

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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/Form990 for instructions and the latest information.

A For the 2021 calendar year, or tax year beginning 07/01/21, and ending 06/30/22

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p style="text-align: center;">THE GOOD PEOPLE FUND INC.</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p>384 WYOMING AVE.</p> City or town, state or province, country, and ZIP or foreign postal code <p>MILLBURN NJ 07041</p>	D Employer identification number <p style="text-align: center;">26-1887249</p> E Telephone number <p style="text-align: center;">973-761-0580</p> G Gross receipts \$ 3,269,898
F Name and address of principal officer: <p>LARRY PAUL C/O 384 WYOMING AVENUE MILLBURN NJ 07041</p>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.GOODPEOPLESFUND.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 2008 M State of legal domicile: NJ

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <p style="text-align: center;">SEE SCHEDULE O</p>													
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.													
	3 Number of voting members of the governing body (Part VI, line 1a)	3 8												
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 8												
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5 1												
	6 Total number of volunteers (estimate if necessary)	6 0												
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0												
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b 0												
Revenue	8 Contributions and grants (Part VIII, line 1h)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:30%;">Prior Year</th> <th style="width:30%;">Current Year</th> </tr> <tr> <td style="text-align: right;">2,654,499</td> <td style="text-align: right;">3,269,634</td> </tr> <tr> <td style="text-align: right;">9 Program service revenue (Part VIII, line 2g)</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: right;">10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td style="text-align: right;">217 264</td> </tr> <tr> <td style="text-align: right;">11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: right;">12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td style="text-align: right;">2,654,716 3,269,898</td> </tr> </table>	Prior Year	Current Year	2,654,499	3,269,634	9 Program service revenue (Part VIII, line 2g)	0	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	217 264	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,654,716 3,269,898
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12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,654,716 3,269,898													
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,567,991 3,176,699												
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0												
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	97,466 102,590												
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0												
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 38,379													
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	130,541 168,288												
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,795,998 3,447,577												
	19 Revenue less expenses. Subtract line 18 from line 12	-141,282 -177,679												
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:30%;">Beginning of Current Year</th> <th style="width:30%;">End of Year</th> </tr> <tr> <td style="text-align: right;">420,749</td> <td style="text-align: right;">245,262</td> </tr> <tr> <td style="text-align: right;">21 Total liabilities (Part X, line 26)</td> <td style="text-align: right;">0 0</td> </tr> <tr> <td style="text-align: right;">22 Net assets or fund balances. Subtract line 21 from line 20</td> <td style="text-align: right;">420,749 245,262</td> </tr> </table>	Beginning of Current Year	End of Year	420,749	245,262	21 Total liabilities (Part X, line 26)	0 0	22 Net assets or fund balances. Subtract line 21 from line 20	420,749 245,262				
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Part II Signature Block

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

Sign Here	Signature of officer <p style="text-align: center;">LARRY PAUL</p> Type or print name and title <p style="text-align: center;">CHAIRMAN</p>	Date
Paid Preparer Use Only	Print/Type preparer's name <p>KIM FORRESTER</p> Preparer's signature <p>KIM FORRESTER</p> Date <p>11/14/22</p> Check <input type="checkbox"/> if self-employed PTIN <p>P00734023</p> Firm's name ▶ LEVINE, JACOBS & COMPANY, L.L.C. Firm's EIN ▶ 22-3447596 Firm's address ▶ 333 EISENHOWER PARKWAY LIVINGSTON, NJ 07039 Phone no. 973-992-9400	

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

Part III Statement of Program Service Accomplishments

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



1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **3,292,647** including grants of \$ **3,176,699**) (Revenue \$)

THE GOOD PEOPLE FUND WAS FORMED FOR CHARITABLE AND EDUCATIONAL PURPOSES, PROVIDING BOTH FINANCIAL AND OPERATIONAL SUPPORT TO SMALL GRASS-ROOTS PROGRAMS IN THE UNITED STATES AND IN ISRAEL. THESE PROGRAMS ARE DEVOTED TO SERVING OTHERS IN NEED. THE GOOD PEOPLE FUND ASSISTS PROGRAMS TO BECOME SUSTAINABLE AND INDEPENDENT, AND TO ADVISE INDIVIDUALS, STUDENTS, TEACHERS AND DONEES WAYS TO IMPROVE AND MAXIMIZE THE USE OF FINANCIAL AND OTHER RESOURCES AND HOW TO UTILIZE OTHER PEOPLES TALENTS ON BEHALF OF REPAIRING THE WORLD.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses \$ **1,814** including grants of \$) (Revenue \$)

