

Form **990-PF**

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

OMB No. 1545-0047

2021

Department of the Treasury
Internal Revenue Service

▶ 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

For calendar year 2021 or tax year beginning **05/01/21**, and ending **04/30/22**

Name of foundation WHITE LIGHT FOUNDATION, INC.		A Employer identification number 47-4125318
Number and street (or P.O. box number if mail is not delivered to street address) 70 SOUTH WINOOSKI AVE., UNIT 251	Room/suite	B Telephone number (see instructions) 203-520-2539
City or town, state or province, country, and ZIP or foreign postal code BURLINGTON VT 05401		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 50,872	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total 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	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	40,927			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule) STMT 1	11,983			11,983	
12 Total. Add lines 1 through 11	52,910	0		11,983	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.		0		
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (att. sch.) STMT 2	7,179			
	24 Total operating and administrative expenses. Add lines 13 through 23	7,179	0		0
	25 Contributions, gifts, grants paid	63,625			63,625
26 Total expenses and disbursements. Add lines 24 and 25	70,804	0		63,625	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-17,894				
b Net investment income (if negative, enter -0-)		0			
c Adjusted net income (if negative, enter -0-)			11,983		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year		End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1 Cash – non-interest-bearing	68,766	50,872	50,872	
	2 Savings and temporary cash investments				
	3 Accounts receivable ▶				
	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 (att. schedule) ▶				
	Less: allowance for doubtful accounts ▶	0			
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments – U.S. and state government obligations (attach schedule)				
	b Investments – corporate stock (attach schedule)				
	c Investments – corporate bonds (attach schedule)				
	11 Investments – land, buildings, and equipment: basis ▶				
Less: accumulated depreciation (attach sch.) ▶					
12 Investments – mortgage loans					
13 Investments – other (attach schedule)					
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 instructions. Also, see page 1, item I)	68,766	50,872	50,872		
Liabilities	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe ▶)				
	23 Total liabilities (add lines 17 through 22)	0	0		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input checked="" type="checkbox"/>				
	24 Net assets without donor restrictions	68,766	50,872		
	25 Net assets with donor restrictions				
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. <input type="checkbox"/>				
	26 Capital stock, trust principal, or current funds				
	27 Paid-in or capital surplus, or land, bldg., and equipment fund				
	28 Retained earnings, accumulated income, endowment, or other funds				
	29 Total net assets or fund balances (see instructions)	68,766	50,872		
30 Total liabilities and net assets/fund balances (see instructions)	68,766	50,872			

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year – Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	68,766
2 Enter amount from Part I, line 27a	2	-17,894
3 Other increases not included in line 2 (itemize) ▶	3	
4 Add lines 1, 2, and 3	4	50,872
5 Decreases not included in line 2 (itemize) ▶	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 29	6	50,872

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; 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 price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	[If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7]	2
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8		3

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)	1	
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)	2	0
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	3	
3 Add lines 1 and 2	4	0
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	5	0
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	6	
6 Credits/Payments:		
a 2021 estimated tax payments and 2020 overpayment credited to 2021	6a	
b Exempt foreign organizations – tax withheld at source	6b	
c Tax paid with application for extension of time to file (Form 8868)	6c	
d Backup withholding erroneously withheld	6d	
7 Total credits and payments. Add lines 6a through 6d	7	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11 Enter the amount of line 10 to be: Credited to 2022 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VI-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ _____ (2) On foundation managers. ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ NONE		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2021 or the tax year beginning in 2021? See instructions for Part XIII. If "Yes," complete Part XIII		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ WHITELIGHTFOUNDATION.ORG	X	
14 The books are in care of ▶ BRIAN MCGUNNIGLE Telephone no. ▶ 203-520-2539 70 S WINOOSKI AVE UNIT 251 Located at ▶ BURLINGTON VT ZIP+4 ▶ 05401		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ 15		
16 At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶		X

Part VI-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.

