Form	990
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Department of the Treasury

Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2023 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



A For the 2022 calendar year, or tax year beginning and ending C Name of organization D Employer identification number В Check if applicable Address change PATRIOT FOUNDATION Name 20-0232968 Doing business as change Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated PO BOX 5069 910-315-9292 3,205,144. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended 28374-5069 PINEHURST, NC H(a) Is this a group return Applica-tion pending F Name and address of principal officer: KIM GILLEY Yes X No for subordinates? PO BOX 5069, PINEHURST, NC 28374 H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions J Website: N/A H(c) Group exemption number **K** Form of organization: **X** Corporation L Year of formation: 2003 M State of legal domicile: NC Trust Association Other Part I Summary Briefly describe the organization's mission or most significant activities: FUNDRAISING ORGANIZATION 1 Activities & Governance PROVIDING SCHOLARSHIP FUNDS FOR THE FAMILIES OF SERVICE WOMEN AND 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 7 3 Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 7 4 4 4 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 5 36 Total number of volunteers (estimate if necessary) 6 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h Prior Year **Current Year** 676,284 3,176,313. Contributions and grants (Part VIII, line 1h) 8 Revenue 0. Ο. 9 Program service revenue (Part VIII, line 2g) 185,840. 28,831. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 81 0 11 3,205,144 862,205 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 586,500. 2,362,600. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 64,590. 76,263. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Expenses 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) 101,611. 283,972. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 2,722,835. 752,701. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 109,504. 482,309. Revenue less expenses. Subtract line 18 from line 12 19 **Beginning of Current Year** End of Year o 1,492,250. 1,727,446. 20 Total assets (Part X, line 16) 7,707 20,130. 21 Total liabilities (Part X, line 26) let 472,120. 719,739 1 Net assets or fund balances. Subtract line 21 from line 20 ... 22 Part II Signature Block

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

Sign Here	Signature of officer KIM GILLEY, President / CEO Type or print name and title	KimGilley		Date May 30, 2023			
Paid	Print/Type preparer's name AMY B. THABET, CPA	Preparer's signature	Date 05/30	/23	Check if self-emploved	PTIN P0124340	5
Preparer	Firm's name DMJPS PLLC					0570567	
Use Only	Firm's address 703 GREEN VALLEY CREENSBORO, NC 27			Phone	e no. 336 -	275-9886	
May the IRS discuss this return with the preparer shown above? See instructions X Yes No							
232001 12-1	232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)						

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

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	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	٦
1	Briefly describe the organization's mission:	_
	FUNDRAISING ORGANIZATION PROVIDING SCHOLARSHIP FUNDS FOR THE FAMILIES	
	OF SERVICE WOMEN AND MEN KILLED, WOUNDED, AND INJURED WHILE SERVING	_
	OUR NATION.	_
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	o
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	o
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 2,414,883. including grants of \$ 2,362,600.) (Revenue \$)
	THE ORGANIZATION DISTRIBUTES PRIVATE FUNDS RAISED TO DOWNSTREAM	• ′
	NON-PROFITS TO PROVIDE SUPPORT FOR THE FAMILIES OF FORT BRAGG; NORTH	
	CAROLINA (AIRBORNE); FORT CAMPBELL, KENTUCKY (AIR ASSAULT); SPECIAL	_
	OPERATIONS SOLDIERS; AND OTHER SELECTED WARRIORS. THE ORGANIZATION	
	ALSO RECEIVES FEDERAL AND STATE GRANTS WHICH ARE AWARDED TO STUDENTS	
	THAT MEET CERTAIN REQUIREMENTS DICTATED BY THE LEGISLATURE THROUGH AN	
	IN-HOUSE APPLICATION PROCESS.	
		_
		_
4b	(Code:) (Expenses \$ 143,638. including grants of \$) (Revenue \$))
	SOLDIERS APPRECIATION WEEKEND IS AN ANNUAL GALA EVENT FOR MAINTAINING	•
	AND ENHANCING "GOODWILL" EQUITY PRODUCING INCOME, SERVICES, AND	
	SUPPORT. IT CONNECTS SUPPORTERS TO THE FOUNDATION'S MISSION AND	
	MILITARY COMMUNITY THE FOUNDATION SUPPORTS; AND, BOOSTS PUBLIC AND	
	COMMUNITY AWARENESS OF THE FOUNDATION'S RELEVANCE AND CONTRIBUTIONS	
	RECOGNIZING OUR NATION'S MILITARY'S DEDICATION AND SACRIFICE. THE EVENT	
	ENABLES SUPPORTERS AND SUPPORTED TO BE	
	CONNECTED, ENGAGED, AND PASSIONATE ABOUT THE FOUNDATION'S CAUSE.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses2,558,521.	
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 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	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	<u> </u>
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		X X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	<u> </u>
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	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
•	Schedule D, Part III	8		X X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10	х	
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Λ	<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
•	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
d		11a		x
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a		
D.	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			<u> </u>
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	х	
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	1.10		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			1
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			1
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		77	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X 000	000
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 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			37
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		_ <u> </u>
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	00-		x
20	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		- 23
30		30		x
31	contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i>	31		X
32	Did the organization required, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
UL.	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
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		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	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		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
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	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	<u> </u>
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Par	t 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	2a	4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	וs?		2b	Х	<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
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		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthorit	y over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	count	s (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		<u> </u>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact			5b		X
	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	e orgar	nization solicit			
	any contributions that were not tax deductible as charitable contributions?			<u>6a</u>		_X_
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or	gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					77
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices pr	ovided to the payor?	7a		_X_
				7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa	s requ	ired			
	to file Form 8282?			7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d				37
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		_X_
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the				
_	sponsoring organization have excess business holdings at any time during the year?			8		
	Sponsoring organizations maintaining donor advised funds.					
	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
				9b		
10	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
40	amounts due or received from them.)	11b		40		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
	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.			10-		
а	Is the organization licensed to issue qualified health plans in more than one state?			<u>13a</u>		
L	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	106				
•	organization is licensed to issue qualified health plans	13b 13c				
	Enter the amount of reserves on hand	· · ·		14a		x
				14a 14b		<u> </u>
b 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
15				15		x
	excess parachute payment(s) during the year?			13		21
16	If "Yes," see the instructions and file Form 4720, Schedule N.	incom	e?	16		х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment If "Yes," complete Form 4720, Schedule O.	ncom	e?	10		21
17		hivition				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					
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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

