EXTENDED RETURN **Return of Private Foundation**

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

ľ,

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

Open to Public Inspection

		ndation				~	byer identii	ication number	
		HINE NOW FOUNDATION	—.—.			85	-4333	3454	
		street (or P O box number if mail is not delive	red to street address)		Room/suite	B Telep	hone numbe	er (see instructions	5)
		OLD CONCORD ROAD , state or province, country, and ZIP or foreign ;	nantal cada						
-		CHER	NC 28732			C If exer	mption appli	cation is pending,	check here
		all that apply X Initial return		n of a former public	charity	 D 1 Fc	reian organ	izations, check he	ere •
•		Final return	Amended	•	onunty				
		Address cha	=			1		izations meeting t ck here and attach	
H C	heck t	ype of organization X Section 50	<u> </u>		PIL	- 16 0000	ata farindati		Landor vador
		1 4947(a)(1) nonexempt charitable to	· · · · · ·	e private foundation	UT	1		on status was tern (A), check here	▶
			Accounting method		crual	F If the t	foundation i	s in a 60-month te	rmination
		ear (from Part II, col (c),	Other (specify)		, o, da.			'(b)(1)(B), check h	_
	e 16) i			be on cash basis)					
	ırt İ	Analysis of Revenue and Exper		(a) Revenue and					(d) Disbursements
		amounts in columns (b), (c), and (d) may not	necessanly equal	expenses per books	(b) Net in	vestment ome		djusted net ncome	for chantable purposes
		the amounts in column (a) (see instructions)							(cash basis only)
	1	Contributions, gifts, grants, etc., receive		20,000,00	U				
∵ ∣	2		required to attach Sch B	· · · · · · · · · · · · · · · · · · ·					
\sim	3	Interest on savings and temporary			ļ				
` `	4	Dividends and interest from securi	ues		+				
	5a	Gross rents							
ne ne	b	Net rental income or (loss)	10						
/en	6a b	Net gain or (loss) from sale of assets not on line Gross sales price for all assets on line 6a	10	f	DEC	EIVE			
Revenue	7	Capital gain net income (from Part	HIV line 2\			<u> </u>	70		
ш	8	Net short-term capital gain	(IV, IIIIe 2)		A NOV	6.1	1 80	0	
	9	Income modifications			<u>₩0</u>	2 1 202	1 5		
	10a	Gross sales less returns and allowances	1		٦	14	<u> </u>		
	b	Less Cost of goods sold			OGL	DEN, U	T		
	c	Gross profit or (loss) (attach sched	dule)					ļ <u> </u>	····
Š	11	Other income (attach schedule)	,						
č	12	Total. Add lines 1 through 11		20,000,00	0	0		0	
S	13	Compensation of officers, directors	s, trustees, etc		0				
^A ŝėsūed	14	Other employee salaries and wage	es						
en en	15	Pension plans, employee benefits							
×	16a	Legal fees (attach schedule)							
س تان	ь	Accounting fees (attach schedule)	1						
_ ` }	С	Other professional fees (attach schedule	e)						
<u>ت</u> و.	17	Interest							
Si	18	Taxes (attach schedule) (see instruction	<i>'</i>						
Ξã	19	Depreciation (attach schedule) and depl	letion		<u> </u>				
Adi	20	Occupancy			-				
ğ	21	Travel, conferences, and meetings	5		 				
ā	22	Printing and publications					_		
ng	23	Other expenses (att sch)							
ati	24	Total operating and administrate	ive expenses.		م	0		•	_
Operating and Aर्वेंगींनेंंडरेंग्वेंरांथें	25	Add lines 13 through 23		-	0	U		0	0
ō	25	Contributions, gifts, grants paid Total expenses and dishursements	Add lines 24 and 25		0	0		0	0
	26 27	Total expenses and disbursements. Subtract line 26 from line 12	. Aud lines 24 and 25		-				
		Excess of revenue over expenses a	nd dishursoments	20,000,00	ام				
	a b	Net investment income (if negati		20,000,00	-	0			
	c	Adjusted net income (if negative,	· · · · · · · · · · · · · · · · · · ·					0	
	L	Adjusted her modifie (ii fiegative,	CINCI -U-)				L		Form 990-PF (2020)

