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2020

OMB No. 1545-0052

Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

or	caler	ndar year 2020, or tax year beginning 01-01-20)20 , aı	nd er	nding 12-31-	2020	
		indation ZABETH BATES FOUNDATION			A Employer id	entification numbe	r
IVI <i>F</i>	AKY ELIA	ZABETH BATES FOUNDATION			84-6028054		
		l street (or P.O. box number if mail is not delivered to street address) ICK MOUNTAIN DRIVE	Room/suite		B Telephone nu	mber (see instructior	ns)
	033 00	GK 1105117 LIN BILLY			(303) 803-5518	:	
		, state or province, country, and ZIP or foreign postal code O 80433			C If exemption	application is pendin	g, check here
	l l	that apply: Initial return Initial return of a	former public charity		D.1 Foreign or	ganizations shock be	F
ı Cı	теск ат	l that apply: □ Initial return □ Initial return of a □ Final return □ Amended return	former public charity			ganizations, check he ganizations meeting	▶ ⊔
		Address change Name change				k here and attach cor	
C	neck ty	pe of organization: \checkmark Section 501(c)(3) exempt private	foundation			ındation status was t n 507(b)(1)(A), chec	
<u></u>	Section	4947(a)(1) nonexempt charitable trust	e private foundation				
of	year (f	xet value of all assets at end rom Part II, col. (c), ▶\$ 7,817,921 J Accounting method: □ Other (specify) (Part I, column (d) must	✓ Cash ☐ Accru	al		ation is in a 60-month n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	2,510,363				
	2	Check ▶ ☐ if the foundation is not required to attach					
	3	Sch. B Interest on savings and temporary cash investments	11		11		
	4	Dividends and interest from securities	258,877		258,877		
	5a	Gross rents			·		
KIE	ь	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a					
ž	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain					
	10a	Gross sales less returns and allowances					
	ь	Less: Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	2,769,251		258,888		
	13	Compensation of officers, directors, trustees, etc.	35,000		8,000	8,000	35,000
	14	Other employee salaries and wages					
Se.	15 16a	Legal fees (attach schedule)					
<u>=</u>	b	Accounting fees (attach schedule)	2,812		2,812	2,812	
Ĭ		Other professional fees (attach schedule)	2,523		2,523		
ıl e	17	Interest	_				
and Administrative Expenses	18	Taxes (attach schedule) (see instructions)	4,268				
	19	Depreciation (attach schedule) and depletion					
	20	Occupancy					
2	21	Travel, conferences, and meetings	2,000				
<u> </u>	22	Printing and publications	1,401				
Operating	23	Total operating and administrative expenses.	1,401				
e e	~~	Add lines 13 through 23	48,004		13,335	13,335	35,000
5	25	Contributions, gifts, grants paid	150,170		·	<u> </u>	150,170
	26	Total expenses and disbursements. Add lines 24 and					
	27	25 Subtract line 26 from line 12:	198,174		13,335	13,335	185,170
	a	Excess of revenue over expenses and					
		disbursements Net investment income (if negative, enter -0-)	2,571,077		<u> </u>		
	b c	Adjusted net income (if negative, enter -0-)			245,553		
	ı -	- \	Ī	I			İ

Page 2

7.817.921

2,881,495

2,881,495

2,881,495

2,881,495

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310,418

2,571,077

2,881,495

2,881,495 Form **990-PF** (2020)

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24 25

26 27

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29

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Part III

Other liabilities (describe ▶_

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions . . .

Net assets with donor restrictions .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Liabilities

Assets or Fund Balances

Net

2

3

		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					_
		Less: allowance for doubtful accounts ▶					
	5	Grants receivable					_
	6	Receivables due from officers, directors, trustees, and other					_
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule)					_
		Less: allowance for doubtful accounts ▶					
Į.	8	Inventories for sale or use					_
Assets	9	Prepaid expenses and deferred charges					_
As	10 a	Investments—U.S. and state government obligations (attach schedule)	14,040		13,110	13,1	110
	b	Investments—corporate stock (attach schedule)	249,378	% J	2,759,371	7,695,7	797
	С	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment: basis ▶					_