ь 2	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>		7		
b 2						
ь 2	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
2						
	Enter the number of voting members included on line 1a, above, who are independent	1b		7		
	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with a	ny other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under th	e direct	supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3		X
	Did the organization make any significant changes to its governing documents since the prior Form §					X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	opoint c	ne or			
	more members of the governing body?			7a		X
	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					
	persons other than the governing body?			7b		X
	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye					
a	The governing body?	•	-	8a	Х	
	Each committee with authority to act on behalf of the governing body?			8b	Х	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		x
ect	on B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)			
			,		Yes	No
Da	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such cl					
	and branches to ensure their operations are consistent with the organization's exempt purposes?		· · · · · · · · · · · · · · · · · · ·	10b		
а	Has the organization provided a complete copy of this Form 990 to all members of its governing boc	y before	e filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
а	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "					
	on Schedule O how this was done	,		12c		x
	Did the organization have a written whistleblower policy?			13	Х	
	Did the organization have a written document retention and destruction policy?			14	Х	
5	Did the process for determining compensation of the following persons include a review and approve	al by inc	ependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•				
а	The organization's CEO, Executive Director, or top management official			15a		X
	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment wi	th a			
	taxable entity during the year?			16a		x
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga		-			
	exempt status with respect to such arrangements?			16b		
	on C. Disclosure					
7	List the states with which a copy of this Form 990 is required to be filed NONE					
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	nd 990-	T (section 501(c)(3)s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (explain	n on Sc	nedule O)			
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	nd finan	cial	
	statements available to the public during the tax year.		,			
	State the name, address, and telephone number of the person who possesses the organization's bo	oks and	records			
	BETSY MCDOUGALD - 910-295-6317					
	50 RATTLESNAKE TRAIL, PINEHURST, NC 28374					
	12-13-22			Forn	ן 990	(2022)
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Form 990	(2022)
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Part VII	Compensation of Officers,	Directors, Trustees	, Key Employees,	Highest	Compensated
	Employees, and Independe	nt Contractors			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A)	(B)	gu		(0	C)	•		(D)	(E)	(F)
Name and title	Average		not cl	heck		than o		Reportable	Reportable	Estimated
	hours per week		, unles cer an					compensation from	compensation from related	amount of other
		tor						the	organizations	compensation
	hours for	r direc				eq		organization	(W-2/1099-MISC/	from the
	related	tee or	ustee			ensat		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	onal tr		loyee	comp		1099-NEC)		and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) BARRETT WALKER	30.00			0	-	1 - 0	4			
FORMER EXECUTIVE DIRECTOR				х				39,231.	0.	0.
(2) KIM GILLEY	30.00									
EXECUTIVE DIRECTOR				х				18,662.	Ο.	0.
(3) FERD IRIZARRY	20.00									
CHAIRMAN AS OF 10/1/2022		Х		Х				0.	0.	0.
(4) ED BROYHILL	3.00									
DIRECTOR		Х						0.	0.	0.
(5) STAN BRADSHAW	3.00									
DIRECTOR		Х						0.	0.	0.
(6) WHIT MCCRARY	3.00									_
DIRECTOR		Х						0.	0.	0.
(7) BAILEY VAUGHAN	3.00									•
DIRECTOR AND VP OF COMPLIANCE AND TR	2 00	Х		Х				0.	0.	0.
(8) CHRIS MORRIS	3.00	37							0	0
DIRECTOR (9) MATT MAJURI	2 00	Х						0.	0.	0.
DIRECTOR	3.00	х						0.	0.	0
(10) KURT SONNTAG	20.00	Λ						0.	0.	0.
PRESIDENT	20.00	х		х				0.	0.	0.
(11) SPIKE SMITH	5.00	Δ		Δ					0.	0.
FOUNDER	5.00			х				0.	0.	0.
232007 12-13-22										Form 990 (2022)

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232007 12-13-22

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	990 (2022) PATRIOT H	FOUNDATI	ON	[20-02	2329	68	Pa	age 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
	(A) (B) Name and title Average hours per week (list any			(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				n an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		am	(F) timate tount o other pensat	of
		hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC/ 1099-NEC)	(W-2/1099-MIS 1099-NEC)	C/	orga and	om the anizati d relate nizatio	on ed
1h	Subtotal								57,893.		0.			0.
с	Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A							0. 57,893.		0.			0.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	d ab	ove	e) wh	o re	eceived more than \$100,	000 of reportable			Yes	0 No
3	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s			-	•	-		Ŭ		•	ſ	3	Tes	X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	im of reportabl),000? <i>If</i> "Yes,	e co " <i>co</i>	mpe mple	ensa ete S	tion Sche	and and	oth J f	ner compensation from t	he organization		4		x
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," com tion B. Independent Contractors											5		X
1	Complete this table for your five highest co the organization. Report compensation for									, ,	ensati	on fro	m	
(A) (B) Name and business address NONE Description of services							Co	(C omper	;) nsatior	<u>ו</u>				
2	Total number of independent contractors (ii \$100,000 of compensation from the organiz	•	ot lin	nitec	d to f	thos (ted	above) who received mo	ore than				
											F	orm 9	990 (2	2022)

