 23 Secured mortgages and notes payable to unrelated third parties . 24 Unsecured notes and loans payable to unrelated third parties . 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 . 26 Total liabilities. Add lines 17 through 25				·		,
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			·			0
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				0	21	0
Unsecured notes and loans payable to unrelated third parties	ies	22				
Unsecured notes and loans payable to unrelated third parties	ij			20.000	00	50.000
Unsecured notes and loans payable to unrelated third parties	Lia	23	·	· · · · · · · · · · · · · · · · · · ·		_
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						
parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D				130,200		•
of Schedule D						
Total liabilities. Add lines 17 through 25				0	25	0
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions		26	Total liabilities. Add lines 17 through 25		_	147.791
Net assets without donor restrictions	ses		Organizations that follow FASB ASC 958, check here ▶ ✓	,		
Net assets without donor restrictions	anc					
Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds	3al			,		
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds	d E	28		315,763	28	943,336
29 Capital stock or trust principal, or current funds	Fun					
Paid-in or capital surplus, or land, building, or equipment fund	ō	29	Capital stock or trust principal, or current funds		29	
31 Retained earnings, endowment, accumulated income, or other funds	ets	30			30	
32 Total net assets or fund balances	SS	31			31	
2 33 Total liabilities and net assets/fund balances	λħ	32		41,862	32	1,359,506
	ž	33	Total liabilities and net assets/fund balances	459,116	33	1,507,297

Form 990 (2021) Page **12**

1 2	Total expenses (must equal Part IX, column (A), line 25)	1				~
-	Total expenses (must equal Part IX, column (A), line 25)	-				
2	(), ()				3,23	3,747
		2			2,040	6,303
3	Revenue less expenses. Subtract line 2 from line 1	3			1,187	7,444
4		4			4	1,862
5	Net unrealized gains (losses) on investments	5	0			0
6		6				0
7		7				0
8	Prior period adjustments					0
9	Other changes in net assets or fund balances (explain on Schedule O)	9			130	0,200
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
		0			1,359	9,506
Part	XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII			٠,		Ц
					Yes	No
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 Schedule O.	ain	on			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2	а		~
	If "Yes," check a box below to indicate whether the financial statements for the year were compi					
	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?		. 2	b	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	d or	ı a 🗀			
	separate basis, consolidated basis, or both:					
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversi	ight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant	?	. 2	С	~	
	If the organization changed either its oversight process or selection process during the tax year, explanation changed either its oversight process or selection process during the tax year, explanation changed either its oversight process or selection process during the tax year, explanation changed either its oversight process or selection process during the tax year, explanation changed either its oversight process or selection process during the tax year, explanation changed either its oversight process or selection process during the tax year, explanation changed either its oversight process or selection process during the tax year, explanation changed either its oversight process or selection process during the tax year.	lain	on			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth Single Audit Act and OMB Circular A-133?	in t		а		·
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.			b		

Form **990** (2021)

SCHEDULE A (Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

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

SOLAR ELECTRIC LIGHT FUND 52-1701564 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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 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.) 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 described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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: An organization that normally receives (1) more than 331/3% 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 33¹/₂% 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.) 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 12a. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а 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. 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. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, 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 No (A) (B) (C) (D) (E) **Total**

18

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 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 1,223,637 1,397,942 958,674 1,362,545 2,756,519 7,699,317 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 0 0 0 0 The value of services or facilities 3 furnished by a governmental unit to the organization without charge 0 0 0 0 0 Total. Add lines 1 through 3. . . . 4 1,223,637 1,397,942 958,674 1,362,545 2,756,519 7,699,317 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) 3,537,992 **Public support.** Subtract line 5 from line 4 4,161,325 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 1,223,637 1,397,942 958,674 1,362,545 2,756,519 7,699,317 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 1,881 333 482 0 248 2,944 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 0 O 0 0 **Total support.** Add lines 7 through 10 11 7,702,261 Gross receipts from related activities, etc. (see instructions) 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) **54.03** % 14 15 Public support percentage from 2020 Schedule A, Part II, line 14 331/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 331/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 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 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

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.)