₩

3,309

3,309

310,418

310,418

313,727

Investments—U.S. and state government obligations (attach schedule) Investments—corporate stock (attach schedule) Investments—corporate bonds (attach schedule) Investments—land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) Investments—mortgage loans Investments—other (attach schedule) Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) Other assets (describe ▶ Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I) Accounts payable and accrued expenses Grants payable Deferred revenue Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗀

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds

Foundations that follow FASB ASC 958, check here

	(a) List and describ 2-story brick wa		kind(s) of property s se; or common stoc				How acqu P—Purch D—Donat	ase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	1						5 50114			
	-									
•										
	(a)		(f)				(g)		(h)
	(e) Gross sales price		Depreciation				other basis			r (loss)
			(or allow	/able)		plus expe	ense of sale		(e) plus (f) minus (g)
a										
<u>b</u>										
c d										
е										
	Complete only for assets	show	ing gain in column ((h) and ow	ned hy	the foundation (nn 12/31/69			I)
		311000	(i)		nied by		(k)		Gains (Col. (l) h) gain minus
	(i) F.M.V. as of 12/31/69		Adjusted	basis		Excess	of col. (i)		col. (k), but not	less than -0-) or
	1.M.V. as of 12/31/03		as of 12/	31/69		over col.	. (j), if any		Losses (fr	om col.(h))
a										
b										
<u> </u>										
d										
е										
				(If ani	n, also enter in Pa	ort I line 7	- , 1	<u> </u>	
2	Capital gain net income	or (ne	et capital loss)	{		s), enter -0- in P		- }		
	, ,	•	, ,	ţ	,	,,	•	_ /	2	
3	Net short-term capital o				-					
	If gain, also enter in Pa in Part I, line 8	rt I, lir			-		-	l l	3	
	iii rait I, iiile o							. [[
Part	V Qualification U	Jndei	Section 4940(e) for Re	educe	d Tax on Net	Investme	nt Inc	ome	
ECT	ION 4940(e) REPEA	LED	ON DECEMBER 2	20, 2019	- DO	NOT COMPLE	TE			
	Reserved			•						
	(a)		(b)			(c)			(d)	
	Reserved		Reserved			Reserved			Reserved	
2	Reserved							2		
3	Reserved							3		
4	Reserved							4		
5	Reserved							5		
	Reserved							6		
-	Reserved							7		
	Reserved ,									
o	neserved , i i i i							8		

Page **6**

Pal	LT ATT-B	Statements Regard	ııng	Activities for which	Form 4/20 May Be	Required (Continu	eu)				
5a	During the	year did the foundation p	рау о	r incur any amount to:						Yes	No
	(1) Carry	on propaganda, or otherv	vise a	ttempt to influence legisl	ation (section 4945(e))?	☐ Yes		No			
	(2) Influe	nce the outcome of any s	oecifi:	c public election (see sect	tion 4955); or to carry	Tes	• 🖭	NO			
	on, dir	rectly or indirectly, any vo	ter re	egistration drive?		· · 🔲 Yes	. 🗸	No			
	(3) Provid	le a grant to an individual	for t	ravel, study, or other sim	ilar purposes?	☐ Yes		No			
		le a grant to an organizati tion 4945(d)(4)(A)? See ii		•	, -		_				
		le for any purpose other t				· · L Yes	, <u>~</u>	No			
		tional purposes, or for the	•	·		⊔ Yes	. 🗸	No			
b	If any ans	wer is "Yes" to $5a(1)-(5)$,	did a	any of the transactions fa	il to qualify under the ex	ceptions described in					
	Regulation	ns section 53.4945 or in a	curre	ent notice regarding disas	ter assistance? See instr	uctions			5b		
	Organizati	ons relying on a current n	otice	regarding disaster assist	ance check here		Г	1			
C	If the ansv	wer is "Yes" to question 5	a(4),	does the foundation clain	n exemption from the			•			
	tax becaus	se it maintained expenditu	ıre re	sponsibility for the grant?	2	· · □ Yes	. П	No			
	If "Yes," a	ttach the statement requi	red b	y Regulations section 53.	4945–5(d).	Tes	• ⊔	NO			
6a	Did the fo	undation, during the year,	rece	ive any funds, directly or	indirectly, to pay premi	ums on					
	•	I benefit contract?				·	. 🗸	No			
b		undation, during the year,	pay	premiums, directly or ind	irectly, on a personal be	nefit contract?			6b		
	If "Yes" to	6b, file Form 8870.									
7a	At any tim	ne during the tax year, wa	s the	foundation a party to a p	rohibited tax shelter tra	nsaction?	, \square	No			
b	If "Yes", d	id the foundation receive	any p	proceeds or have any net	income attributable to th		•	140	7b		
8	Is the four	ndation subject to the sec	tion 4	1960 tax on payment(s) o	f more than \$1,000,000	in remuneration or					
	excess par	rachute payment during tl	ne ye	ar?		· · 🔲 Yes	. \square	No			
Do.	+ VIII	Information About (Offic	ers, Directors, Trust	ees, Foundation Ma				yees,	,	
Ра	rt VIII	and Contractors									
1	List all of	ficers, directors, truste	es, fo	oundation managers ar	d their compensation	. See instructions					
	(a) Na	me and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions employee benefit pla deferred compensa	ns and			nse acc Ilowano	
See /	Additional D	ata Table		,							
			1								
			1								
			1								
	Company	ation of five highest-pa	id en	nnlovees (other than t	nose included on line	(see instructions)	Tf no	ne e	ntor "	NONE	71
	Compense	ation of five ingliest pa	ia ci			(d) Contributions		iic, c			
(a)		address of each employee ore than \$50,000	paid	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benef plans and deferr compensation	it			se acco	
					-						
-	I	6	+-	0.000							
ıota	i number of	f other employees paid ov	er \$5	0,000				r-	OO	0-85	2020
								ror	III YY	0-PF (ZUZU)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NO	DNE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	_
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1	Amount
2	_
All other program-related investments. See instructions.	
Total. Add lines 1 through 3	