Bit Notice Tunction revenue Unction revenue Unclose is observenue Notice is observenue	Pa	rt V	/	Statement of Re	venue						
Total revenue PRedict or exempt Unciden revenue Predicted or exempt Pr				Check if Schedule O	contains a r	esponse	or note to any lin			(2)	
Boy Membership Joues Ib C Finded organizations Headed organizations It C C All backed organizations It Finded organizations It C C Similar ancents tool included above It Bit Constructions It Bit Constructions It C C Bit Constructions It Bit Constructions It Bit Constructions It C C Bit Constructions It Bit Constructions Soct Statistic Statistics Bit Constructions Soct Statistic Statistics C C Bit Constructions Soct Statistics Bit Constructions Constructions Bit Constructions Const									Related or exempt	Unrelated	(D) Revenue excluded from tax under sections 512 - 514
9 2 a	ts ts	1	а	Federated campaigns		1a					
great Business Code Image: Code	ran		b	Membership dues		1b					
Business Code Image: Code state <	G G		с	Fundraising events		1c					
9 2 a	ar A										
Business Code Image: Code state <	s, G		е	Government grants (contr	ibutions)	1e 2,	371,000.				
Business Code Image: Code state <	i Si		f	All other contributions, gifts,	grants, and						
Business Code Image: Code state <	but			similar amounts not included	above	1f	805,313.				
Business Code Image: Code state <	d O I		g	Noncash contributions included in	lines 1a-1f	1g \$					
george	аS		h	Total. Add lines 1a-1f				<u>3,176,313.</u>			
Observed b							Business Code				
g Total. Add lines 2a-21 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaties 6 a Gross rents 6a 6 b Less: rental expenses 6b 7 a Gross anount from sales of (i) Securities 7 a Gross anount from sales of (i) Securities 8 a Gross income from lundraising events (not including \$\$	e	2	а								
g Total. Add lines 2a:21 3 Investment income (including dividends, interest, and other similar amounts) 28,831. 4 Income from investment of tax-exempt bond proceeds 28,831. 5 Royalties 0 6 a Gross rents 6a b Less: rental expenses 6b c Rental income or (loss) 6c 7 a Gross anount from sales of assets other than inventory radius and sale sepenses 7b c Gass income from from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 9b 8 a Gross income from gaming activities. See Part IV, line 19 9a 9 Less: direct expenses 9a 9 a Gross income rom gaming activities. See Part IV, line 19 9a 9 a Gross income from gaming activities. See Part IV, line 19 9a 9 a Hess: cost of odds soid 10b 10 a Gross sales of inventory, less returns and allowances 10a 11 a	e vic		b								
g Total. Add lines 2a-21 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaties 6 a Gross rents 6a 6 b Less: rental expenses 6b 7 a Gross anount from sales of (i) Securities 7 a Gross anount from sales of (i) Securities 8 a Gross income from lundraising events (not including \$\$	Senu		С								
g Total. Add lines 2a-21 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaties 6 a Gross rents 6a 6 b Less: rental expenses 6b 7 a Gross anount from sales of (i) Securities 7 a Gross anount from sales of (i) Securities 8 a Gross income from lundraising events (not including \$\$	ram levi		d								
g Total. Add lines 2a-21 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaties 6 a Gross rents 6a 6 b Less: rental expenses 6b 7 a Gross anount from sales of (i) Securities 7 a Gross anount from sales of (i) Securities 8 a Gross income from lundraising events (not including \$\$	бŰ										
3 Investment income (including dividends, interest, and other similar amounts) 28,831. 28,831. 4 Income from investment of tax-exempt bond proceeds 0 0 5 Royalties 60 0 6 a Gross rents 60 0 b Less: rental expenses 60 0 6 a Gross rents 60 0 7 a Gross norm or (loss) 0 0 7 a Gross addition or (loss) 0 0 7 a Gross norm from sales of rental income or (loss) 0 0 9 b Less: cost or other basis and sales expenses 70 0 7 a Gross income from fundraising events (not including \$	ā		f								
other similar amounts) 28,831. 28,831. 4 income from investment of tax-exempt bond proceeds			<u> </u>								
4 Income from investment of tax exempt bond proceeds		3			ding dividen	ds, intere	est, and	00 001	00.001		
S Royatties (i) Real (ii) Personal Ga Gross rents Ga (i) Real (ii) Personal B Gross rents Ga (iii) (iii) Personal G A Gross anount from sales of assets other than inventory (iii) (iii) Other S Rorss anount from sales of assets other than inventory Ta (iii) Other B Gross anount from sales of assets other than inventory Ta (iii) Other B Ges income from fundraising events (not including \$ of constructions reported on line 1c). See Ba Ba Ba Part IV, line 18 Ba Ba See See See See 9 Go and allowances 9b See See See See 9 Constructions from gaming activities. See See See See See 9 See See See See See See 9 See See See See See See See See See		_		,				20,031.	20,031.		
6 a Gross rents 6 a (i) Peal (ii) Personal b Less: rental expenses 6 b											
6 a Gross rents 6 a 0 0 b Less: rental expenses 6 b 6 b 6 c 6 c c Rental income or (loss) 6 c 6 c 6 c 6 c 6 c 7 a Gross amount from sales of assets other than inventory 7 a 6 ress cost or other basis 6 c 6 c 6 c a Gross income from basis 7 c		5		Royalties							
b Less: rental expenses 6b c Rental income or (loss) 6c d Net rental income or (loss) 6c 7 Gross amount from sales of assets other than inventory 7a 7a b Less: cost or other basis and sales expenses 7b 7c c Gain or (loss) 7c 7c d Net gain or (loss) 7d 7d g a Gross income from fundraising events (not or including sciences) 9d 8d b Less: citrect expenses 9b 9b 9d c Net income or (loss) from gaming activities 7d dol ownces 10		~	_	0		neai	(ii) Personai				
c Rental income or (loss) &c		6									
d Net rental income or (loss) i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a i) Securities (ii) Other b Less: cost or other basis 7a iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii											
7 a Gross amount from sales of assets other than inventory 7a 10 7 a Gross amount from sales of assets other than inventory 7a 10 b Less: cost or other basis and sales expenses 7b 7c 7 c 7c 10 7c 6 Gain or (loss) 7c 10 7 c 7c 10 8 a Gross income from fundraising events (not including \$\$of contributions reported on line 1c). See Part IV, line 18 8a 9 a Gross income from gaming activities. See Part IV, line 19 9a 9 a Gross income from gaming activities. See Part IV, line 19 9a 9 b Less: direct expenses 9a 9 a Gross ales of inventory, less returns and allowances 10a 10 a Gross ales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory 10a c Net income or (loss) from sales of inventory 10a d All other revenue 10a c Total. Add lines 11a:11d 10 12 Total revenue. See instructions 3, 205, 1444 28, 831. 0.											
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B Less: cost or other basis and sales expenses Tb Tc C Gain or (loss) Tc Tc B Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 Ba Ba B Less: direct expenses Bb Bb Bc 9 Gross income from gaming activities. See Part IV, line 19 9a 9b 9 Gross sincome from gaming activities. See Part IV, line 19 9a 9b 0 Gross sincome from gaming activities. See Part IV, line 19 9a 9b 0 Less: direct expenses 9b Dc Cc 10 Gross sales of inventory, less returns and allowances 10a 10a 10a 0 Cross sold Db Dc Cc Cc 11		'	a			Journeo					
and sales expenses 7b c Gain or (loss) 7c d Net gain or (loss) 7c a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See 8a Part IV, line 18 8a 8b b Less: direct expenses 8b c Net income or (loss) from fundraising events 9a 9 a Gross income from gaming activities 9a b Less: direct expenses 9b c Net income or (loss) from fundraising events 9a 9 a Gross income from gaming activities 9a 10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory 0 c Net income or (loss) from sales of inventory 0 c Met income or (loss) from sales of inventory 0 c Met income or (loss) from sales of inventory 0 c Met income or (loss) from sales of inventory 0 c Met income or (loss) from sales of inventory 0 <tr< td=""><td></td><td></td><td>h</td><td></td><td>10</td><td></td><td></td><td></td><td></td><td></td><td></td></tr<>			h		10						
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8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a 8a 9 a Gross income from gaming activities. See Part IV, line 19 9a 9 a Gross income from gaming activities. See Part IV, line 19 9a 0 a Gross sales of inventory, less returns and allowances 9b 10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b	sev.				· · ·						
B including \$ of contributions reported on line 1c). See Part IV, line 18	<u> </u>	8									
contributions reported on line 1c). See 8a Part IV, line 18 8b b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold c Net income or (loss) from sales of inventory d All other revenue e Total Add lines 11a-11d 12 Total revenue. See instructions 3, 205, 1444. 28, 831. 0.	Ę	•	-								
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b Less: direct expenses 8b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See 9a Part IV, line 19 9a 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory				•	,		1				
c Net income or (loss) from fundraising events			b				,				
Part IV, line 19 9a b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold b Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold 11 a Business Code b C c All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions											
b Less: direct expenses9b		9	а	Gross income from gamin	g activities.	See					
b Less: direct expenses9b				Part IV, line 19		9a	1				
10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory 0 11 a Business Code b 0 c 0 d All other revenue 0 e Total. Add lines 11a-11d 3, 205, 144. 12 Total revenue. See instructions 3, 205, 144.			b				1				
and allowances 10a b Less: cost of goods sold c Net income or (loss) from sales of inventory b Business Code b Image: Code c Image: Code d All other revenue e Total revenue. See instructions 12 Total revenue. See instructions			С	Net income or (loss) from	gaming act	ivities					
b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory 11 a b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions 3, 205, 144. 28,831. 0.		10	а								
c Net income or (loss) from sales of inventory 11 a Business Code b Image: Comparison of the second sec				and allowances		10	a				
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11 a			С	Net income or (loss) from	sales of inv	entory .					
e Total. Add lines 11a-11d 3,205,144. 28,831. 0.	S						Business Code				
e Total. Add lines 11a-11d 3,205,144. 28,831. 0.	eou	11									
e Total. Add lines 11a-11d 3,205,144. 28,831. 0.	lan 'ent										
e Total. Add lines 11a-11d 3,205,144. 28,831. 0.	Bev										
12 Total revenue. See instructions 3,205,144. 28,831. 0.	Nis Nis										
		10						3 205 111	28 831	0	0.
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Form 990 (2022)