	Part !	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
_	- uit	Should be for end-di-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		<u> </u>	
	2	Savings and temporary cash investments		15,260,458	15,260,458
	3	Accounts receivable ▶			
Ì		Less allowance for doubtful accounts ▶			
-	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
ļ	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
		Less allowance for doubtful accounts ▶ 0			
ध	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₹	10a	Investments – U S and state government obligations (attach schedule)			
	þ	Investments – corporate stock (attach schedule) See Stmt 1		4,739,542	4,747,460
	С	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			
İ		Less accumulated depreciation (attach sch.)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			<u> </u>
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch.)			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the			
4		instructions. Also, see page 1, item I)	0	20,000,000	20,007,918
-	17	Accounts payable and accrued expenses		······································	
S	18	Grants payable			
흺	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u> </u>	21	Mortgages and other notes payable (attach schedule)			
	22 23	Other liabilities (describe >)	0	0	<u></u>
\dashv	23	Total liabilities (add lines 17 through 22)	V	0	
nces		Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.			
띪	24	Net assets without donor restrictions		20,000,000	
ã	25	Net assets with donor restrictions			
Net Assets or Fund Bala		Foundations that do not follow FASB ASC 958, check here			
틸		and complete lines 26 through 30.			
핅	26	Capital stock, trust principal, or current funds			
2	27	Paid-in or capital surplus, or land, bldg, and equipment fund			
Se	28	Retained earnings, accumulated income, endowment, or other funds			
₽ S	29	Total net assets or fund balances (see instructions)	0	20,000,000	
힑	30	Total liabilities and net assets/fund balances (see			
_	D4 II	instructions)	0	20,000,000	
_	Part I				
1		net assets or fund balances at beginning of year – Part II, column (a), line 29 (mi	ust agree with		•
•		of-year figure reported on prior year's return)		1 2	20 000 000
		amount from Part I, line 27a		2	20,000,000
		rincreases not included in line 2 (itemize)		3	20,000,000
		eases not included in line 2 (itemize)		5	20,000,000
		net assets or fund balances at end of year (line 4 minus line 5) – Part II, column	(b), line 29	6	20,000,000
_		The first of the state of the s	· // · · · · · · · · · · · · · · · · ·		

(a) List and describe	INCLOSSES FOR TAX ON INVES the kind(s) of property sold (for example, real estarehouse, or common stock, 200 shs MLC Co)		(b) How acquired P – Purchase D – Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a ^N/A					
b					
C					
d		· ·			
e		·			
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	1	r other basis ense of sale		Gain or (loss) us (f) minus (g))
a					
b					
С					
d					
e					
Complete only for assets shown	ng gain in column (h) and owned by t	he foundation on 12/31/	69	(I) Garns ((Col (h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) (j), if any	col (k), but	not less than -0-) or is (from col. (h))
a					
b					
С					
d					
е				ļ.,	
	ranital ineel 4			2	
Part I, line 8	o, column (c) See matructions if (los	33), 611(61 -0-111		3	
	nder Section 4940(e) for Re	duced Tax on Net	Investment Inc	ome	
	ION 4940(e) REPEALED ON				
1 Reserved					
(a)	(b)		(c)		(d)
Reserved	Reserved		Reserved		Reserved
Reserved					
2 Reserved				2	
3 Reserved				3	
4 Reserved				4	
5 Reserved				5	
6 Reserved				6	
7 Reserved				7	
8 Reserved				8	

_P	art VII-A Statements Regarding Activities (continued)			
44	At any time dispersition and the foundation department of the first state of the st		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			v
12	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	11	-	X
12	person had advisory privileges? If "Yes," attach statement. See instructions	42		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	х	
	Website address ► N/A	13	_ A_	
14	The books are in care of ▶ TERRY VAN DYKE Telephone no ▶ 301-	539-	661	2
	138 OLD CONCORD RD		-	_
	Located at ▶ FLETCHER NC ZIP+4 ▶ 2873	2		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the year			_
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
_ <u>Pa</u>	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ	Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No (5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2020? N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2020?			
h	If "Yes," list the years > 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement – see instructions) N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	20		
•	► 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2020.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4b	لِيا	X
		-~~ QC	in de	