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1b

2

За 3h

4

5

185,170

185,170

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Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

2

3

4

5

298,261

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185,170

Part XIII Undistributed Income (see instruction	tions)			
	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				298,261
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only			185,170	
b Total for prior years: 20, 20, 20				
3 Excess distributions carryover, if any, to 2020:				
a From 2015				

b From 2016. . c From 2017. . **d** From 2018. . e From 2019. . . .

same amount must be shown in column (a).)

a Applied to 2019, but not more than line 2a

6 Enter the net total of each column as

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a

10 Analysis of line 9: a Excess from 2016. **b** Excess from 2017. . c Excess from 2018. . d Excess from 2019. . e Excess from 2020. .

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020

indicated below:

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions). **d** Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2020. (If an amount appears in column (d), the

f Total of lines 3a through e. 4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$

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	Part XIV Private Operating Found	lations (see instru	ictions and Part \	VII-A, question 9)		
1a	If the foundation has received a ruling or de foundation, and the ruling is effective for 20			erating		
b	Check box to indicate whether the organizat	ion is a private opera	ating foundation des	scribed in section \Box] 4942(j)(3) or \Box	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(-) T-1-1
	income from Part I or the minimum	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Total
	investment return from Part X for each year listed		(-)	(-,	(-,	
b	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b						
	of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	Supplementary Information assets at any time during the	ie year—see inst		foundation had	\$5,000 or more i	n
1 a	Information Regarding Foundation Man List any managers of the foundation who ha before the close of any tax year (but only if	ve contributed more				ו
b	List any managers of the foundation who ow ownership of a partnership or other entity)			, , ,	arge portion of the	
2	Information Regarding Contribution, G	ant, Gift, Loan, Sch	olarship, etc., Pr	ograms:		
	Check here ▶ ☐ if the foundation only mal unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a	ition makes gifts, gra	nts, etc. to individu	le organizations and uals or organizations	does not accept under	
a	The name, address, and telephone number RYAN KARGOL	or e-mail address of	the person to whon	n applications should	be addressed:	

8899 BLACK MOUNTAIN DRIVE CONIFER, CO 80433 (303) 670-7944

 ${f b}$ The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines: NONE

LETTER

factors:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

HUMANE SOCIETIES AND ANIMAL SHELTERS

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Part XV Supplementary Informa	tion (continued)			
3 Grants and Contributions Paid	During the Year or Appro	oved for Futur	re Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year See Additional Data Table	,			
	<u>'</u>		▶ 3a	150,170
Total	 		▶ 3a	130,170
b Approved for future payment		1		
		1		
		1		
		1		
		1		
Total			▶ 2h	