Form 990 (2	2022)	PATRIO	r found
Part IX	Statement o	f Functional I	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 respons	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations	2 262 600	2 262 600		
	and domestic governments. See Part IV, line 21	2,362,600.	2,362,600.		
	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees				
	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	69,600.		69,600.	
6	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
)	Other employee benefits				
	Payroll taxes	6,663.		6,663.	
	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	42,880.		42,880.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
2	Advertising and promotion	16,468.		16,468.	
3	Office expenses	120.		120.	
ŀ	Information technology				
5	Royalties				
5	Occupancy				
,	Travel	769.		769.	
;	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
)	Conferences, conventions, and meetings				
)	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization				
	Insurance	1,849.		1,849.	
Ļ	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 0.)				
а	MILITARY SERVICE AWAREN	143,638.	143,638.		
b	PATRIOT RECOVERY ACT	48,483.	48,483.		
c	FUNDRAISING	9,064.			9,06
d	PRINTING	5,494.		5,494.	,
	All other expenses	15,207.	3,800.	11,407.	
Č	Total functional expenses. Add lines 1 through 24e	2,722,835.	2,558,521.	155,250.	9,06
	Joint costs. Complete this line only if the organization	,, 0000	_,,		2,00
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

11080530 790379 400008.0

PATRIOT FOUNDATION

		Check if Schedule O contains a response or no	te to any line in this Part X				
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			161,037.	1	508,461.
	2	Savings and temporary cash investments			76,972.	2	140,819.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		5,000.	4	4,642.	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial contributor, or 35%				
		controlled entity or family member of any of the			5		
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describe				6	
Ś	7	Notes and loans receivable, net		C		7	
Assets	8	Inventories for sale or use				8	
As	9	Prepaid expenses and deferred charges			17,754.	9	
	10a	Land, buildings, and equipment: cost or other	1 1				
		basis. Complete Part VI of Schedule D	10a	0.			
	b	Less: accumulated depreciation			0.	10c	
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line	11	L		12	
	13	Investments - program-related. See Part IV, line			1,231,487.	13	1,073,524.
	14	Intangible assets		L		14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must eq			1,492,250.	16	1,727,446.
	17	Accounts payable and accrued expenses	L	3,880.	17	7,707.	
	18	Grants payable		L		18	
	19	Deferred revenue			16,250.	19	
	20	Tax-exempt bond liabilities		L		20	
	21	Escrow or custodial account liability. Complete	Part IV of Schedule D	L		21	
S	22	Loans and other payables to any current or for	mer officer, director,				
litie		trustee, key employee, creator or founder, sub	stantial contributor, or 35%				
Liabilities		controlled entity or family member of any of the	ese persons	L		22	
	23	Secured mortgages and notes payable to unre	lated third parties	L		23	
	24	Unsecured notes and loans payable to unrelate	ed third parties	L		24	
	25	Other liabilities (including federal income tax, p	ayables to related third				
		parties, and other liabilities not included on line	es 17-24). Complete Part X				
				L		25	
	26				20,130.	26	7,707.
		Organizations that follow FASB ASC 958, ch	eck here X				
ces		and complete lines 27, 28, 32, and 33.			1 204 264		1 010 010
alan	27			······ -	1,384,861.	27	<u>1,212,318.</u> 507,421.
B	28				87,259.	28	507,421.
oun		Organizations that do not follow FASB ASC	958, check here				
Net Assets or Fund Balances		and complete lines 29 through 33.					
ts c	29	Capital stock or trust principal, or current fund				29	
sse	30	Paid-in or capital surplus, or land, building, or e				30	
ťΑ	31	Retained earnings, endowment, accumulated i			1 400 100	31	
Ne	32	Total net assets or fund balances			1,472,120.	32	1,719,739.
	33	Total liabilities and net assets/fund balances			1,492,250.	33	1,727,446.

1,727,446. Form **990** (2022)

400008.1

Part X Balance Sheet

Form	1990 (2022) PATRIOT FOUNDATION	20-	-0232968	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,205	5,1	44.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,722	2,8	35.
3	Revenue less expenses. Subtract line 2 from line 1	3	482	2,3	09.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,472	2,1	20.
5	Net unrealized gains (losses) on investments	5	-234	1,6	90.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,719	9,7	<u>39.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X 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 oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?			Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule C			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u>3a</u>	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			X	

Form **990** (2022)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

OMB No. 1545-0047

Nam	lame of the organization Employer identification numbe										
									0-0232968		
Pa	rt I	Reason for Public C	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.			
The	orgar	ization is not a private found	ation because it is: (I	For lines 1 through 12, cl	heck only o	one box.)					
1		A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b) (1	I)(A)(i).				
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)									
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).				
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,		
		city, and state:									
5		An organization operated for	or the benefit of a col	lege or university owned	l or operate	ed by a go	vernmental u	nit describe	ed in		
		section 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in									
		section 170(b)(1)(A)(vi). (C	omplete Part II.)								
8		A community trust describe	d in section 170(b)	1)(A)(vi). (Complete Parl	t II.)						
9		An agricultural research org			-	ed in conju	inction with a	land-grant	college		
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or		
		university:				-		-			
10	X	An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from		
		activities related to its exem									
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	Ifter June 30, 1975.		
		See section 509(a)(2). (Cor	mplete Part III.)								
11		An organization organized a	and operated exclusi	vely to test for public saf	fety. See	section 50	09(a)(4).				
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	he functio	ns of, or to ca	rry out the	purposes of one or		
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section &	509(a)(3). (Check the box on		
		lines 12a through 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.			
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving		
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or trustee	es of the su	Ipporting		
		organization. You must o	omplete Part IV, Se	ections A and B.							
b		Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organizatio	n(s), by hav	ring		
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported		
		organization(s). You mus	t complete Part IV,	Sections A and C.							
с		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	ly integrate	d with,		
		its supported organization	n(s) (see instructions)). You must complete F	Part IV, Se	ections A,	D, and E.				
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection v	vith its suppor	ted organiz	zation(s)		
		that is not functionally int	egrated. The organiz	ation generally must sati	isfy a distri	ibution rec	quirement and	an attentiv	/eness		
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	v .				
е		Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type I	I, Type III			
		functionally integrated, or	Type III non-function	nally integrated supportir	ng organiz	ation.					
f	Ent	er the number of supported o	organizations								
g		vide the following informatior									
		(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(IV) IS the orga in your governi	anization listed ng document?	(v) Amount of		(vi) Amount of other		
		organization		above (see instructions))	Yes	No	support (see in	istructions)	support (see instructions)		
Tota	al										