4e Total program service expenses **3,294,461**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 4 columns: Question, 1a, 8, Yes, No. Rows include questions about voting members, family relationships, management delegation, and governance decisions.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 4 columns: Question, Yes, No. Rows include questions about local chapters, conflict of interest policies, whistleblower policies, and document retention.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NJ, NY, CA, FL
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

NAOMI EISENBERGER
MILLBURN

C/O 384 WYOMING AVENUE

NJ 07471

973-761-0580

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) NAOMI EISENBERGER EXECUTIVE DIRECTOR	40.00 0.00			X				94,583	0	0
(2) MERRILL ALPERT SECRETARY	1.00 0.00	X		X				0	0	0
(3) GREGG A NATHANSON, ESQ BOARD MEMBER	1.00 0.00	X						0	0	0
(4) PETER FREIMARK BOARD MEMBER	1.00 0.00	X						0	0	0
(5) JORDAN HARBURGER BOARD MEMBER	1.00 0.00	X						0	0	0
(6) ADINA KANEFIELD BOARD MEMBER	1.00 0.00	X						0	0	0
(7) ERIK LINDAUER BOARD MEMBER	1.00 0.00	X						0	0	0
(8) STEVE MOEHLMAN TREASURER	1.00 0.00	X		X				0	0	0
(9) LARRY PAUL CHAIRMAN	1.00 0.00	X		X				0	0	0
(10)										
(11)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal							94,583			
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							94,583			

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,269,634			
	g Noncash contributions included in lines 1a-1f	1g	\$ 57,688			
	h Total. Add lines 1a-1f		3,269,634			
Program Service Revenue	2a	Business Code				
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		264		264	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real				
		(ii) Personal				
		6a				
	b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c				
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		7a				
		b Less: cost or other basis and sales exps.	7b			
	c Gain or (loss)	7c				
d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
	b Less: direct expenses	8b				
	c Net income or (loss) from fundraising events					
9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b				
	c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11a	Business Code				
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d					
12 Total revenue. See instructions		3,269,898	0	0	264	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,242,140	1,242,140		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,934,559	1,934,559		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	94,583	66,209	14,187	14,187
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	8,007	5,635	1,186	1,186
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	12,500		12,500	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	70,912	1,384	69,488	40
12 Advertising and promotion	50,088	30,053		20,035
13 Office expenses	12,537	950	11,383	204
14 Information technology	5,955	4,169	893	893
15 Royalties				
16 Occupancy				
17 Travel	10,629	7,441	1,594	1,594
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,401	1,921	240	240
23 Insurance	3,266		3,266	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a				
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	3,447,577	3,294,461	114,737	38,379
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	83,033	1	40,228
	2 Savings and temporary cash investments	335,046	2	200,305
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	2,537	9	2,537
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 34,789		
	b Less: accumulated depreciation	10b 32,597	133	10c 2,192
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)		420,749	16	245,262
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25		0	26
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	420,749	27	183,813
	28 Net assets with donor restrictions		28	61,449
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	420,749	32	245,262
33 Total liabilities and net assets/fund balances	420,749	33	245,262	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,269,898
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,447,577
3	Revenue less expenses. Subtract line 2 from line 1	3	-177,679
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	420,749
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	2,192
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	245,262

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ **Attach to Form 990 or Form 990-EZ.**

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

THE GOOD PEOPLE FUND INC.