	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?	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	X
(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)?	1a(5)	X
(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.)	1a(6)	X
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	1b	N/A
c Organizations relying on a current notice regarding disaster assistance, check here		<input type="checkbox"/>
d 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 2021?	1d	N/A
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)):		
a At the end of tax year 2021, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2021?	2a	X
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.)	2b	N/A
c 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		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a	X
b If "Yes," did it have excess business holdings in 2021 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 2021.)	3b	N/A
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 2021?	4b	X

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
5a During the year did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d) (4)(A)? See instructions		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	N/A	
c Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>	
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	N/A	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 3				

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 **0**

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. See instructions. 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 VIII-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 N/A	
2	
3	
4	

Part VIII-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.

	Amount
1 N/A	
2	
All other program-related investments. See instructions. 3	

Total. Add lines 1 through 3 ▶

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	59,819
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	59,819
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	59,819
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	897
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	58,922
6	Minimum investment return. Enter 5% (0.05) of line 5	6	2,946

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part IX, line 6	1	2,946
2a	Tax on investment income for 2021 from Part V, line 5	2a	
b	Income tax for 2021. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,946
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,946
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	2,946

Part XI Qualifying Distributions (see instructions)

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	63,625
b	Program-related investments – total from Part VIII-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:		
a	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 XII, line 4	4	63,625

Part XII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1	Distributable amount for 2021 from Part X, line 7				2,946
2	Undistributed income, if any, as of the end of 2021:				
a	Enter amount for 2020 only				
b	Total for prior years: 20____, 20____, 20____				
3	Excess distributions carryover, if any, to 2021:				
a	From 2016	25,917			
b	From 2017	58,782			
c	From 2018	41,328			
d	From 2019	93,776			
e	From 2020	71,161			
f	Total of lines 3a through e	290,964			
4	Qualifying distributions for 2021 from Part XI, line 4: ▶ \$ <u>63,625</u>				
a	Applied to 2020, but not more than line 2a				
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 2021 distributable amount				2,946
e	Remaining amount distributed out of corpus	60,679			
5	Excess distributions carryover applied to 2021 (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	351,643			
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 2020. 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 2022				0
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 2016 not applied on line 5 or line 7 (see instructions)	25,917			
9	Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a	325,726			
10	Analysis of line 9:				
a	Excess from 2017	58,782			
b	Excess from 2018	41,328			
c	Excess from 2019	93,776			
d	Excess from 2020	71,161			
e	Excess from 2021	60,679			

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2021, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year				(e) Total
	(a) 2021	(b) 2020	(c) 2019	(d) 2018	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e 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:					
a "Assets" alternative test – enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test – enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
c "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					

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year – see instructions.)

- 1 Information Regarding Foundation Managers:**
- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)
N/A
- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.
N/A
- 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**
Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.
- a** The name, address, and telephone number or email address of the person to whom applications should be addressed:
N/A
- b** The form in which applications should be submitted and information and materials they should include:
N/A
- c** Any submission deadlines:
N/A
- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
N/A

Part XIV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
SOLACE HOUSE 1040 JACKSON AVENUE NEW YORK NY 11101			SUPPORT	2,500
PROJECT SELF-SUFFICIENCY 127 MILL STREET, NEWTON, NEWTON NJ 07860			SUPPORT	1,000
LIVE WELL 1721 SOUTH STREET PHILADELPHIA PA 19146			SUPPORT	2,000
TURNING POINT 179 SOUTH WINOOSKI AVE., BURLINGTON VT 05401			SUPPORT	5,000
AFSP WESTERN PA 199 WATER ST. BRIDGEVILLE PA 15017			SUPPORT	1,000
CHILDSAVERS 200 NORTH 22ND STREET RICHMOND VA 23223			SUPPORT	1,000
LIFE ACT 210 BELL STREET, CHAGRIN CHAGRIN FALLS OH 44022			SUPPORT	1,500
BEHAVIORAL HEALTH SVCS 22 US OVAL, SUITE 218 PLATTSBURGH NY 12903			SUPPORT	1,000
SECOND WIND FUND 303 EAST 17TH AVE. SUITE DENVER CO 80014			SUPPORT	1,750
BOYS AND GIRLS CLUB 317 EAST CARSON STREET PITTSBURGH PA 15106			SUPPORT	1,000
Total			▶ 3a	63,625
b <i>Approved for future payment</i> N/A				
Total			▶ 3b	