	in the organization rails to quality	diaci tile te	oto notou bon	ow, picase or	Jinpicto i ait	··· <i>)</i>	
	on A. Public Support	() 0047	# N 0040	() 0040	/ N 0000	() 0004	(a =
	dar 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						
2	received. (Do not include any "unusual grants.") 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						
	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	(4) 20	(3) 20 : 0	(0, 20.0	(4) 2020	(0, 202)	(1) 1 0 101
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						
11	Add lines 10a and 10b						
11	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
-	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•			•		* / ; /
Secti	organization, check this box and stop heron C. Computation of Public Suppor						🗲 🗌
15	Public support percentage for 2021 (line 8			13 column (f))		15	%
16	Public support percentage from 2020 Sch		-			16	
	on D. Computation of Investment Inc				<u> </u>		,3
17	Investment income percentage for 2021 (I			by line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2020	Schedule A,	Part III, line 17			18	%
19a	331/3% support tests-2021. If the organi						
	17 is not more than 331/3%, check this box	-	_	•		_	_
b	331/3% support tests—2020. If the organiz						
	line 18 is not more than 331/3%, check this b	_	=	-	-		_
20	Private foundation. If the organization die	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions ► 📙

Supporting Organizations Part IV

(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.)

Se

secu	on A. All Supporting Organizations		Yes	No
1	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.	1	163	140
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).	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.	3a		
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.	3b		
С	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.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
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.	4b		
С	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.	4c		
5а	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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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			
7	benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> 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 paged to a substantial contributor? <i>If "Yes," complete Part Lef School: Id. (Farm 200)</i>	6		
8	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
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.	9a		
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? If "Yes," provide detail in Part VI.	9b		
С	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? If "Yes," provide detail in Part VI.	9c		
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>	10a		
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.)

10b

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
а	11c below, the governing body of a supported organization?	110		
b	A family member of a person described on line 11a above?	11a 11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,	110		
·	provide detail in Part VI.	11c		
Section	on B. Type I Supporting Organizations			
	<u> </u>		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
•		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		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	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).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on 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	ารtru	ctions	s).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>	, .		
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (Activities Test. Answer lines 2a and 2b below.	see in	struct Yes	
2			162	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? <i>If "Yes," then in Part VI identify</i>			
	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 on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Ves." evaluation in Part VI the reasons for the organization's position that its supported organization(s) would			
	"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. <i>Answer lines 3a and 3b below.</i>	20		
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		

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations				
1	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.						
Sect	ion 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					
	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion 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):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors (explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion 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	Check here if the current year is the organization's first as a non-functional content.		ntegrated Type III suppor	ting organization			
•	(see instructions).	any I	mograted Type III suppor	ing organization			

Secti		Current Year			
1	Amounts paid to supported organizations to accomplish	exempt purposes		1	
2	Amounts paid to perform activity that directly furthers exe		rted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3	
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required-	provide details in Part	V/)	5	
6	Other distributions (describe in Part VI). See instructions.	provide detaile in rait	/	6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to whic	h the organization is res	ponsive		
	(provide details in Part VI). See instructions.	3		8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	Ente o amount divided by line o amount		(ii)		(iii)
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistribution Pre-2021	าร	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—explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	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: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
С	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, explain in Part VI . 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:				
а	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
е	Excess from 2021				

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No. 1545-0047

Employer identification number

2021

SOLAR ELECTRIC LIGHT FUND 52-1701564 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ✓ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF ☐ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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 331/3% 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 Name of organization

Employer identification number

52-1701564

SOLAR ELE	ECTRIC LIGHT FUND		52-1701
Part I	Contributors (see instructions).	Use duplicate copies of Part I if additional space	e is needed.