Employer identification number

26-1887249

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,029,833	2,100,285	2,686,066	2,654,499	3,269,634	12,740,317
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2,029,833	2,100,285	2,686,066	2,654,499	3,269,634	12,740,317
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						12,740,317

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	2,029,833	2,100,285	2,686,066	2,654,499	3,269,634	12,740,317
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	766	673	558	217	264	2,478
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						12,742,795

12 Gross receipts from related activities, etc. (see instructions) 12

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))	14	99.98 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	99.98 %

16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,029,833	2,100,285	2,686,066	2,654,499	3,269,634	12,740,317
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	2,029,833	2,100,285	2,686,066	2,654,499	3,269,634	12,740,317
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						12,740,317

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6	2,029,833	2,100,285	2,686,066	2,654,499	3,269,634	12,740,317
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	766	673	558	217	264	2,478
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	766	673	558	217	264	2,478
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	2,030,599	2,100,958	2,686,624	2,654,716	3,269,898	12,742,795
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	99.98 %
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	99.98 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶
- b 33 1/3% support tests—2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
2		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
2a		
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

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

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i>)	
6 Other distributions (<i>describe in Part VI</i>). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	
9 Distributable amount for 2021 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required— <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021 Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Area with horizontal dotted lines for supplemental information.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

Employer identification number

THE GOOD PEOPLE FUND INC.

26-1887249

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate values, and yes/no questions about donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number of easements, acreage, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange program
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ %
- b** Permanent endowment ▶ %
- c** Term endowment ▶ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations
- (ii)** Related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		34,789	32,597	2,192
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,192

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include (1) Financial derivatives, (2) Closely held equity interests, (3) Other (A-H), and Total.

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows (1) through (9) and Total.

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. Rows (1) through (9) and Total.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes (1) Federal income taxes, followed by rows (2) through (9) and Total.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	3,269,898
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	3,269,898
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	3,269,898

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	3,445,385
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	3,445,385
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		2,192
c	Add lines 4a and 4b		4c	2,192
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	3,447,577

Part XIII Supplemental Information.

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

PART XII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER

BOOK / TAX DEPRECIATION DIFFERENCE \$ **2,192**

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

THE GOOD PEOPLE FUND INC.

Employer identification number

26-1887249

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
MIDDLE EAST					
(1)			GRANTS TO RECIPIENTS		
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			MIDDLE EAST	DISABILITIES	18,490	EFT			
(2)			MIDDLE EAST	KIDS AT RISK	119,306	EFT			
(3)			MIDDLE EAST	KIDS AT RISK	20,269	EFT			
(4)			MIDDLE EAST	KIDS AT RISK	9,900	EFT			
(5)			MIDDLE EAST	DISABILITIES	33,031	EFT			
(6)			MIDDLE EAST	HEALTHCARE	137,384	EFT			
(7)			MIDDLE EAST	KIDS AT RISK	252,518	EFT			
(8)			MIDDLE EAST	KIDS AT RISK	29,615	EFT			
(9)			MIDDLE EAST	KIDS AT RISK	53,134	EFT			
(10)			MIDDLE EAST	REFUGEES	25,914	EFT			
(11)			MIDDLE EAST	HEALTHCARE	33,000	EFT			
(12)			MIDDLE EAST	FOOD CLOTHES SHELTER	27,605	EFT			
(13)			MIDDLE EAST	WOMEN'S EMPOWERMENT	29,900	EFT			
(14)			MIDDLE EAST	FOOD RESCUE	179,045	EFT			
(15)			MIDDLE EAST	HEALTHCARE	52,800	EFT			
(16)			MIDDLE EAST	KIDS AT RISK	25,050	EFT			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 32

3 Enter total number of other organizations or entities ▶ 2

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			MIDDLE EAST	HEALTHCARE	20,000	EFT			
(2)			MIDDLE EAST	FOOD CLOTHES SHELTER	79,459	EFT			
(3)			MIDDLE EAST	DISABILITIES	116,686	EFT			
(4)			MIDDLE EAST	DISABILITIES	46,683	EFT			
(5)			MIDDLE EAST	DISABILITIES	11,079	EFT			
(6)			MIDDLE EAST	FOOD CLOTHES SHELTER	186,816	EFT			
(7)			MIDDLE EAST	FOOD CLOTHES SHELTER	95,053	EFT			
(8)			MIDDLE EAST	FOOD RESCUE	7,800	EFT			
(9)			MIDDLE EAST	KIDS AT RISK	41,335	EFT			
(10)			MIDDLE EAST	KIDS AT RISK	20,000	EFT			
(11)			MIDDLE EAST	HEALTHCARE	7,500	EFT			
(12)			MIDDLE EAST	FIGHTING HATRED	15,000	EFT			
(13)			MIDDLE EAST	ELDER CARE	27,898	EFT			
(14)			MIDDLE EAST	FIGHTING HATRED	24,139	EFT			
(15)			MIDDLE EAST	HEALTHCARE	161,659	EFT			
(16)			MIDDLE EAST	KIDS AT RISK	15,000	EFT			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