Part XVI Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- a** Transfers from the reporting foundation to a noncharitable exempt organization of:
 - (1) Cash 1a(1) Yes No
 - (2) Other assets 1a(2) Yes No
 - b** Other transactions:
 - (1) Sales of assets to a noncharitable exempt organization 1b(1) Yes No
 - (2) Purchases of assets from a noncharitable exempt organization 1b(2) Yes No
 - (3) Rental of facilities, equipment, or other assets 1b(3) Yes No
 - (4) Reimbursement arrangements 1b(4) Yes No
 - (5) Loans or loan guarantees 1b(5) Yes No
 - (6) Performance of services or membership or fundraising solicitations 1b(6) Yes No
 - c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c Yes No
- d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here

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 taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below? See instructions. Yes No

Signature of officer or trustee _____ Date _____ Title **DIRECTOR**

Paid Preparer Use Only

Print/Type preparer's name: **DAVID A. DATTILIO, CPA** Preparer's signature: **DAVID A. DATTILIO, CPA** Date: **02/19/24** Check if self-employed

Firm's name ▶ **SCHIFFMAN, DATTILIO & COMPANY, P.C.** PTIN **P00344012**

Firm's address ▶ **23 BANK ST** Firm's EIN ▶ **04-3340470**

LEBANON, NH 03766 Phone no. **603-448-6655**

Part XIV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BURGERS AND BANDS 401 HEADQUARTERS DR MILLERSVILLE MD 21108			SUPPORT	1,000
THE SKY CENTER 4164 SOUTH MEADOWS ROAD SANTA FE NM 87501			SUPPORT	500
HELP CENTER 421 E. PEACH ST. BOZEMAN MT 59715			SUPPORT	750
KC SUICIDE AWARENESS 4700 BELLEVIEW AVE., L-12 KANSAS CITY MO 64112			SUPPORT	500
DIDI HIRSCH 4760 S. SEPULVEDA BOULEVA CULVER CITY CA 90066			SUPPORT	500
EQUINOX 500 CENTRAL AVENUE ALBANY NY 12206			SUPPORT	1,500
MEALS ON MAIN STREET 509 NORTH MAIN STREET PORT CHESTER NY 10573			SUPPORT	4,000
ABBYS HOUSE 52 HIGH STREET WORCESTER MA 01609			SUPPORT	2,000
HOPE4UTAH 5455 RIVER RUN DR, PROVO, PROVO UT 84097			SUPPORT	500
BOYS AND GIRLS CLUB 555 UNION STREET MANCHESTER NH 03104			SUPPORT	1,000
Total			▶ 3a	
b <i>Approved for future payment</i>				
N/A				
Total			▶ 3b	

Part XIV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> BOYS AND GIRLS CLUB 600 DALTON AVE. CINCINATI OH 45203			SUPPORT	1,000
SUICIDE AWARENESS VOICES 7900 XERXES AVENUE SOUTH BLOOMINGTON MN 55122			SUPPORT	500
ELYSSAS MISSION 900 SKOKIE BLVD., SUITE 1 NORTHBROOK IL 60062			SUPPORT	1,000
CLIFFORD BEERS 93 EDWARDS STREET NEW HAVEN CT 06511			SUPPORT	2,000
BOYS AND GIRLS CLUB 967 IRWIN STREET KNOXVILLE TN 37917			SUPPORT	1,000
AMERICAN SUICIDE PREVENTION ARIZONA SUICIDE PREVENTIO PHOENIX AZ 85001			SUPPORT	500
BOYS AND GIRLS CLUB BOYS & GIRLS CLUB OF HEND HENDERSON TX 75652			SUPPORT	1,000
BOYS AND GIRLS CLUB BOYS & GIRLS CLUB OF MILF MILFORD CT 06460			SUPPORT	1,000
COMMUNITY HEALTH IMPROVEMENT COMMUNITY HEALTH IMPROVEM SAN DIEGO CA 91911			SUPPORT	500
CRISIS SERVICES CRISIS SERVICES BUFFALO NY 14201			SUPPORT	1,500
Total			▶ 3a	
b <i>Approved for future payment</i> N/A				
Total			▶ 3b	