1 -\	/I-1	(-)	(-1)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$150,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 770,726	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$200,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$100,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$36,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$200,000	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

SOLAR ELECTRIC LIGHT FUND

Employer identification number

52-1701564

Part II	Noncash Property (see instructions). Use duplicate co	opies of Part II if additional space	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
}		·	

Employer identification number Name of organization

SOLAR ELI	ECTRIC LIGHT FUND		52-1701564
Part III	Exclusively religious, charitable, etc.,	contributions to organizations described in	n section 501(c)(7), (8), or

52-1701564

		ations completing Pa	rt III, enter the to	 r. Complete columns (a) through (e) and tal of exclusively religious, charitable, etc See instructions.) 		
	Use duplicate copies of Part III if ad			Ψ		
a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held		
	Transferee's name, address, a		fer of gift Relati	onship of transferor to transferee		
a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	Transferee's name, address, a		fer of gift Relationship of transferor to transferee			
i) No. rom Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	Transferee's name, address, a		fer of gift Relati	onship of transferor to transferee		
n) No. From Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	Transferee's name, address, a		fer of gift Relati	onship of transferor to transferee		

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number SOLAR ELECTRIC LIGHT FUND 52-1701564 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) . . 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements . . . 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

Schedu	le D (Form 990) 2021									Page 2
Part	· ,	Collections of	Art, His	torical 1	Treasures	, or O	her Similar As	sets (conti	
3	Using the organization's acquisition, collection items (check all that apply):	accession, and o								
а	☐ Public exhibition		d	☐ Loan	or exchang	e prog	ram			
b	☐ Scholarly research									
С	☐ Preservation for future generations	i								
4	Provide a description of the organizat XIII.	tion's collections	and expla	ain how t	hey further	the or	ganization's exen	npt pur	pose	in Par
5	During the year, did the organization assets to be sold to raise funds rather								⁄es	□ No
Part	IV Escrow and Custodial Arra	angements.								
	Complete if the organization 990, Part X, line 21.		s" on For	m 990, I	Part IV, line	e 9, or	reported an an	nount o	on Fo	orm
1a	Is the organization an agent, trustee included on Form 990, Part X?							ot 🗌 🕻	⁄es	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comp	lete the fo	ollowing to	able:					
							A	mount		
С	Beginning balance					10	;			
d	Additions during the year					10	I			
е	Distributions during the year					16				
f	Ending balance					11	1			
2a	Did the organization include an amoun	nt on Form 990, F	art X, line	21, for e	escrow or c	ustodia	l account liability	? 🗌 \	es	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII. Check he	re if the e	xplanatio	n has been	provid	ed on Part XIII .			
Par	Endowment Funds.									
	Complete if the organization	answered "Yes	s" on For	m 990, I	Part IV, line	e 10.				
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years back	(e) Fo	ur yea	rs back
1a	Beginning of year balance									
b	Contributions									
c	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
e	Other expenditures for facilities and									
Ū	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of t			e (line 1g	g, column (a)) held	as:			
а	Board designated or quasi-endowmen	nt 🕨	%							
b	Permanent endowment ▶	%								
С	Term endowment ► %									
	The percentages on lines 2a, 2b, and	2c should equal ¹	100%.							
3a	Are there endowment funds not in the	e possession of t	he organi	zation th	at are held	and ac	ministered for th	ie		
	organization by:								Ye	s No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(i	i)	
b	If "Yes" on line 3a(ii), are the related o	rganizations liste	d as requi	red on So	chedule R?			3b		
4	Describe in Part XIII the intended uses	•	•						-	_
Part										
	Complete if the organization		s" on For	m 990. l	Part IV, line	e 11a.	See Form 990.	Part X	, line	10.
	Description of property	(a) Cost or o			or other basis		Accumulated		ook va	
	r - r - r - 7	(investr		1 ' '	other)		epreciation	.,-		
1a	Land									
b	Buildings									
~ C	Leasehold improvements	-								
d	Equipment									
•		•		1			1			