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

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

WE RECEIVE REPORTS FROM EACH ORGANIZATION ON HOW THE MONEY IS SPENT AND THE SUCCESS OF THE PROGRAMS.

PART I, LINE 3 - ACTIVITIES PER REGION

REGION	EXPENDITURES	INVESTMENTS
MIDDLE EAST	\$ 0	\$ 0

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

THE GOOD PEOPLE FUND INC.

Employer identification number

26-1887249

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	HEART 2 HEART DETROIT 31420 NORTHWESTERN HIGHWAY FARMINGTON HILLS MI 48334	46-2801700	501C3	10,000				FOOD CLOTHES SHELTER
(2)	ATZUM PO BOX 793 SKOKIE IL 60076	01-0697869	501C3	28,850				FOOD CLOTHES SHELTER
(3)	BREAKING THE CHAIN THROUGH EDUCATIO 38 MARION RD VERONA NJ 07044	38-3850662	501C3	6,000				EDUCATION
(4)	CARAVAN TO CLASS 1001 BRIDGEWAY #730 SAUSALITO CA 94965	27-1883320		7,500				EDUCATION
(5)	CITY STRINGS UNITED P.O. BOX 95123 NEWTON MA 02495	45-5118370		7,000				EDUCATION
(6)	CONNECTIONS 1 ECHO HILLS DOBBS FERRY NY 10522	13-1739945	501C3	20,000				KIDS AT RISK
(7)	CREATING CONNECTED COMMUNITIES PO BOX 500247 ATLANTA GA 31150	27-1926563	501C3	7,000				KIDS AT RISK
(8)	DETROIT HORSEPOWER 2470 COLLINGWOOD ST DETROIT MI 48206	47-3212490		15,000				KIDS AT RISK
(9)	ENVISION KINDNESS 14 ALEXANDER DRIVE EAST LYME CT 06333	47-1446859	501C3	6,300				HEALTHCARE

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶ 56**
- 3 Enter total number of other organizations listed in the line 1 table **▶ 3**

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

Schedule I (Form 990) (2021)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

THE GOOD PEOPLE FUND INC.

Employer identification number

26-1887249

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	FAMILY TO FAMILY 6 CIRCLE DRIVE HASTINGS ON HUDSON NY 10706	57-1169066	501C3	14,000				FOOD CLOTHES SHELTER
(2)	FEAST 3655 SOUTH GRAND AVE STE 210 LOS ANGELES CA 90007	46-4312265	501C3	20,000				HEALTHCARE
(3)	FOR GOOD PGH 420 BRADDOCK AVE BRADDOCK PA 15014	82-0809728		26,000				FOOD CLOTHES SHELTER
(4)	GABRIEL PROJECT MUMBAI PO BOX 5025 BERGENFELD NJ 07621	45-4541556	501C3	9,000				FOOD CLOTHES SHELTER
(5)	HELLO NEIGHBOR 6425 LIVING PLACE, STE 200 PITTSBURGH PA 15206	82-3695047	501C3	15,000				REFUGEES
(6)	I SUPPORT THE GIRLS 514 HILLSBORO DRIVE SILVER SPRING MD 20902	81-2163243	501C3	10,000				WOMENS EMPOWERMENT
(7)	INTERNATIONAL NEIGHBORS PO BOX 311 CHARLOTTESVILLE VA 22902	47-4084246	501C3	39,800				REFUGEES
(8)	JGIRLS MAGAZINE 145 W 117TH ST #1 NEW YORK NY 10026	13-3848582	501C3	10,079				WOMEN EMPOWERMENT
(9)	JUST IMAGINE 4805 4TH ST NW #4 WASHINGTON DC 20011	45-5006478		18,000				KIDS AT RISK