Part XIV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> FAMILY SERVICE AGENCY FAMILY SERVICE AGENCY OF SHELTON CT 06484			SUPPORT	500
HOWARD CENTER HOWARD CENTER ADMIN 208 F BURLINGTON VT 05401			SUPPORT	5,000
SUICIDE PREVENTION COALITION IOWA COUNTY, WI IOWA COUNTY WI 53533			SUPPORT	500
JANA MARIE FOUNDATION JANA MARIE FOUNDATION STATE COLLEGE PA 16801			SUPPORT	1,000
KUTO KIDS UNDER TWENTY ONE BRENTWOOD MO 63117			SUPPORT	750
LINES FOR LIFE LINES FOR LIFE 5100 S MAC PORTLAND OR 97035			SUPPORT	500
LOSS COMMUNITY SERVICES LOSS COMMUNITY SERVICES UPPER ARLINGTON OH 43212			SUPPORT	1,000
ASPEN HOPE CENTER P.O. BOX 1115 BASALT CO 81621			SUPPORT	500
BOYS AND GIRLS CLUB P.O. BOX 707 CHARLOTTESVILLE VA 22902			SUPPORT	1,000
I UNDERSTAND LOVE HEALS P.O. BOX 822 ADA MI 49301			SUPPORT	1,000
Total			▶ 3a	
b <i>Approved for future payment</i> N/A				
Total			▶ 3b	

Part XIV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
CRISIS CONNECTIONS PO BOX 19612 SEATTLE WA 98109			SUPPORT	250
CRISI CONNECTIONS PO BOX 19612 SEATTLE WA 98109			SUPPORT	500
CONNORS CLIMB PO BOX 283 EXETER NH 03833			SUPPORT	2,575
FAMILY VIOLENCE PROJECT PO BOX 304 AUGUSTA ME 04332			SUPPPRT	1,500
SIX FEET OVER PO BOX 32394 DETROIT, MIC DETROIT MI 48127			SUPPORT	1,000
AMERICAN FOUNDATION ROCHESTER, NY ROCHESTER NY 14602			SUPPORT	1,000
THE PETE FOUNDATION THE PETE FOUNDATION LOUISVILLE KY 40018			SUPPORT	1,000
WORLD FREE OF SUICIDE UNKNOWN PORTLAND OR 97035			SUPPORT	500
IROQUOIS NATIONALS UNKNOWN JACKSONVILLE FL 32034			SUPPORT	2,500
UNKNOWN UNKNOWN BURLINGTON VT 05401			SUPPORT	300
Total			▶ 3a	
b <i>Approved for future payment</i>				
N/A				
Total			▶ 3b	

Part XIV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<p>a <i>Paid during the year</i> RICHMOND PTO UNKNOWN RICHMOND VA 23173</p>			SUPPORT	750
<p>Total</p>			▶ 3a	
<p>b <i>Approved for future payment</i> N/A</p>				
<p>Total</p>			▶ 3b	

94114 White Light Foundation, Inc.
 47-4125318
 FYE: 4/30/2022

Federal Statements

Statement 1 - Form 990-PF, Part I, Line 11 - Other Income

Description	Revenue per Books	Net Investment Income	Adjusted Net Income
SERVICE FEE REVENUES	\$ 5,858	\$	\$ 5,858
TICKET SALES	6,125		6,125
TOTAL	\$ 11,983	\$ 0	\$ 11,983