Schedule A	(Form	990	202

2	0 –	0	2	3	2	9	6	8	Page 2
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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	J						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
•	column (f)						
	Public support. Subtract line 5 from line 4.						
	••	(a) 2018	(1) 2010	(a) 2020	(4) 2021	(a) 2022	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
-	Amounts from line 4 Gross income from interest,						
8	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
5	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	· · · · · · · · · · · · · · · · · · ·	etc. (see instruction	ons)			12	•
13	First 5 years. If the Form 990 is for the		,			501(c)(3)	
	organization, check this box and stop	phere			-		
Sec	ction C. Computation of Publi	c Support Per	rcentage				
14	Public support percentage for 2022 (I	ine 6, column (f), d	livided by line 11,	column (f))		14	%
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	%
16 a	33 1/3% support test - 2022. If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organizatior	۱ <u></u>			
b	33 1/3% support test - 2021. If the o	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	6 or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiz	ation			
17a	10% -facts-and-circumstances test	: - 2022. If the org	ganization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he	ere. Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	st. The organization	on qualifies as a pi	ublicly supported of	organization		
b	10% -facts-and-circumstances test	- 2021. If the org	ganization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the facts-and-circu		•				
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a		
						Schedule A	(Form 990) 2022

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Schedule A (Form 990) 2022

PATRIOT FOUNDATION

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

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

Section A. Public Support (c) 2020 (d) 2021 Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (e) 2022 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 842,163. 879,949. 1267961. 676,284. 3025628. 6691985. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 105,308. 105,308. 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 676,284. 3025628. 947,471 879,949. 1267961. 6797293. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 0. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 0 6797293. Public support. (Subtract line 7c from line 6.) Section B. Total Support (b) 2019 (e) 2022 Calendar year (or fiscal year beginning in) (a) 2018 (c) 2020 (d) 2021 (f) Total 947,471. 879,949 1267961. 676,284. 9 Amounts from line 6 3025628. 6797293. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 144,842. 188,241. 185,921. 28,831. 547,835. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 188,241 144,842. 185,921. 28,831. 547,835. c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on **12** Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 947,471. 1068190. 1412803. 862,205. 3054459. 7345128. 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** Section C. Computation of Public Support Percentage 92.54 % Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 15 16 Public support percentage from 2021 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 7.46 17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) % 17 18 18 Investment income percentage from 2021 Schedule A, Part III, line 17 % 19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is notX more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization gualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990) 2022 232023 12-09-22 16

2022.03050 PATRIOT FOUNDATION

1

2

3a

Yes No

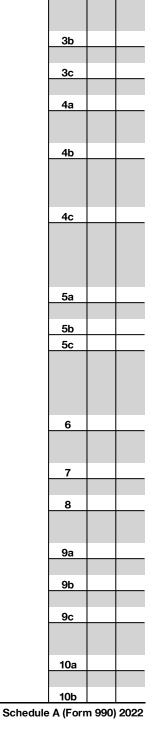
Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 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).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined 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.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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17

		Drganizations (contin	nued)
Schedule A	(Form 990) 2022	PATRIOT	FOUNDATION

1

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			

bid the governing body, members of the governing body, oncers acting in their official capacity, of membership of one of
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.
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,

	<u>1. or controlled th</u>		
Section C. T	ype II Suppor	rting Organi	ižations

 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
 Image: Control or management of the support of the 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 managed
 Image: Control of the support of the support

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

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	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 E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to s	satisfy the Integral Part	Test during the year	(see instructions).
•	Check the box heat to the method that the organization used to s		i est during the year	(000 1100 000010)

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c		The organization supported a governmental entity.	Describe in Part VI how	you supported a governmental er	ntity (see instruction <u>s).</u>
---	--	---	-------------------------	---------------------------------	-----------------------------------

18

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

Yes No 2a ... 2a ... 2b ... 3a ... 3b ...

Schedule A (Form 990) 2022

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2022.03050 PATRIOT FOUNDATION

1						
Sect	All other Type III non-functionally integrated supporting organizations mu ion A - Adjusted Net Income	<u>st complete s</u>	(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3.	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
	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				
	Average monthly cash balances	1b				
	Fair market value of other non-exempt-use assets	1c				
	Total (add lines 1a, 1b, and 1c)	1d				
	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				
	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-function	ally integrated	d Type III supporting orga	nization (see		

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

instructions).

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

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2022.03050 PATRIOT FOUNDATION

20

400008.1

2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	3			
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	IS	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
b	Excess from 2019				
C	Excess from 2020				
d	Excess from 2021				
e	Excess from 2022				
				Sc	hedule A (Form 990) 2022

Schedule A (Form 990) 2022 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions

1 Amounts paid to supported organizations to accomplish exempt purposes

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1

Current Year

Schedule A	(Form 990) 2022	PATRIOT	FOUNDATIO	ON		20-0232968	Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, li	nation. Provid 2, 3b, 3c, 4b, 4c ines 2 and 3; Par	e the explanation , 5a, 6, 9a, 9b, 9c t IV, Section E, lir	s required by Part I c, 11a, 11b, and 11 nes 1c, 2a, 2b, 3a, a	I, line 10; Part II, line 17a or c; Part IV, Section B, lines 1 and 3b; Part V, line 1; Part V ete this part for any additior	17b; Part III, line 12; and 2; Part IV, Section , Section B, line 1e; Pa	C,
	(See instructions.)	s; and Part V, Se	ction E, lines 2, 5	, and 6. Also compl	ete this part for any addition	al information.	
232028 12-09-2	2			21		Schedule A (Form 9	90) 2022