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
- 3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2021)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization **THE GOOD PEOPLE FUND INC.** Employer identification number **26-1887249**

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	LILY PO BOX 250402 NEW YORK NY 10025	80-0401075	501C3	25,000				ELDER CARE
(2)	MAGEN 260 CENTRAL AVENUE LAWRENCE NY 11559	13-3938077	501C3	43,000				KIDS AT RISK
(3)	MITZVAH CIRCLE FOUNDATION PO BOX 213 BLUE BELL PA 19422	26-3705891	501C3	20,000				FOOD CLOTHES SHELTER
(4)	MUSIC MENDS MINDS 2355 WESTWOOD BLVD #514 LOS ANGELES CA 90064	47-1493332	501C3	10,000				ELDER CARE
(5)	ONE CAN HELP PO BOX 56 WABAN MA 02468	20-4281579	501C3	20,000				FOOD CLOTHES SHELTER
(6)	PROJECT EZRA 465 GRAND STREET 4TH FL NEW YORK NY 10002	13-2739211	501C3	5,520				ELDER CARE
(7)	PUERTO RICO LIT 16 CALLE PEDROSA GUAYNABO PR 00966	66-0888132		9,000				FOOD CLOTHES SHELTER
(8)	PURE HEART FOUNDATION 13500 E. MCNICHOLS DETROIT MI 48205	45-2164800	501C3	18,500				KIDS AT RISK
(9)	REFUGEE ASSISTANCE ALLIANCE 1825 PONCE DE LEON BLVD. #145 CORAL GABLES FL 33134	82-3429406	501C3	34,507				REFUGEES

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2021)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

THE GOOD PEOPLE FUND INC.

Employer identification number

26-1887249

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	SPIRIT CLUB FOUNDATION 4507 DRESDEN STREET KENSINGTON MD 20895	47-4009580	501C3	15,000				DISABILITIES
(2)	SUNDAY FRIENDS PO BOX 24887 SAN JOSE CA 95154	77-0518937	501C3	7,500				FOOD CLOTHES SHELTER
(3)	SURVIVORS MITZVAH PROJECT 2658 GRIFFITH PARK BLVD, SUITE #299 LOS ANGELES CA 90039	36-4630389	501C3	43,000				ELDER CARE
(4)	U EMPOWER OF MD THE FOOD PROJECT 760 RICHIE HWY SEVERNA PARK MD 21146	46-2801700	501C3	42,389				CLOTHES FOOD SHELTER
(5)	THE WAREHOUSE NJ 20 PARSONAGE HILL ROAD SHORT HILLS NJ 07078	84-1802790		8,500				CLOTHES FOOD SHELTER
(6)	TRIBE TALK CONNECTION 115 BELLEVUE STREET NEWTON MA 02458	84-1802790		37,831				EDUCATION
(7)	WITNESS TO MASS INCARCERATION 111 WEST 71ST STREET NEW YORK NY 10023	47-3886529	501C3	20,000				WOMENS EMPOWERMENT
(8)	BIRDIE LIGHT 190 S. DREXEL AVE COLUMBUS OH 43209	87-2479501		15,000				HEALTHCARE
(9)	BLUE DOVE 1200 ASHWOOD PKWY SUITE 400 ATLANTA GA 30038	82-4010231		10,000				HEALTHCARE

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
- 3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2021)

**SCHEDULE I
(Form 990)****Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

Name of the organization

THE GOOD PEOPLE FUND INC.