Statement 2 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES				
PROMOTIONS AND MARKETING	794			
MEALS AND ENTERTAINMENT	50			
BANK FEES	213			
INSURANCE	1,157			
LICENSES AND REGISTRATION	945			
LEGAL AND PROFESSIONAL	4,020			
TOTAL	\$ 7,179	\$ 0	\$ 0	\$ 0

Statement 3 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
KEVIN RONDEAU 70 S WINOOSKI AVE BURLINGTON VT 05401	PRESIDENT	0.00	0	0	0
JILL SAVAGE 70 S WINOOSKI AVE BURLINGTON VT 05401	CFO	0.00	0	0	0
DAVE BOUCHARD 181 ORCHARD COMMONS ROAD	SECRETARY	0.00	0	0	0

94114 White Light Foundation, Inc.
47-4125318
FYE: 4/30/2022

Federal Statements

Statement 3 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
HINESBURG VT 05461					
EDMUND EDWARDS 4084 NORTH ROAD SUNDERLAND VT 05250	DIRECTOR	0.00	0	0	0
KATHRYN IRWIN 4 FAIRVIEW RD WOODBIDGE CT 06525	DIRECTOR	0.00	0	0	0
GREG KNIGHT 70 S WINOOSKI AVE BURLINGTON VT 05401	DIRECTOR	0.00	0	0	0
ROBERT VOLOSEVICH 70 S WINOOSKI AVE UNIT 251 BURLINGTON VT 05401	DIRECTOR	0.00	0	0	0
BRIAN MCGUNNIGLE 70 S WINOOSKI AVE UNIT 251 BURLINGTON VT 05401	DIRECTOR	0.00	0	0	0

Underdistribution and Excess Distributions for Part XIIForm **990-PF****2021**For calendar year 2021, or tax year beginning **05/01/21**, ending **04/30/22**

Name

WHITE LIGHT FOUNDATION, INC.Employer Identification Number
47-4125318**Undistributed Income Carryovers**

Form 990-PF, Part XII

Tax Year	Prior Undistributed Income			Current Year Decreases	Next Year Carryover	
	Nontaxable or Previously Taxed	Taxable in 2021	Total per Year		Nontaxable or Previously Taxed	Taxable in 2022
Years prior						
20 17						
20 18						
20 19						
2020						
2021			2,946	2,946		
Total Carryover to Next Year						0

* Carryover amount includes 4942(a) amounts

Excess Distribution Carryovers

Form 990-PF, Part XII

Preceding Tax Year Excess Distributions	Current Year	Next Year
	Decreases	Carryover
2016 25,917	25,917	
2017 58,782		58,782
2018 41,328		41,328
2019 93,776		93,776
2020 71,161		71,161
Current Year Excess Distribution Generated (2021)		60,679
Total Carryover to Next Year		325,726

IRS e-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

Form 8879-TE

For calendar year 2021, or fiscal year beginning 5/01 2021, and ending 4/30 2022

2021

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

Department of the Treasury Internal Revenue Service

Name of filer

EIN or SSN

WHITE LIGHT FOUNDATION, INC.

47-4125318

Name and title of officer or person subject to tax BRIAN MCGUNNIGLE DIRECTOR

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only.

Table with 2 columns: Form type (1a-10a) and Amount (b). Includes rows for Form 990, Form 990-EZ, Form 1120-POL, Form 990-PF, Form 8868, Form 990-T, Form 4720, Form 5227, Form 5330, and Form 8038-CP.

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) (EIN) and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete.

PIN: check one box only

I authorize ERO firm name to enter my PIN as my signature. Enter five numbers, but do not enter all zeros.

on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date 01/22/24

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

02091812345

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature DAVID A. DATTILIO, CPA

Date 01/22/24

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So