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

Schedule D (Form 990) 2021 Page **3**

	(a) Description of security or category	(b) Book value	Form 990, Part X, line 12. (c) Method of valuation:
	(including name of security)	(b) Book value	Cost or end-of-year market value
-	l derivatives		
	neld equity interests		
(3) Other		-	
(A)			
(B)			
(D)		-	
(E) (F)			
(G)		-	
(H)			
	ımn (b) must equal Form 990, Part X, col. (B) line 12.).▶		
Part VIII	Investments – Program Related.	-1	
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11c. See F	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)			Cook of one of your market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	Imn (b) must equal Form 990, Part X, col. (B) line 13.) .		
Part IX	Other Assets.	IV line 11d Coo [Taura 000 Davit V lina 15
	Complete if the organization answered "Yes" on Form 990, Part	iv, ilie i id. See i	-orm 990, Part X, line 15.
	(a) Description		(h) Pook volue
(1) Crypto	(a) Description		(b) Book value
	Assets Held		394,703
(2) Rent De	Assets Held		. , ,
(2) Rent De	Assets Held		394,703
(2) Rent De (3) (4)	Assets Held		394,703
(2) Rent De	Assets Held		394,703
(2) Rent De (3) (4) (5)	Assets Held		394,703
(2) Rent De (3) (4) (5) (6)	Assets Held		394,703
(2) Rent De (3) (4) (5) (6) (7) (8) (9)	Assets Held eposit		394,703
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Colu	Assets Held eposit umn (b) must equal Form 990, Part X, col. (B) line 15.)		394,703
(2) Rent De (3) (4) (5) (6) (7) (8) (9)	Assets Held posit mn (b) must equal Form 990, Part X, col. (B) line 15.)		394,703 405 - ▶ 395,108
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Colu	Assets Held Asset		394,703 405 - ▶ 395,108
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Colu	Assets Held Assets Held Apposit Ann (b) must equal Form 990, Part X, col. (B) line 15.)		394,703 405 . ▶ 395,108 . See Form 990, Part X,
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Colu	Assets Held Assets Held Amn (b) must equal Form 990, Part X, col. (B) line 15.)		. ► 395,108 . See Form 990, Part X, (b) Book value
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Columnation of the columnation of the col	Assets Held Assets Held Apposit Ann (b) must equal Form 990, Part X, col. (B) line 15.)		394,703 405 . ▶ 395,108 . See Form 990, Part X,
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Columnation of the columnation of the col	Assets Held Assets Held Amn (b) must equal Form 990, Part X, col. (B) line 15.)		. ► 395,108 . See Form 990, Part X, (b) Book value
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Columnation of the columnation of the col	Assets Held Assets Held Amn (b) must equal Form 990, Part X, col. (B) line 15.)		. ► 395,108 . See Form 990, Part X, (b) Book value
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Columnation of the columnation of the col	Assets Held Assets Held Amn (b) must equal Form 990, Part X, col. (B) line 15.)		. ► 395,108 . See Form 990, Part X, (b) Book value
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal in (2) (3) (4) (5)	Assets Held Assets Held Amn (b) must equal Form 990, Part X, col. (B) line 15.)		. ► 395,108 . See Form 990, Part X, (b) Book value
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Columnation of the columnation of the col	Assets Held Assets Held Amn (b) must equal Form 990, Part X, col. (B) line 15.)		. ► 395,108 . See Form 990, Part X, (b) Book value
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal in (2) (3) (4) (5) (6)	Assets Held Assets Held Amn (b) must equal Form 990, Part X, col. (B) line 15.)		. ► 395,108 . See Form 990, Part X, (b) Book value
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Colument X 1. (1) Federal in (2) (3) (4) (5) (6) (7)	Assets Held Assets Held Amn (b) must equal Form 990, Part X, col. (B) line 15.)		. ► 395,108 . See Form 990, Part X, (b) Book value
(2) Rent De (3) (4) (5) (6) (7) (8) (9) Total. (Columnation of the columnation of the col	Assets Held Assets Held Amn (b) must equal Form 990, Part X, col. (B) line 15.)		394,703 405 . ► 395,108 . See Form 990, Part X, (b) Book value