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iter gross	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
L Progran	n service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.
а						
b						
с						
d						
	and contracts from government agencies					
	rship dues and assessments					
Interes investn	t on savings and temporary cash nents					
				14		
	nds and interest from securities			14		
	stal income or (loss) from real estate:					
	financed property					
	ebt-financed property					
	nvestment income					
	(loss) from sales of assets other than					
invento				14		
Net inc	ome or (loss) from special events:			17		
	profit or (loss) from sales of inventory					
	revenue: a					
b						
с						
c						
c d e 2 Subtot	al. Add columns (b), (d), and (e).					
c d e 2 Subtot 3 Total.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			1	.3	
c d e 2 Subtot 3 Total. (See we	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations.)			3	
c d e 2 Subtot 3 Total. (See we	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	lations.)			.3	
c d e 2 Subtot 3 Total. (See w	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Belationship of Activities to th	lations.) ne Accomplisi	nment of Exem	pt Purposes		
c d e 2 Subtot 3 Total. (See work art XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu -B Relationship of Activities to th Explain below how each activity for which	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See w	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Belationship of Activities to th	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot 3 Total. (See work art XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot 3 Total. (See work art XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot 3 Total. (See work art XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot 3 Total. (See w Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e 2 Subtot 3 Total. (See work art XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	
c d e Subtot Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	nment of Exem	pt Purposes	uted importantly to	

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations	
Did the same	inting discrete as in discrete, and as in the state of th	П

Рē	ILT YAT	Exempt Or	ganizations										
1 (oid the c	organization directly or than section 501(or indirectly enga	age in s) or i	any of the	following with a 527, relating to p	any poli	other organizatio	n described in sect s?	tion 501		Yes	No
аΊ	ransfers	s from the reporting	g foundation to a r	oncha	ritable exe	empt organizatio	n c	of:					
(1) Cas	h								.	1a(1)		No
((2) Oth	er assets									1a(2)		No
		ansactions:											
		es of assets to a no	·	-						ŀ	1b(1)		No
		chases of assets fro					•			ŀ	1b(2)		No
		ital of facilities, equ					•			- t	1b(3)		No
		mbursement arrang								- t	1b(4) 1b(5)		No No
		ns or loan guarante ormance of services									1b(6)		No
		of facilities, equipm	•		-					·	1c		No
	_	swer to any of the	· · ·		=					market v			-110
c	of the go	ods, other assets,	or services given b	y the	reporting	foundation. If th	e f	oundation receive	d less than fair ma	rket value			
į	n any tr	ansaction or sharin	g arrangement, sh	ow in	column (c	1) the value of the	ne (goods, other asse	ts, or services rece	ived.			
(a) l	ine No.	(b) Amount involv	red (c) Name of	nonch	aritable exe	mpt organization		(d) Description of	transfers, transactions	s. and shar	ina arrar	naement	ts
` ,		(-,	(,,			, ,		()	,	,		<u> </u>	
	+												
2 a I	s the fo	undation directly or	indirectly affiliate	d with	, or relate	d to, one or mor	e t	ax-exempt organi	zations				
		d in section 501(c)	•		•					res 🔽] No		
		complete the follow	•	•	. , . , ,								
	,	(a) Name of orga	anization		(i	b) Type of organiza	tior	า	(c) Descriptio	n of relatio	nship		
	Un	der penalties of pe	rjury, I declare tha	t I ha	ve examin	ed this return, ir	nclu	uding accompanyi	ng schedules and s	tatement	s, and t	o the l	best
	of	my knowledge and	belief, it is true, c										
Sig		ich preparer has ar	ny knowleage.			I				May th	e IRS dis	cuce th	ic
He		*****				2021-10-14		*****		return			
								—) ——		with th below	e prepar	er show	/n
	'	Signature of office	er or trustee			Date		7 Title			str.)	Yes ☑	No I
		Print/Type prep	parer's name	Prep	arer's Sigr	nature		Date	Check if self-	PTIN			
									employed ▶ □		P00990	652	
Pai	id	Ryan Kargol						2021-10-14					
_	pare	Firm's name	Rocky Mountain	I Tax ஃ	Accounting	a Services Inc		<u> </u>	l				
	e Onl	i ii iii o maine P	.tocky Flouritain	. un u	ccoantail	g 30111003 1110				Firm's EI	N >		
		Firm's address	▶ 13640 Lake Av	e			_						
			Brighton, CO	30603						Phone no	o. (303)	450-7	7605