SCHEDULE C	Po	litical Campaign a	nd Lobbyin	g Activities		OMB No. 1545-0047			
(Form 990)	For Organizations Exempt From Income Tax Under section 501(c) and section 527								
	_	-				ZUZZ			
Department of the Treasury		if the organization is described to			J-EZ.	Open to Public Inspection			
Internal Revenue Service		to www.irs.gov/Form990 for ins				-			
-		Form 990, Part IV, line 3, or For		e 46 (Political Camp	aign Act	tivities), then			
		plete Parts I-A and B. Do not com		Do not complete Dar	+ 1 D				
 Section 501(c) (other Section 527 organization 		1(c)(3)) organizations: Complete P	arts I-A and C below.	Do not complete Par	τ I-В.				
•	•	Form 990, Part IV, line 4, or For	m 990-E7 Part VI lir	o 47 (Lobbying Acti	vitios) t	hen			
		nave filed Form 5768 (election und							
		nave NOT filed Form 5768 (election	()/	•					
		Form 990, Part IV, line 5 (Proxy	()	, ,		•			
Tax) (See separate inst						, , , ,			
 Section 501(c)(4), (5) 	, or (6) organizat	ions: Complete Part III.							
Name of organization					Employ	er identification number			
		FOUNDATION				20-0232968			
Part I-A Comple	ete if the org	anization is exempt under	section 501(c) o	or is a section 52	27 orga	nization.			
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities in	n Part IV.					
2 Political campaign	activity expendit	ures			\$_				
3 Volunteer hours for	political campai	gn activities							
Part I-B Compl	oto if the era	anization is exempt under	- anotion 501(a)/2	0					
=				-					
		incurred by the organization under			\$				
Enter the amount of any excise tax incurred by organization managers under section 4955 \$									
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No 4a Was a correction made? Yes No									
b If "Yes," describe in									
		anization is exempt under	section 501(c).	except section {	501(c)(3	3).			
-	-	by the filing organization for secti		-		,			
		ization's funds contributed to othe			¥_				
exempt function ac			-		\$				
•		. Add lines 1 and 2. Enter here and			···· · _				
-	-				\$				
						Yes No			
5 Enter the names, a	ddresses and em	ployer identification number (EIN)	of all section 527 poli	tical organizations to	which th	ne filing organization			
made payments. Fo	or each organizat	tion listed, enter the amount paid f	rom the filing organiza	ation's funds. Also er	nter the a	mount of political			
		omptly and directly delivered to a s		,	eparate s	egregated fund or a			
political action com	mittee (PAC). If a	additional space is needed, provid	e information in Part I	V.					
(a) Name	e	(b) Address	(c) EIN	(d) Amount paid		(e) Amount of political			
				filing organization funds. If none, ent		ontributions received and promptly and directly			
						delivered to a separate			
						political organization.			
						If none, enter -0			
	A - A NI - A								

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

Schedule C (Form 990) 2022

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			NDATION			232968 Page 2
Part II-A Complete if the org	anizatio	n is exer	npt under section	n 501(c)(3) and file	d Form 5768 (el	ection under
section 501(h)).						
A Check if the filing organiza	tion belon	gs to an affi	liated group (and list in	n Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and shar			• •			
B Check if the filing organiza	tion check	ed box A a	nd "limited control" pro	ovisions apply.		
		oying Expe eans amou	nditures Ints paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience pub	lic opinion (grassroots lobbying)			
b Total lobbying expenditures to influ	ience a leç	gislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add lii	nes 1a and	d1b)				
d Other exempt purpose expenditure						
e Total exempt purpose expenditure	s (add line	s 1c and 1d)			
f Lobbying nontaxable amount. Ente	er the amo	unt from the	e following table in bot	h columns.		
If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable am	iount is:		
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000),000	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.					
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.						
Over \$17,000,000						
g Grassroots nontaxable amount (en		,				
h Subtract line 1g from line 1a. If zero						
i Subtract line 1f from line 1c. If zero	-					
j If there is an amount other than zer						
reporting section 4911 tax for this	year?			0		Yes No
(Some organizations th		a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all o	of the five columns b	elow.
	Lobl	oying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures					0-2	ulo C (Form 990) 2022

Schedule C (Form 990) 2022

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Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)		
of the lobbying activity.		Yes	No	Amo	ount	
1 During the year, did the filing organization attempt to influence foreign, national, state, or						
local legislation, including any attempt to influence public opinion on a legislative matter						
or referendum, through the use of:			х			
a Volunteers?b Paid staff or management (include compensation in expenses reported on lines 1c through			X			
c Media advertisements?			X			
d Mailings to members, legislators, or the public?			X			
e Publications, or published or broadcast statements?			X			
f Grants to other organizations for lobbying purposes?	Г		X			
		х		24	1,000.	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			X		,	
i Other activities?			X			
j Total. Add lines 1c through 1i				24	1,000.	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			Х		,	
b If "Yes," enter the amount of any tax incurred under section 4912						
c If "Yes," enter the amount of any tax incurred by organization managers under section 491						
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(ō), or sec	tion		
501(c)(6).						
				Yes	No	
1 Were substantially all (90% or more) dues received nondeductible by members?			1			
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2			
3 Did the organization agree to carry over lobbying and political campaign activity expenditu	res from the	prior year	? 3			
Part III-B Complete if the organization is exempt under section 501(c)(4						
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are an	swered "I	No" OR	(b) Part I	II-A, line	3, is	
answered "Yes."						
1 Dues, assessments and similar amounts from members			1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amoun	ts of politica	al				
expenses for which the section 527(f) tax was paid).						
a Current year			2 a			
b Carryover from last year			2 b			
c Total			2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e)	e) dues 🛛		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion	of the exces	SS				
does the organization agree to carryover to the reasonable estimate of nondeductible lobb	ying and pol	itical				
expenditures next year?	expenditures next year?					
5 Taxable amount of lobbying and political expenditures. See instructions			5			
Part IV Supplemental Information						
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affili	ated group li	st); Part II-	A, lines 1 a	nd 2 (See		
instructions); and Part II-B, line 1. Also, complete this part for any additional information.						
PART II-B, LINE 1, LOBBYING ACTIVITIES:						
ENCOURAGED LEGISLATORS AND OTHER GOVERNMENT OFFIC	CIALS 1	ro inc	REASE			

SUPPORT PROVIDED TO MILITARY SERVICE MEMBERS AND THEIR FAMILIES.

Schedule C (Form 990) 2022

232043 11-08-22

SC			al Financial Statements		0	MB No. 15	645-0047
(Forn	n 990)		nization answered "Yes" on Form 990,), 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.			202	22
	ment of the Treasury		Attach to Form 990.			Open to	
	Revenue Service		0 for instructions and the latest information.	Emai		Inspecti	
Nam	e of the organization	PATRIOT FOUNDATION		Emp	oloyer ider 20-0	02329	
Par	t I Organiza		d Funds or Other Similar Funds or Ac	coun			
	organization	n answered "Yes" on Form 990, Part IV, lir	ne 6.				
			(a) Donor advised funds (I	b) Fun	ds and oth	er accou	nts
1		nd of year					
2		f contributions to (during year)					
3		f grants from (during year)					
4		t end of year					
5	-		writing that the assets held in donor advised fund] X	
6			exclusive legal control?		L	Yes	└── No
6	•	•	advisors in writing that grant funds can be used or or donor advisor, or for any other purpose conferri				
	impermissible priva			•		Yes	No
Par			ganization answered "Yes" on Form 990, Part IV,				
1		ervation easements held by the organizati					
	Preservation	of land for public use (for example, recrea	ation or education)	rically	important	land area	L
	Protection o	f natural habitat	Preservation of a certif	ied his	storic struc	ture	
	Preservation	of open space					
2	Complete lines 2a	through 2d if the organization held a quali	fied conservation contribution in the form of a con	iserva	tion easem	ent on th	e last
	day of the tax year				Held at the	e End of th	e Tax Year
а	Total number of co		2a				
b	-			2b			
С			ucture included in (a)	2c			
d		vation easements included in (c) acquired					
•				2d			
3		vation easements modified, transferred, re	leased, extinguished, or terminated by the organiz	zation	during the	tax	
4	year	 where property subject to conservation ea	sement is located				
5		tion have a written policy regarding the pe					
•	-	orcement of the conservation easements i				Yes	No
6	,		handling of violations, and enforcing conservation				
						0 1	
7	Amount of expense	es incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation eas	ement	ts during th	ne year	
8			ve satisfy the requirements of section 170(h)(4)(B)(_	
						Yes	No
9		-	on easements in its revenue and expense stateme				
			note to the organization's financial statements tha	t desc	ribes the		
Par		ounting for conservation easements.	f Art, Historical Treasures, or Other Si	mila	r Accate		
1 41		the organization answered "Yes" on Form			Abbelo	•	
12		•	58, not to report in its revenue statement and bala	nce st	eet works		
ia			blic exhibition, education, or research in furtheran				
			ncial statements that describes these items.				
b	•		58, to report in its revenue statement and balance	sheet	works of		
	-	-	c exhibition, education, or research in furtherance			,	
		ng amounts relating to these items:		-			
	(i) Revenue inclue	ded on Form 990, Part VIII, line 1			\$		
					\$		
2	If the organization	received or held works of art, historical tre	asures, or other similar assets for financial gain, p				
	•	unts required to be reported under FASB A	0				
а	Revenue included	on Form 990, Part VIII, line 1			\$		