Schedule D (Form 990) 2021 Page 4 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. Total revenue, gains, and other support per audited financial statements . 3,253,577 Amounts included on line 1 but not on Form 990. Part VIII. line 12: 2 Donated services and use of facilities 19,830 Recoveries of prior year grants . . . 0 Other (Describe in Part XIII.) 0 2e 19.830 3 Subtract line **2e** from line **1** 3 3,233,747 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 0 Add lines 4a and 4b 4c 0 Total revenue, Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 3.233.747 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. Total expenses and losses per audited financial statements 2,066,133 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 19.830 Prior year adjustments 2b 0 Other losses 2c 0 Other (Describe in Part XIII.) 0 Add lines 2a through 2d 2e 19.830 3 Subtract line 2e from line 1 3 2,046,303 Amounts included on Form 990. Part IX. line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 0 Add lines **4a** and **4b** 4c 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 2,046,303 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. Schedule D, Part X, Line 2 - The Fund performed an evaluation of uncertain tax positions for the year ended December 31, 2021, and determined that there were no matters that would require recognition in the financial statements or that may have any effect on its tax-exempt status. As of December 31, 2021, the statute of limitations for tax years 2019 and 2020 remains open with the U.S. federal jurisdiction of the various states and local jurisdictions in which the Fund files tax returns. It is the Fund's policy to recognize interest and/or penalties related to uncertain tax positions, if any, in income tax expenses. As of December 31, 2021 the Fund had no accruals for interest and/or penalties.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number **SOLAR ELECTRIC LIGHT FUND** 52-1701564

Par	General Information Form 990, Part IV, line		ies Outside	the United States. Con	nplete if the organization ar	nswered "Yes" on
1	For grantmakers. Does the other assistance, the grante award the grants or assistan	es' eligibility	for the grant		selection criteria used to	☐ Yes ☐ No
2	For grantmakers. Describe outside the United States.	in Part V the	e organization	's procedures for monitorir	ng the use of its grants and	other assistance
3	Activities per Region. (The fo	llowing Part	I, line 3 table c	an be duplicated if addition	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	Sub-Saharan Africa	0	0	Program Services	Installation of solar power t	1,186,519
(2)	Central America and the Caribb	0	0	Program Services	Provide support for solar po	54,654
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Subtotal					
b	Total from continuation					
	sheets to Part I					
С	Totals (add lines 3a and 3b)	0	0			1,241,173

Page 2

Schedule F (Form 990) 2021

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

(a) Name of organization	(if applicable)	(c) Hegion	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)
(E)		Middle East and No	Middle East and Nor To provide support fo	735,748	735,748 bank transfers	0		
(2)								
(3)								
(4)								
(5)								
(9)								
(2)								
(8)								
(6)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
2 Enter total nu exempt 501(c)	ımber of recipi)(3) organizatioı	ent organizations lis n by the IRS, or for v	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter •	ecognized as char ounsel has provide	rities by the foreign and a section 501(c)(3)	country, recognized equivalency letter	as a tax · · ▼	0
3 Enter total nur	mber of other o	Enter total number of other organizations or entities	ies				▲	0
							Sch	Schedule F (Form 990) 2021

Schedule F (Form 990) 2021

Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
						Sch	Schedule F (Form 990) 2021

Schedule F (Form 990) 2021 Page **4**

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	✓ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	✓ No

Schedule F (Form 990) 2021

Schedule F (Form 990) 2021 Page 5 Part V **Supplemental Information** Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SCHEDULE J (Form 990)

Compensation Information

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.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

SOLAR ELECTRIC LIGHT FUND

Inspection Employer identification number

52-1701564

Part	Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided 990, Part VII, Section A, line 1a. Complete Part III to provide 990, Part VII, Section A, line 1a.	ded any of the following to or for a person listed on Form ride any relevant information regarding these items.			
	☐ First-class or charter travel	Housing allowance or residence for personal use			
	☐ Travel for companions	Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐	Health or social club dues or initiation fees			
	☐ Discretionary spending account	Personal services (such as maid, chauffeur, chef)			
b		organization follow a written policy regarding payment nses described above? If "No," complete Part III to			
	explain		1b		
2	directors, trustees, and officers, including the CEO/E	to reimbursing or allowing expenses incurred by all executive Director, regarding the items checked on line	2		
	ια:				
3	related organization to establish compensation of the	apply. Do not check any boxes for methods used by a CEO/Executive Director, but explain in Part III.			
	·	Written employment contract			
	·	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Peorganization or a related organization:	art VII, Section A, line 1a, with respect to the filing			
а	Receive a severance payment or change-of-control pa	ayment?	4a		~
b	Participate in or receive payment from a supplementa	I nonqualified retirement plan?	4b		1
С	Participate in or receive payment from an equity-base	ed compensation arrangement?	4c		~
	If "Yes" to any of lines 4a-c, list the persons and prov	ide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) orga				
5		A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:		_		
a	The organization?	<u>+</u>	5a		<i>'</i>
b	Any related organization?		5b		~
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section compensation contingent on the net earnings of:	A, line 1a, did the organization pay or accrue any			
а	The organization?		6a		~
b	Any related organization?	F	6b		~
	If "Yes" on line 6a or 6b, describe in Part III.				
7		A, line 1a, did the organization provide any nonfixed			
		escribe in Part III	7		~
8	Were any amounts reported on Form 990, Part VII, pa				
	· · · · · · · · · · · · · · · · · · ·	gulations section 53.4958-4(a)(3)? If "Yes," describe			
	III Part III		8		\ \
0	If "Voo" on line 0 did the argonization also follow	w the rebuttable presumption presedure described in			
9		v the rebuttable presumption procedure described in	9		