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter Contributions to (e) other allowances hours per week (b) devoted to position -0-) employee benefit plans and deferred compensation Marilyn C Brisco 6,000 DIRECTOR 001.00 15842 West Remington Drive Surprise, AZ 853742189

Daniel K Wolfe IV	DIRECTOR 002.00	7,000	
5206 MERIDIAN AVE SAN JOSE, CA 95118			
Rebecca A wolfe	DIRECTOR	7,000	
81 Skyland Tijeras, NM 87059	002.00		
Pyan Kargol	DIRECTOR	9 000	

Rebecca A wolfe	DIRECTOR	7,000	
81 Skyland Tijeras, NM 87059	002.00		
Ryan Kargol	DIRECTOR	8,000	
341 Eureka Street Central City CO 80427	010.00		

Tijeras, NM 87059			
Ryan Kargol	DIRECTOR	8,000	
341 Eureka Street Central City, CO 80427	010.00		
lan Wolfe	DIRECTOR	7,000	

341 Eureka Street Central City, CO 80427	010.00	8,000	
Jan Wolfe	DIRECTOR	7,000	

001.00 11100 Lagrima De Oro 9413

Albuquerque, NM 87111

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or husiness)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
Animal Rescue of the Rockies	NONE	PF	DONATION	1,800

Breckenridge, CO 80424			
Almost Home Adpotions 6010 West 88th Avenue Westminster, CO, 80031	PF	DONATION	

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Almost Home Adpotions 6010 West 88th Avenue Westminster, CO 80031	PF	DONATION	1,800
Ark Valley Humane Society-Sunshine Shelter	PF	DONATION	6,100

Westminster, CO 80031			
Ark Valley Humane Society-Sunshine Shelter	PF	DONATION	6,100
PO Box 1335			

Ark Valley Humane Society-Sunshine Shelter	PF	DONATION	6,100
PO Box 1335			
Buena Vista, CO 812111335			

150,170

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
Boulder Valley Humane Society 2323 55th Street Boulder, CO 80301	PF	DONATION	5,100

Boulder, CO 80301			
Breeder Release & Adoption Service 18500 County Rd 477 Boncarbo, CO 81024	PF	DONATION	

П	18500 County Rd 477 Boncarbo, CO 81024	PF	DONATION	1,500
	CATS ALIVE Alamosa COPO Box 84	PF	DONATION	1,800

Boncarbo, CO 81024			
CATS ALIVE Alamosa COPO Box 84 Alamosa, CO 811010084	PF	DONATION	1,800

CATS ALIVE Alamosa COPO Box 84 Alamosa, CO 811010084	PF	DONATION	1,80

Alamosa, CO 811010084		BOWNION	1,0
Total	 	▶ 3a	150,170

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
CAWS-Delta CountyPO Box 1736 Paonia, CO 814281736	PF	DONATION	2,000

Paonia, CO 814281736			
Colorado Humane Society SPCA Inc 2080 South Quebec Street Denver, CO 802313298	PF	DONATION	5,000

Colorado Humane Society SPCA Inc 2080 South Quebec Street Denver, CO 802313298	PF	DONATION	5,000
Denver Dumb Friends League 2080 South Quebec Street	PF	DONATION	24,000
Damusa CO 903313309			

Denver Dumb Friends League 2080 South Quebec Street Denver, CO 802313298 PF DONATION 24,000	Denver, CO 802313298			
	2080 South Quebec Street	PF	DONATION	24,000

Denver Dumb Friends League 2080 South Quebec Street Denver, CO 802313298		·

Denver, CO 802313298			
Total		> 3a	150 170

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Eagle Valley Humane Society		PF	DONATION	2,200

Evergreen Animal Protective League	DE	DONATION	
PO Box 4105 Eagle, CO 816314105			
Eagle valley numarie Society	PF	DONATION	

agle, CO 010314103		
vergreen Animal Protective League O Box 2517 vergreen. CO 804372517	PF	DONATION

Evergreen Animal Protective League PO Box 2517 Evergreen, CO 804372517	PF	DONATION	2,500
Divine Feline Fix (Rocky Mnt Alley Cat)	PF	DONATION	4,000