Employer identification number

26-1887249**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	COMPASSIONATE PRISON PROJECT 8726 S SEPVEDA BLVD SUITE D-4201 LOS ANGELES CA 90049	83-4253779		15,000				BROKEN COMMUNITES
(2)	HOMES NOT BORDERS 3610 EAST STREET LANDOVER MD 20784	83-4634632		12,500				REFUGEES
(3)	J SURGE 514 FOREST DRIVE SPRINGFIELD NJ 07081	83-1820059		73,960				BROKEN COMMUNITIES
(4)	MEDICAL JUSTICE 308 WEST 73RD ST #1A NEW YORK NY 10023	85-3943873		10,000				JUSTICE
(5)	MY CHILDS CANCER 9-19 ELAINE TERRACE FAIR LAWN NJ 07410	47-1443808		17,000				HEALTHCARE
(6)	NECHAMACOMFORT 1299 DICKERSON RD TEANECK NJ 07666	85-1718405		18,000				HEALTHCARE
(7)	NEW NEIGHBORS 245 W 107TH STREET #3D NEW YORK NY 10025	83-4634632		20,000				REFUGEES
(8)	SKILLED VOLUNTEERS 1755 YORK AVE, APT19C NEW YORK NY 10128	27-1761653		10,000				REFUGEES
(9)	ZAAKAH 17 LOCKWOOD DRIVE #22 ROSELLE NJ 07203	36-4154398		17,995				REFUGEES

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2021)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

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

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

WE SUPPORT OTHER ORGANIZATIONS WHO HELP INDIVIDUALS IN CRISIS. WE RECEIVE REPORTS FROM EACH ORGANIZATION ON THE SUCCESS OF THE PROGRAM AND HOW OUR MONEY WAS SPENT INCLUDING THE NUMBER OF PEOPLE WE HELPED. IN THE LIMITED NUMBER OF TIMES, WE HELP INDIVIDUALS IT IS NOT DIRECT PAYMENT OF MONEY, BUT RATHER PAYMENT OF BILLS FOR INDIVIDUALS, NO CASH IS DISTRIBUTED.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0074

2021

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

THE GOOD PEOPLE FUND INC.

Employer identification number

26-1887249

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded	X	1	57,688	
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

**SCHEDULE O
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

THE GOOD PEOPLE FUND INC.

Employer identification number

26-1887249**FORM 990 - ORGANIZATION'S MISSION**

THE GOOD PEOPLE FUND WAS FORMED FOR CHARITABLE AND EDUCATIONAL PURPOSES,
PROVIDING BOTH FINANCIAL AND OPERATIONAL SUPPORT TO SMALL
GRASS-ROOTS PROGRAMS IN THE UNITED STATES AND IN ISRAEL. THESE PROGRAMS
ARE DEVOTED TO SERVING OTHERS IN NEED. THE GOOD PEOPLE FUND ASSISTS
PROGRAMS TO BECOME SUSTAINABLE AND INDEPENDENT, AND TO ADVISE INDIVIDUALS,
STUDENTS, TEACHERS AND DONEES WAYS TO IMPROVE AND MAXIMIZE THE USE OF
FINANCIAL AND OTHER RESOURCES AND HOW TO UTILIZE OTHER PEOPLES TALENTS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

PROVIDES CHARITABLE AND EDUCATIONAL ASSISTANCE TO THOSE THAT BETTER OUR
WORLD IN NUMEROUS WAYS BY PROVIDING BOTH FINANCIAL AND OPERATIONAL SUPPORT
TO SMALL, LOW-OVERHEAD GRASS-ROOTS PROGRAMS AND ORGANIZATIONS THAT
GENERALLY "FLY BELOW THE RADAR SCREEN" WHO ARE DEVOTED TO SERVING OTHERS
IN NEED IN BOTH THE UNITED STATES AND ISRAEL. COMMON TO ALL IS THE PRESENCE
OF AN INDIVIDUAL OR SMALL GROUP WHO HAVE RECOGNIZED A PROBLEM AND HAVE
DEDICATED THEMSELVES TO RESOLVING IT.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

A COMPLETED COPY OF THE RETURN IS PROVIDED TO THE AUDIT COMMITTEE. THE
AUDIT COMMITTEE REVIEWS THE TAX RETURN AND IN TURN DISTRIBUTES IT
ELECTRONICALLY TO ALL OF THE BOARD MEMBERS. THE AUDIT COMMITTEE AND THE
BOARD MEMBERS REVIEW THE RETURN AND RAISE QUESTIONS. IF APPLICABLE,
CHANGES ARE FORWARDED TO THE TAX PREPARER WHO THEN INCORPORATES THE CHANGES
AND SENDS AN UPDATED COPY OF THE TAX RETURN TO THE AUDIT COMMITTEE. AFTER

Name of the organization

Employer identification number

THE GOOD PEOPLE FUND INC.