b Assets included in Form 990, Part X

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33 2022.03050 PATRIOT FOUNDATION

Schedule D (Form 990) 2022

\$

Sche		FOUNDATION				20-02			age 2		
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Othe	er Simila	r Assets	s (contil	nued)			
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that make s	significant	use of its					
	collection items (check all that apply):										
а	Public exhibition	d		hange program							
b	Scholarly research	е	Other								
С											
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's exe	mpt purpo	se in Part	XIII.				
5	During the year, did the organization solicit or				r assets		_		_		
	to be sold to raise funds rather than to be ma						Yes		No		
Par	t IV Escrow and Custodial Arrang		te if the organizatio	n answered "Yes" or	n Form 990	D, Part IV,	line 9, or				
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodia		•				-		-		
	on Form 990, Part X?					L	Yes		_ No		
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:			1	•				
							Amoun	t			
	Beginning balance										
	Additions during the year										
	Distributions during the year										
	Ending balance										
	Did the organization include an amount on Fo				• • • • • • • • • • • • • • • • • • • •	L	Yes		No		
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete it										
		(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Fou	r vears	hack		
10	Reginning of year balance	1,194,278.	796,597.			565,150.	(0) + 64		353.		
	, , , , , , , , , , , , , , , , , , ,										
	b Contributions 112,219 c Net investment earnings, gains, and losses -149,896 397,681 112,219 119,228										
	c Net investment earnings, gains, and losses -149,896. 397,681. 112,219. 119,228. d Grants or scholarships										
	Other expenditures for facilities										
e											
f	Administrative expenses										
	End of year balance	1,044,382.	1,194,278.	796,597.	6	584,378.		565	150.		
2	Provide the estimated percentage of the current	, ,		,							
- a	Board designated or quasi-endowment	96.0000	%								
b	Permanent endowment 4.0000	%	_/0								
c		/°									
•	The percentages on lines 2a, 2b, and 2c shou										
3a	Are there endowment funds not in the posses		tion that are held ar	nd administered for t	he						
	organization by:	5						Yes	No		
	(i) Unrelated organizations						3a(i)		X		
	(ii) Related organizations						3a(ii)		X		
b	If "Yes" on line 3a(ii), are the related organization						3b				
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipm	ent.									
	Complete if the organization answered	d "Yes" on Form 990,	, Part IV, line 11a. S	ee Form 990, Part X	, line 10.						
	Description of property	(a) Cost or ot basis (investm	• •		Accumulat epreciation		(d) Boo	k valu	е		
1a	Land										
b	Buildings										
с	Leasehold improvements										
	Equipment										
	Other										
Tota	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part X	<u>(, column (B), line 1</u>	0c.)					0.		
						Cabadula	D (E				

Schedule D (Form 990) 2022

232052 09-01-22

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Schedule D (I	Form 990)	2022	PATRIOT	FOUNDATION

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		(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
Closely held equity interest Other (A) (B) (C) (D) (E) (F) (G) (H) (I. (Col. (b) must equal Form 9 art VIII Investments - Complete if the or	-			
Other A) B) C) D) (E) (F) G) (F) G) (H) I. (Col. (b) must equal Form 9 art VIII Investments - Complete if the or	S			
A) B) C) D) (E) (F) G) (F) G) (H) I. (Col. (b) must equal Form 9 art VIII Investments - Complete if the or				
B) C) D) (E) (F) G) H) I. (Col. (b) must equal Form 9 art VIII Investments - Complete if the or				
C) D) (E) (F) G) H) I. (Col. (b) must equal Form 9 art VIII Investments - Complete if the o				
D) (E) (F) (G) (H) II. (Col. (b) must equal Form 9 art VIII Investments - Complete if the o				
(F) G) H) I. (Col. (b) must equal Form 9 art VIII Investments - Complete if the o				
(F) G) (H) I. (Col. (b) must equal Form 9 art VIII Investments - Complete if the o				
G) H) II. (Col. (b) must equal Form 9 art VIII Investments Complete if the o				
H) II. (Col. (b) must equal Form 9 art VIII Investments - Complete if the o				
I. (Col. (b) must equal Form 9 art VIII Investments - Complete if the o				
Complete if the or				
Complete if the o	90, Part X, col. (B) line 12.)			
	•			
(a) Decorintion	ganization answered "Yes"	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
	of investment	(b) Book value	(c) Method of valuation: Cost of	or end-of-year market value
(1) PATRIOT END	OWMENT FUND -			
(2) VANGUARD BD		981,432.	END-OF-YEAR MARK	KET VALUE
(3) PATRIOT END	OWMENT FUND -			
(4) VANGUARD CA	ГО	62,949.	END-OF-YEAR MARK	KET VALUE
(5) PATRIOT NC	529 SAVINGS			
(6) PLAN		29,143.	END-OF-YEAR MARK	KET VALUE
(7)				
(8)				
(9)				
I. (Col. (b) must equal Form 9	90, Part X, col. (B) line 13.)	1,073,524.		
art IX Other Assets				
Complete if the or	ganization answered "Yes"	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
	(a)	Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
· /	Form 990, Part X, col. (B) line	15)		
art X Other Liabilit	es.			
Complete if the o	ganization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, lii	ne 25.
(a)	Description of liability	· · · · ·		(b) Book value
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(8) (9)				
		05.)		
	Form 990, Part X, col. (B) line		the organization's financial stateme	