Pa	art VII-B	Statements Regarding Ac	tivities for Which Form	4720 May Be R	equired (cont	inued)			
5a	During the ye	ear did the foundation pay or incur a						Yes	No
		propaganda, or otherwise attempt		1945(e))?		res X No		Ì	
	(2) Influence	the outcome of any specific public	election (see section 4955), or	to carry on,					
		r indirectly, any voter registration d		•		res 🗓 No		ı	
		a grant to an individual for travel, st			=	res X No		ł	
		a grant to an organization other that		described in					
		945(d)(4)(A)? See instructions	,,ga			res 🕱 No	i		
		or any purpose other than religious	. charitable, scientific, literary, or	r educational					
		s, or for the prevention of cruelty to	*			res 🗶 No			
b		r is "Yes" to 5a(1)–(5), did any of th		er the exceptions d					
		is section 53 4945 or in a current ne	· · · · · · · · · · · · · · · · · · ·	-		N/A	5b		
		s relying on a current notice regard	= =		.0	▶ 🛅			
С		is "Yes" to question 5a(4), does th	=			, –			
		aintained expenditure responsibility	•	on the tax	N/A 🗌	∕es			
		ch the statement required by Regul	•						
6a		dation, during the year, receive any		ov premijime					
		Il benefit contract?	rando, ancony or maneony, to pe	ay promiding		res X No			
b		dation, during the year, pay premiur	ns directly or indirectly on a ne	rsonal henefit contr		103 [22] 110	6b		X
_		, file Form 8870	no, ancony or maneony, or a per	isonal benefit conti	act.		-05		
7a		luring the tax year, was the foundat	ion a party to a prohibited tay sh	elter transaction?		res 🗓 No			
b		he foundation receive any proceed				N/A	7b		
8		tion subject to the section 4960 tax			,tion,	24, 22	7.5		
•		or excess parachute payment(s) of		,000,000 111		res 🕱 No			
P		nformation About Officers		undation Man			206	I	
•		and Contractors	, Directors, Trastees, To	andation man	agers, mgmy	i ala Employ	,		
1		s, directors, trustees, and found	ation managers and their com	pensation. See ins	structions.				
						(d) Contributions to			
		(a) Name and address		(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit		ense ac	
				devoted to position	enter -0-)	plans and deferred compensation	otne	r allowan	ices
TI	ERRY VAN DY	KE	FLETCHER	PRESIDENT		·			
13	38 OLD CONC	ORD RD	NC 28732	2.00	o	٥	ŀ		0
	ICHARD J SAI	* ****	CHAPEL HILL	TREASURER		-			
10	02 DARLIN C	IRCLE	NC 27514	2.00	0	0			0
	YN McFARLAN		ASHEVILLE	SECRETARY					
28	B DRIFTWOOD	COURT	NC 28805	2.00		0			0
				1					
					•				
2	Compensati	on of five highest-paid employee	es (other than those included o	on line 1 – see inst	tructions). If non	e, enter			-
	"NONE."				•				
				(b) Title, and average		(d) Contributions to			
	(a) N	ame and address of each employee paid more	than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		ense ac r allowan	
				devoted to position		compensation		allowan	
N	ONE		-						
				<u> </u>					
					_				
Tota	al number of ot	her employees paid over \$50,000				•			0

Part VIII	Information About Officers, Directors, Trustees, Found and Contractors (continued)	ation Managers, Highly Paid E	mploy	ees,
3 Five high	est-paid independent contractors for professional services. See instru	ections. If none, enter "NONE."		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service		(c) Compensation
NONE				
Total number of	others receiving over \$50,000 for professional services		>	
Part IX-A	Summary of Direct Charitable Activities			
	's four largest direct chantable activities during the tax year. Include relevant statistical information s other beneficiaries served, conferences convened, research papers produced, etc	such as the number of		Expenses
1 N/A				
2				
3		· ·		
		· ·		
4				
Part IX-B	Summary of Program-Related Investments (see instru	ctions)		
	argest program-related investments made by the foundation during the tax year on lines 1 and 2			Amount
1 N/A				
			 _	
2				
All other program-	related investments. See instructions			
3				
Total. Add lines	1 through 3	•	l	