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

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.

NOTE: THE SULL OCCUPING (P/V) (III) OF CAPITICACE HIGHER CONTRACTOR OF CHARGE CONTRACTOR OF C	5	The problem of W. o.s.	Instead Individual Indecedual title total afficial to I offil 950, 1 6	DOUBLOI LOINI 330, LA), Occion A, III	ia, applicable coluill	ו (ש) מוזט (ב) מוזוסטווגי	ו וומר ווומר ווומואומממו:
		(b) DI GANDOWII OI W-2 AI	ומיטוואן-1039 ומיסו	1033-14EO COLLIDEIISALIOII	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
Robert Freling, Executive	(E)	189,000	0	0	0	20,306	209,306	207,377
1 Director	€	0	0	0	0	0	0	
	()							
2	€							
	=							
3	(E)							
	()							
4	(ii)							
	(3)							
5	(E)							
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9	(E)							
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Schedule J (Form 990) 2021

Page 3 Schedule J (Form 990) 2021

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part
or any additional information.
Schedule J (Form 990) 2021

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

SOLA	AR ELECTRIC LIGHT F	UND								52-1	17015	64		
Par		fit Transaction ne organization	ns (section 501 answered "Ye	(c)(3), s" on l	section Form 99	501(c)(4), a 0, Part IV, I	nd se ine 25	ction 501(c)(29) a or 25b, or For	organ m 990	izatio D-EZ,	ns or Part	nly). V, line	40b.	
1	(a) Name of disqualified	norson	(b) Relationship be	etween c	disqualified	person and		(c) Description	of tran	ecetio	2		(d) Cor	rected?
'	(a) Name of disquaimed	person		organiza				(c) Description	i Oi tiai	isactioi			Yes	No
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
2	Enter the amount under section 4958				-	_	-	ied persons du	_	-			l	
3	Enter the amount o										• \$			
J	Litter the amount o	i tax, ii aiiy, oii	iiile 2, above,	TOITID	uiseu by	r the organ	izatioi				4	,		
Par	Complete if th	l/or From Interne organization eported an amo	answered "Ye	s" on l				38a or Form 99	90, Pa	rt IV,	line 2	6; or	f the	
	Organization	T T T T T T T T T T T T T T T T T T T		1	art A, iii i	T 0, 0, 01 27	۷.		1					
(a) N	lame of interested person	(b) Relationship with organization	(c) Purpose of loan	fro	oan to or om the nization?	(e) Origir principal an		(f) Balance due	(g) In c	lefault?	by bo	proved pard or nittee?		ritten ment?
				То	From	1			Yes	No	Yes	No	Yes	No
(1)	Steve Swig	Chairman of B	Cover Expens		111111	8	0,000	50,000		V	V		V	
(2)							-,	55,555						
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
Total	<u> </u>							\$ 50.000						
Part	Grants or Ass	sistance Bene ne organization	fiting Interest	ed Pe	rsons.									
(a)) Name of interested persor		ship between intercand the organization		(c) Amount	of assistance	(d) Type of assistanc	е	(e)) Purpo	se of a	ssistan	се
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(/														