PO Box 2517 Evergreen, CO 804372517			
Divine Feline Fix (Rocky Mnt Alley Cat)	PF	DONATION	4,

Evergreen, CO 804372517			
Divine Feline Fix (Rocky Mnt Alley Cat) 2600 W 2nd Ave Suite 10 Denver, CO 80219	PF	DONATION	4,000

Divine Feline Fix (Rocky Mnt Alley Cat) 2600 W 2nd Ave Suite 10 Denver, CO 80219	PF	DONATION	4,000
Total	 	▶ 3a	150,170

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
Feline Rescue (Look What the Cat Brought In) 2129 East Boulder Streeet Colorado Springs, CO 80909	PF	DONATION	2,100

Colorado Springs, CO 80909			
Foothills Animal Shelter 580 McIntyre Street Golden, CO 80401	PF	DONATION	4,000
Fort Morgan Humane Society	PF	DONATION	2,500

580 McIntyre Street Golden, CO 80401			,
Fort Morgan Humane Society 900 West Rialroad Fort Morgan, CO 80701	PF	DONATION	2,500

150,170

Golden, CO 80401				
Fort Morgan Humane Society 900 West Rialroad Fort Morgan, CO 80701	P	PF	DONATION	2,500

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

or substantial contributor

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
Freedom Service Dogs 2000 West Union Avenue		PF	DONATION	5,000

Englewood, CO 80110			
Hamlett Spay & Neuter Clinic Inc 3360 Citadel Drive North Colorado Springs, CO 80909	PF	DONATION	4,500

Hamlett Spay & Neuter Clinic Inc 3360 Citadel Drive North Colorado Springs, CO 80909	PF	DONATION	4,500
Humane Society Pagosa Springs PO Box 2230 Pagosa Springs, CO 81147	PF	DONATION	5,000

Colorado Springs, CO 80909			
Humane Society Pagosa Springs PO Box 2230 Pagosa Springs, CO 81147	PF	DONATION	5,000
Total	150.170		

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Humane Society Pikes Peak Region		PF	DONATION	5,000

Humane Society Pikes Peak Region 610 Abbott Lane Colorado Springs, CO 80905	PF	DONATION	
Humane Society South Platte Valley	PF	DONATION	

Total .

Humane Society South Platte Valley 2129 West Chenago Avenue Littleton, CO 80120	PF	DONATION	

Humane Society South Platte Valley 2129 West Chenago Avenue Littleton, CO 80120	PF	DONATION	5,000
Intermountain Humane Society	PF	DONATION	4,000

Littleton, CO 80120	
Intermountain Humane Society PO Box 1250 Conifer, CO 804331250	DONATION 4,000

150,170

Intermountain Humane Society	PF	DONATION	4,00
PO Box 1250			·
Conifer, CO 804331250			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

150,170

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
International Hearing Dog Inc 5901 East 89th Avenue Henderson, CO 80640	PF	DONATION	5,000
Larimer Humane Society	PF	DONATION	5,000

Larimer Humane Society 5137 South College Avenue Fort Collins, CO 80525	PF	DONATION	
Longmont Humane Society	PF	DONATION	

5137 South College Avenue Fort Collins, CO 80525		DONATION	3,
Longmont Humane Society 9595 Nelson Road	PF	DONATION	4,

Fort Collins, CO 80525			
Longmont Humane Society	PF	DONATION	4,50

Fort Collins, CO 80525			
Longmont Humane Society 9595 Nelson Road	PF	DONATION	4,500

Longmont Humane Society	PF	DONATION	4,500
9595 Nelson Road			
Longmont, CO 80501			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
Max Fund Inc720 West 10th Avenue Denver, CO 80204	PF	DONATION	4,000
Montrose Animal Protective Agency	PF	DONATION	3,000

Montrose Animal Protective Agency PO Box 2009 Montrose, CO 814022009	PF	DONATION	
National Mill Dog Pessue	DE	DONATION	

Total .