Form **990-PF** (2020)

85-4333454

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

Pa	irt X Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions.)	gn fou	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	4,747,460
b	Average of monthly cash balances	1b	15,260,458
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	20,007,918
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	20,007,918
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see		
	instructions)	4	300,119
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	19,707,799
6	Minimum investment return. Enter 5% of line 5	6	10,769
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	•	
	and certain foreign organizations, check here ▶ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	10,769
2a	Tax on investment income for 2020 from Part VI, line 5		
b	Income tax for 2020 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	10,769
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	10,769
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	Ť	
•	line 1	7	10,769
P	art XII Qualifying Distributions (see instructions)		20,705
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1a	0
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	-	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	7	
-	Enter 1% of Part I, line 27b See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundations		

	an XIII Undistributed income (see instructions) (a)	(b)	(c)	(d)
1	Distributable amount for 2020 from Part XI,	Corpus	Years prior to 2019	2019	2020
	Ine 7				10,769
2	Undistributed income, if any, as of the end of 2020				
a	Enter amount for 2019 only				
	o Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
Ł	From 2016				
c	From 2017				
c	From 2018				
ε	From 2019				
f	Total of lines 3a through e				
4	Qualifying distributions for 2020 from Part XII,				···
	line 4 ▶ \$		ŀ		
a	Applied to 2019, but not more than line 2a				
t	Applied to undistributed income of prior years				
	(Election required – see instructions)				
c	: Treated as distributions out of corpus (Election	·			
	required – see instructions)				
c	Applied to 2020 distributable amount				
	Remaining amount distributed out of corpus	-			
5	Excess distributions carryover applied to 2020				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	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				
c	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 2020 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2021				10,769
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				
а	Excess from 2016				
b	Excess from 2017				
С	Excess from 2018				
d	Excess from 2019				
e	Excess from 2020				

3 Grants and Contributions Paid During	the Veer or Approved for	- Eutura Daymant		
	If recipient is an individual,	1		· · · · · · · · · · · · · · · · · · ·
Recipient	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	74110dill
a Paid during the year				
N/A				
•				
			1	
Total			▶ 3a	
b Approved for future payment				
N/A				
Total		·	▶ 3b	
			P 30	

<u> </u>	art XVI-A	Analysis of Income-Producing Act	ivities				
Ent	er gross amo	ounts unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(-)
			(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1	Program ser	vice revenue			code		(See instructions)
	a						
	D				 		
	c				 		
	<u> </u>				 		·
	f				 		
		d contracts from government agencies			· · · · · ·		
2		dues and assessments		— ·· · · · · · · · · · · · · · · · · ·	<u> </u>		
		savings and temporary cash investments		-			
4	Dividends ai	nd interest from securities					
5	Net rental in	come or (loss) from real estate					
	a Debt-fina	anced property					
		t-financed property					
		come or (loss) from personal property					
		ment income					
		s) from sales of assets other than inventory			<u> </u>		
		or (loss) from special events			ļ		
		or (loss) from sales of inventory			<u> </u>		· · · · · · · · · · · · · · · · · · ·
' '		ue a					·····
	<u> </u>				<u> </u>		
	d		-		 		
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13	Total. Add I	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calculations)		<u> </u>		13	0
1 3 (Se	Total. Add I	ne 12, columns (b), (d), and (e)	complishm			13	
13 (Se P	Total. Add li e worksheet art XVI-B .ine No.	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose A contrib	13	0
13 (Se P	Total. Add li e worksheet art XVI-B .ine No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Ac	is reported in c	ent of Exempt P	urpose A contrib	13	0
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13 (Se P	Total. Add li e worksheet art XVI-B .ine No.	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income	is reported in c	ent of Exempt P	urpose A contrib	13	0
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Part XVII	Information Reg Organizations	arding Transfers To ar	nd Transactio	ns and Relations	hips With Noncharitab	le Exempt
·1 Did the or		directly engage in any of the fo	llowing with any c	ther organization desc	nbed	Yes No
		on 501(c)(3) organizations) or				1 222
organizati				g to position		
•		dation to a nonchantable exem	not organization of	•		
(1) Cash						1a(1) X
(2) Other	assets	•				1a(2) X
b Other tran				• • • • • • • • • • • • • • • • • • • •		1,442/1 - 12
		able exempt organization				1b(1) X
		onchantable exempt organization		• • • •		
		-	uon ,			
` '	of facilities, equipment	•		•	•• • • • • • • • • • • • • • • • • • • •	1b(3) X
	oursement arrangements	5			*** 1 * * * * * * * * *	1b(4) X
	or loan guarantees					1b(5) X
		embership or fundraising solic	•			1b(6) X
-		iailing lists, other assets, or pa		• •		1c X
d If the ansi	wer to any of the above i	s "Yes," complete the followin	g schedule Colur	nn (b) should always s	how the fair market	
		or services given by the report				
value in a	ny transaction or sharing	arrangement, show in colum	n (d) the value of	the goods, other asset	s, or services received	
(a) Line no	(b) Amount involved	(c) Name of noncharitable exer	npt organization	(d) Description o	f fransfers, transactions, and sharing a	rrangements
N/A						
				······································		
		1	, , , , , , , , , , , , , , , , , , , ,			
						