	. (Form 990 or 990-EZ) 2021					age 4
Part IV	Business Transactions Involve Complete if the organization are	ving Interested Persons. nswered "Yes" on Form 990), Part IV, line 28a, 2	8b, or 28c.		
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	
					Yes	No
(1)						1
(2)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Part V	Supplemental Information.	•				
	Provide additional information	for responses to questions	on Schedule L (see	instructions).		
		· · · · · · · · · · · · · · · · · · ·		,		

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

Inspection
Employer identification number

SOLA	R ELECTRIC LIGHT FUND					52-17015	64		
Part	Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash cont amounts repo Form 990, Part V	rted on	Method o			
1 2 3 4 5	Art—Works of art Art—Historical treasures Art—Fractional interests Books and publications Clothing and household								
6 7 8 9	goods	· ·	1		4,782	FMV			
11	Securities – Partnership, LLC, or trust interests								
12 13	Securities – Miscellaneous Qualified conservation contribution – Historic structures								
14	Qualified conservation contribution—Other								
15 16 17 18 19 20	Real estate—Residential Real estate—Commercial Real estate—Other Collectibles								
21 22	Taxidermy								
23 24 25	Scientific specimens Archeological artifacts Other ► (New Solar Panels and R)	~	1		37,391	Donor retail	price		
26 27 28	Other ► (Used Solar Panels) Other ► (Cryptocurrency) Other ► ()	<i>V</i>	1 100		36,800 394,703	original pure	chase		
29	Number of Forms 8283 received which the organization completed					29	0	Yes	No
30a	During the year, did the organizate 28, that it must hold for at least to be used for exempt purposes to	hree years	from the date of the initial	contribution, and	d which isr	n't required	30a	res	V
b 31		gift accep					31	V	
32a		•	ies or related organization				32a		~
ь 33	If "Yes," describe in Part II. If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	perty for which o	column (a) i	s checked,			

Schedule M (Form 990) 2021 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization	Employer identification number					
SOLAR ELECTRIC LIGHT FUND	52-1701564					
Form 990, Part VI, Section A, Line 2 - The Chairman of the Board is the husband of a Director on the Board	l.					
Form 990, Part VI, Section A, Line 8b - SELF has an established audit committee but it did not have meeting	ngs in 2021.					
Form 990, Part VI, Section B, Line 11b - SELF's 990 is prepared by the Director of Finance and then review	ed separately by the Director of					
Finance, the Executive Director and the Board of Directors.						
Form 990, Part VI, Section B, Line 12c - All employees are informed about the conflict of interest policy up						
reviewed by the Director of Finance and the Executive Director. In any case where there may be even the	perception of a conflict of interest,					
steps are taken to ensure that the employee with the potential conflict is not involved in the transaction.						
Form 990, Part VI, Section B, Line 15 - Employee compensation adjustments are made as part of the annual						
process, employee compensation is discussed in a closed session with the Board of Directors and Execu						
Director provides a salary survey of similar positions in the reading for review by the Board of Directors a	s part of the approval process.					
Farm 200 Bart VIII Our flam Out in a 40 OFF Fig. 200 and flam and a flam and a sub-sub-site OFF	Planara da anticola de la compansión de					
Form 990, Part VI, Section C, Line 19 - SELF's 990 and financial statements are posted on the website. SEL	F's governing documents and					
conflict of interest policy are available upon request.						
Form 990, Part XI, Line 9 - Forgiveness of PPP Loan received in 2020 and forgiven in January 0f 2021.						
Form 990, Fait XI, Line 9 - Forgiveness of FFF Loan received in 2020 and forgiven in January of 2021.						

Schedule O, Statement 1 SOLAR ELECTRIC LIGHT FUND

Form: Form 990 (2021)
Page: 1

Header Section

Reasonable Cause Explanations

Explanation

Organization filed for the automatic 6 month extension and that request was approved in IRS notification dated May 23, 2022.

Schedule O, Statement 2 SOLAR ELECTRIC LIGHT FUND

Form: Form 990 (2021)
Page: 2

EIN: 52-1701564

Part III, Line 1

Mission Description

Description

aid agencies, foundations, and philanthropic individuals who are committed to improving the health, education, and economic prospects of the world's poorest citizens.