PO Box 2009 Montrose, CO 814022009			
National Mill Dog Rescue 14570 Westchester Dr	PF	DONATION	2,50

			<u> </u>
National Mill Dog Rescue	PF	DONATION	2,500
14570 Westchester Dr			
Colorado Springs, CO 80921			

150,170

3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial contributor			
a Paid during the year				
PAWS for Life Animal Welfare & Protective Society		PF	DONATION	3,000

800 N Pueblo Blvd Pueblo, CO 81003			
PET Aid Colorado (Harrison Memorial Hosp)	PF	DONATION	

PET Aid Colorado (Harrison Memorial Hosp) 191 Yuma Street Denver, CO 802231205	PF	DONATION	3

Hosp) 191 Yuma Street Denver, CO 802231205			
Second Chance Humane Society Ridgeway PO Box 2096	PF	DONATION	4,100

3,000

Denver, CO 802231205			
Second Chance Humane Society Ridgeway PO Box 2096 Ridgeway, CO 814322096	PF	DONATION	4,100

Second Chance Humane Society	PF	DONATION	4,10
Ridgeway			
PO Box 2096			
Ridgeway, CO 814322096			
		I.	

Ridgeway PO Box 2096 Ridgeway, CO 814322096		.,-
Total	 ▶ 3a	150,170

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

recipient

150,170

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
Second Chance Wildlife RehabPueblo 2730 Colfax Avenue Pueblo, CO 81003	PF	DONATION	2,500
Southern Colorado Spay & Neuter Assn 1700 South Prairie Avenue	PF	DONATION	2,600

1700 South Prairie Avenue Pueblo, CO 81005	PF	DONATION	
Teller County Regional Animal Center	PF	DONATION	

Southern Colorado Spay & Neuter Assn 1700 South Prairie Avenue Pueblo, CO 81005	PF	DONATION	2,6
Teller County Regional Animal Center	PF	DONATION	5,6

Pueblo, CO 81005			
Teller County Regional Animal Center	PF	DONATION	5,641

Teller County Regional Animal Center	PF	DONATION	5,641
PO Box 904			

rener courte, regional rannial center		2011/112011	3,011
PO Box 904			
Divide, CO 808140904			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

Ft Collins Cat Rescue2321 E Mulberry St

Fort Collins, CO 80524

Total .

a Paid during the year			
Upper Rio Grande Animal SocietyConour Shelter PO Box 369 Monte Vista, CO 811440369	PF	DONATION	5,000
Wet Mountain Wildlife Rehab 743 Crestview Drive Florence, CO 81226	PF	DONATION	1,500

PF

DONATION

▶ 3a

1,000

150,170

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

150,170

PAWS Crested Butte		DF	DONATION	2 92
a Paid during the year				
Name and address (nome of basiness)	or substantial contributor			

any foundation manager

Name and address (home or husiness)

26651 Colorado HWY 135 Crested Butte, CO 81224		BONATION	2,3
Crested Dutte, CO 01224			<u> </u>
		·	1

efile GRAPHIC print - DO NOT P	efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491287017221						
TY 2020 Accounting Fees Schedule							
Name: MARY ELIZABETH BATES FOUNDATION							
EIN: 84-6028054							
Softv	vare ID : 2001	1406					
Software \	Version: 20.0.	2.0					
Category Amount Net Investment Income Income Furposes							
ACCOUNTING	2,	.812	2,812	2,812			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491287017221