		 				
			·			<u> </u>
described		ctly affiliated with, or related to than section 501(c)(3)) or in s hedule	ection 527?	exempt organizations		Yes X No
	(a) Name of organization	(b) Type of	organization		(c) Description of relationship	
<u> </u>						
				· ·		
		nat I have examined this return, including				, it is true,
correct	, and complete. Declaration of p	preparer (other than taxpayer) is based	d on all information of v	which preparer has any knowl	edge May the IRS disc	uss this return
Sign	DocuSigned by				with the preparer	
Here					See instructions	Yes No
nere	1. 1. 1) h		111/2	2/2021	PRESIDENT	
	1/01/1			.	***************************************	
	grature of SECELETE OF 8425.		Date	· · · · · · · · · · · · · · · · · · ·	Title	
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Preparer Firm	srame > Johns		arren, Pl	LIC O	PTIN PO	1373472
Use Only Firm		Merrimon Ave			Firm's EIN ▶ 84 -	2279290
			1-1826			-254-124
						. 000 PE

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2020

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of the organization

SUNSHINE NOW FOUNDATION 85-4333454 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule |X| For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address). II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

SUNSHINE NOW FOUNDATION

Employer identification number 85-4333454

Part I	Contributors (see instructions) Use duplicate copies o	of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TERRY VAN DYKE 138 OLD CONCORD ROAD FLETCHER NC 28732	\$ 20,000,000	Person X Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Nume, address, and En 1 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Federal Statements

85-4333454

Statement 1 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Fair Market Value	\$ 458,736 666,823 5,612 381,289 3,235,000	\$ 4,747,460
Basis of Valuation	Cost Cost Cost Cost Cost	
End of Year	456,565 661,157 5,531 381,289 3,235,000	4,739,542
	_የ	∙v.∥
Beginning of Year	w	\$
Description	EQUITIES EXCHANGE TRADED FUNDS REIT HOLDINGS BESPOKE PRIVATE INVESTMENTS BESPOKE CAPITAL INVESTMENTS	Total

Statement 2 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors

	City, State, Zip	32	
		FLETCHER NC 28732	
	Address	138 OLD CONCORD RD	
Name		TERRY VAN DYKE	

FLETCHER NC 28732

85-4333454

Federal Statements

Statement 3 - Form 990-PF, Part XV, Line 2a - Name, Address and Email for Applications

Description

TERRY VAN DYKE 301-638-6612 138 OLD CONCORD ROAD FLETCHER NC 28732 tvdgen@gmail.com

Statement 4 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

AT A MINIMUM, THE BOARD WILL HOLD A MEETING TO DETERMINE CONTRIBUTION, GRANT, GIFT, ETC. PROGRAM FUNDING.

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

REQUIRED SUBMISSIONS DEADLINES ARE NOT CURRENTLY HELD.

Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

AWARD RESTRICTIONS OR LIMITATIONS ARE NOT CURRENTLY HELD.