Schedule D (Form 990) 2022

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	dule D (Form 990) 2022 PATRIOT FOUNDATION				0232968 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue p	r Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			
1	Total revenue, gains, and other support per audited financial statements			1	2,970,454.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-234,6	90.	
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	-234,690.
3	Subtract line 2e from line 1			3	3,205,144.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
					0.
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	3,205,144.
5				5	3,205,144.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	ents With		5	3,205,144. n.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem	nents With a.	n Expenses	per Return	3,205,144.
5 Pa	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>) t XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 122	nents With a.	n Expenses	per Return	3,205,144. n.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) t XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	nents With a.	n Expenses	per Return	3,205,144. n.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	a. 2a	n Expenses	per Return	3,205,144. n.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) t XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	a. 2a 2b	n Expenses	per Return	3,205,144. n.
5 Pa 1 2 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	1ents With a. 2a 2b 2c	n Expenses	per Return	3,205,144. n.
5 Pa 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2a 2b 2c 2d	n Expenses	5 per Return	3,205,144. n. 2,722,835. 0.
5 Pa 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	n Expenses	5 per Return 1 2e	3,205,144. n.
5 Par 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	n Expenses	5 per Return 1 2e	3,205,144. n. 2,722,835. 0.
5 Par 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	n Expenses	5 per Return 1 2e	3,205,144. n. 2,722,835. 0.
5 Pa 1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2a 2b 2c 2d	n Expenses	5 per Return 1 2e	3,205,144. n. 2,722,835. 0.
5 Pa 1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 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	2a 2b 2c 2d 2d 4a 4b	n Expenses	5 per Return 1 2e 3	3,205,144. n. 2,722,835. 0. 2,722,835.
5 Pa 1 2 a b c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 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 Other (Describe in Part XIII.)	2a 2b 2c 2d 2d 4a 4b	n Expenses	5 per Return 1 2e 3 3	3,205,144. n. 2,722,835. 0. 2,722,835.

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

PART X, LINE 2:

THE FOUNDATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3).

ACCORDINGLY, NO PROVISION HAS BEEN MADE FOR INCOME TAXES.

THE FOUNDATION ACCOUNTS FOR UNCERTAIN INCOME TAX POSITIONS BY PRESCRIBING

A MINIMUM PROBABILITY THRESHOLD A TAX POSITION MUST MEET BEFORE A

FINANCIAL STATEMENT INCOME TAX BENEFIT IS RECOGNIZED. THE MINIMUM

THRESHOLD IS DEFINED AS A TAX POSITION, BASED SOLELY ON ITS TECHNICAL

MERITS, THAT WOULD MORE LIKELY THAN NOT BE SUSTAINED UPON EXAMINATION BY

THE RELEVANT TAX AUTHORITY WITH KNOWLEDGE OF THE SAME FACTS. THE TAX

BENEFIT TO BE RECOGNIZED IS MEASURED AS THE LARGEST AMOUNT OF BENEFIT THAT

36

IS GREATER THAN 50% LIKELY OF BEING REALIZED UPON ULTIMATE RESOLUTION.

232054 09-01-22

Part XIII Supplemental Information (continued)

BASED ON ALL KNOWN FACTS AND CIRCUMSTANCES AND CURRENT TAX LAW, THE

PARTNERSHIP BELIEVES THE TOTAL AMOUNT OF UNCERTAIN INCOME TAX POSITION

LIABILITIES AND RELATED ACCRUED INTEREST ARE NOT MATERIAL TO ITS FINANCIAL POSITION.

AS OF DECEMBER 31, 2022 AND INCLUDING THE PREVIOUS THREE YEARS CONSIDERING EXTENSIONS, THE FOUNDATION'S INCOME TAX RETURNS ARE OPEN AND SUBJECT TO EXAMINATION BY TAX AUTHORITIES WITH RELEVANT JURISDICTION. SHOULD SUCH AN EXAMINATION TAKE PLACE, MANAGEMENT DOES NOT ANTICIPATE ANY SIGNIFICANT ISSUES RELATED TO THE OPEN YEARS.

Schedule D (Form 990) 2022

232055 09-01-22

SCHEDULE I	G	rants and Oth	er Assistan	ce to Organ	izations.		OMB No. 1545-0047
(Form 990)	Gov	vernments, an	nd Individua	ls in the Ŭni	ted States		2022
Department of the Treasury	Comple	ete il the organization	Attach to Forn		11 IV, III 2 1 01 22.		Open to Public
Internal Revenue Service		Go to www.irs	.gov/Form990 for	the latest inform	ation.		Inspection
Name of the organization PATRIOT	FOUNDATION						Employer identification number 20-0232968
Part I General Information on Grants	and Assistance						
1 Does the organization maintain records							
criteria used to award the grants or as	sistance?						Yes X No
2 Describe in Part IV the organization's p Part II Grants and Other Assistance to					anization answered "Y	es" on Form 990 Part	IV line 21 for any
recipient that received more than	•						
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CAMPBELL UNIVERSITY							
40 T T LANIER STREET							
BUIES CREEK, NC 27506	56-0529940		60,000.	0.			SCHOLARSHIP FUNDING
EAST CAROLINA UNIVERSITY							
G120 OLD CAFETERIA COMPLEX							
GREENVILLE, NC 27858	56-6000403		20,000.	0.			SCHOLARSHIP FUNDING
FAYETTEVILLE STATE UNIVERSITY 1200 MURCHISON ROAD							
FAYETTEVILLE, NC 28301	56-1238736		20,000.	0.			SCHOLARSHIP FUNDING
NCSEAA PO BOX 41349							
RALEIGH, NC 27629	56-6172047		665,000.	0.			SCHOLARSHIP FUNDING
UNIVERSITY OF MOUNT OLIVE 634 HENDERSON STREET							
MOUNT OLIVE, NC 28365	56-6053091		10,000.	0.			SCHOLARSHIP FUNDING
UNIVERSITY OF NC AT GREENSBORO PO BOX 26170							
GREENSBORO, NC 27402	56-6001468		10,000.	0.			SCHOLARSHIP FUNDING
2 Enter total number of section 501(c)(3)	and government org	anizations listed in the	e line 1 table				10.
3 Enter total number of other organizatio	ns listed in the line 1	table					

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

		licette el gamzatione				1	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ORTH CAROLINA A&T STATE NIVERSITY - 1601 E MARKET STREET							
GREENSBORO, NC 27411	56-6000007		10,000.	0.			SCHOLARSHIP FUNDING
			,				

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

Schedule I (Form 990)

Page 1

20-0232968

Schedule I (Form 990)

Schedule I (Form 990) 2022 PATRIOT FOUNDATION

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

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

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

Schedule I (Form 990) 2022

SCHEDULE O (Form 990)

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



PATRIOT FOUNDATION

N 20-0232968

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

MEN KILLED, WOUNDED, AND INJURED WHILE SERVING OUR NATION.

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

THE TAX RETURN IS REVIEWED AND APPROVED BY THE TREASURER AND PRESIDENT OF

THE ORGANIZATION. THE TAX RETURN IS DISCUSSED AND PROVIDED TO EACH BOARD

MEMBER AT A BOARD MEETING PRIOR TO FILING.

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

ALL POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON

REQUEST.

FORM 990 PART XII, LINE 2C

THE FINANCE COMMITTEE IS ENTRUSTED BY THE BOARD TO PROVIDE OVERSIGHT

OVER THE AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS AND THE

SELECTION OF AN INDEPENDENT ACCOUNTANT. THE PROCESS HAS NOT CHANGED IN

THE CURRENT TAX YEAR.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 10-28-22