TY 2020 Investments Corporate Stock Schedule

Name: MARY ELIZABETH BATES FOUNDATION

EIN: 84-6028054

Software ID: 20011406

Software Version: 20.0.2.0

Software Version: 20.0.2.0				
Investments Corporation Stock Schedule	1			
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
5245 shares of ATT CORP	16,595	162,621		
2400 shares of CONSOLIDATED EDISON	16,595	182,472		
468 shares of DUKE ENERGY	9,800	45,986		
15360 shares of EXXON MOBILE CORP	21,234	891,494		
1272 shares of HONEYWELL	7,442	283,758		
968 shares of ILLINOIS TOOLWORKS		222,776		
1600 shares of INGREDION	424	148,896		
3207 shares of JANUS GROWTH AND INCOME	102,532	230,436		
3585 shares of MATTEL INC		79,336		
20 shares of NORTHROP GRUMMAN		6,744		
1442 shares of PACIFIC GAS AND ELECTRIC CORP	11,769	15,362		
18216 shares of PEPSICO	2,518,843	4,951,059		
607 shares of SEMPRA ENERY	8,780	81,441		
600 shares of TUPPERWARE	200	15,300		
1430 shares of VERIZON COMMUNICATIONS	9,225	80,609		
415 shares of VODAFONE GROUP	870	7,889		
2075 shares of XCELL ENERGY	21,866	144,150		
3168 shares of BRITISH AMERICAN TOBACCO	4,690	119,117		
690 shares of ENBRIDGE	8,506	26,351		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491287017221	
TY 2020 Other Expenses Sche	dule				
-					
Name:	MARY ELIZABET	TH BATES FOUND	ATION		
EIN:	84-6028054				
Software ID:	ID: 20011406				
Software Version:	20.0.2.0				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
OFFICE EXPENSE	800				
TELEPHONE	601				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491287017221
TY 2020 Other Liabilities Sche	dule			
Name:	MARY ELIZABE	TH BATES F	OUNDATION	
EIN:	84-6028054			
Software ID:	20011406			
Software Version:	20.0.2.0			
Description	n		Beginning of Year - Book Value	End of Year - Book Value
FEDERAL EXCISE TAX			3,309	

efile GRAPHIC print - DO NOT PROCI	ESS As Filed Data	-	DLN	N: 93491287017221
TY 2020 Other Professional Fees Schedule				
Name: MARY ELIZABETH BATES FOUNDATION				
EIN: 84-6028054				
Software ID: 20011406				
Software Version: 20.0.2.0				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	2,523	2,523	2,523	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491287017221
TY 2020 Taxes Schedule				_
Name:	: MARY ELIZABETH BATES FOUNDATION			
EIN:	: 84-6028054			
Software ID:	: 20011406			
Software Version:	n: 20.0.2.0			
Taxes Schedule				4
Category	Amount	Net Investment	Adjusted Net	Disbursements
		Income	Income	for Charitable Purposes
PROPERTY TAX	543			
FORIEGN TAX PAID CANADA ENBRIDGE	416			
FEDERAL EXCISE TAX	3,309			

efile GRAPHIC print - DO	NOT PROCESS As F	Filed Data -			DLN: 93491287017221	
Schedule B		Schedule of Cor	ntributors		OMB No. 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF. For to www.irs.gov/Form990 for the latest information.		2020			
Name of the organization MARY ELIZABETH BATES FO	UNDATION			Employer i	dentification number	
				84-6028054	<u> </u>	
Organization type (check	. one).					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) none	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	☐ 527 political org	☐ 527 political organization				
Form 990-PF	✓ 501(c)(3) exem	501(c)(3) exempt private foundation				
	☐ 4947(a)(1) none	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	☐ 501(c)(3) taxab	501(c)(3) taxable private foundation				
		EZ, or 990-PF that receiv ontributor. Complete Parts				
Special Rules						
under sections 509 received from any	P(a)(1) and 170(b)(1)(A)(one contributor, during t	01(c)(3) filing Form 990 or (vi), that checked Schedul the year, total contribution line 1. Complete Parts I a	e A (Form 990 or 990- s of the greater of (1) \$	EZ), Part II, line 13,	, 16a, or 16b, and that	
during the year, to	al contributions of more	01(c)(7), (8), or (10) filing than \$1,000 <i>exclusively</i> for children or animals. Con	or religious, charitable,	, scientific, literary, e		
during the year, co If this box is check purpose. Don't cor	ntributions <i>exclusively</i> fo ed, enter here the total o nplete any of the parts u	01(c)(7), (8), or (10) filing or religious, charitable, etc contributions that were rec inless the General Rule a aling \$5,000 or more durin	c., purposes, but no succeived during the year to pplies to this organizate.	ch contributions tota for an <i>exclusively</i> re tion because it rece	aled more than \$1,000. eligious, charitable, etc., eived <i>nonexclusively</i>	
Caution: An organization 990-EZ, or 990-PF), but it or on its Form 990PF, Par 990-EZ, or 990-PF).	must answer "No" on Pa	art IV, line 2, of its Form 9	90; or check the box o	on line H of its Form		
For Paperwork Reduction Act for Form 990, 990-EZ, or 990-		s Cat. No	. 30613X	Schedule B (Form 990	0, 990-EZ, or 990-PF) (2020)	

lame of organization	on	Employer identification	number
1ARY ELIZABETH B	BATES FOUNDATION	84-6028054	
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if add	itional space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)