26-1887249

ALL OF THE QUESTIONS HAVE BEEN ADDRESSED AND RESOLVED, THE TAX RETURN IS APPROVED AND THE FORM 8879 IS SIGNED BY THE CHAIRMAN.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

GPF HAS IN PLACE A POLICY PROHIBITNG ANY TRANSACTION FINANCIAL OR OTHERWISE THAT WOULD CREATE A CONFLICT OF INTEREST. THERE IS A PERIODIC REVIEW OF ALL ARRANGEMENTS. ALL ARANGEMENTS ARE RECORDED AND ENSURED THAT THERE ARE NO ACTIVITIES THAT COULD JEOPARDIZE ITS TAX-EXEMPT STATUS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE EXECUTIVE DIRECTOR HAS A FORMAL REVIEW ANNUALLY. THIS REVIEW IS PROVIDED BY THE BOARD OF DIRECTORS AND INCLUDES A SYNOPSIS OF THE JOB RESPONSIBILITIES AND DUTIES AND HOW THEY WERE CARRIED OUT DURING THE YEAR. THE BOARD REVIEWS AND DISCUSSES COMPARABLE SALARIES AND REVIEWS THE EXECUTIVE DIRECTORS COMPENSATION AT THIS TIME AS WELL.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

THE GOVERNING DOCUMENTS ARE AVAILALABLE ON THE GOOD PEOPLE FUND'S WEBSITE AND WILL BE PROVIDED UPON REQUEST.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

BOOK / TAX DEPRECIATION DIFFERENCE \$ 2,192

Form **4562**
 Department of the Treasury
 Internal Revenue Service (99)
 Name(s) shown on return

Depreciation and Amortization
 (Including Information on Listed Property)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2021

Attachment Sequence No. **179**

THE GOOD PEOPLE FUND INC.

Identifying number
26-1887249

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,050,000
2	Total cost of section 179 property placed in service (see instructions)	2	2,268
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,620,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	1,050,000
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
	COMPUTERS	2,268	2,268
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	2,268
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	2,268
10	Carryover of disallowed deduction from line 13 of your 2020 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	0
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	0
13	Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12	▶ 13	2,268

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	133

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2021	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

Section B—Assets Placed in Service During 2021 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	133
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Federal Asset Report**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Section 179 Expense:									
6	COMPUTERS	5/09/22	2,268		X	N/A	5 MO S/L	0	2,268
			<u>2,268</u>			<u>N/A</u>		<u>0</u>	<u>2,268</u>
Prior MACRS:									
2	COMPUTER	11/30/12	1,485		X	742	5 HY S/L	1,485	0
	Sold/Scrapped: 5/09/22								
3	COMPUTER AND PRINTER	3/18/13	836		X	418	5 HY S/L	836	0
	Sold/Scrapped: 5/09/22								
			<u>2,321</u>			<u>1,160</u>		<u>2,321</u>	<u>0</u>
Other Depreciation:									
1	DATABASE SOFTWARE	2/17/12	16,150		X	8,075	5 MO Amort	16,150	0
4	WEBSITE	1/01/16	15,045			15,045	5 MO Amort	15,045	0
5	COMPUTER	12/16/16	1,326			1,326	5 MO S/L	1,193	133
6	COMPUTERS	5/09/22	N/A*		X	0	5 MO S/L	0	0
	Total Other Depreciation		<u>32,521</u>			<u>24,446</u>		<u>32,388</u>	<u>133</u>
	Total ACRS and Other Depreciation		<u>32,521</u>			<u>24,446</u>		<u>32,388</u>	<u>133</u>
	Grand Totals		37,110			25,606		34,709	2,401
	Less: Dispositions and Transfers		2,321			1,160		2,321	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>34,789</u>			<u>24,446</u>		<u>32,388</u>	<u>2,401</u>

*Because this asset has 179 expense, its cost has been included in the Section 179 Property cost total

CA Asset Report**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Basis for Depr	CA Prior	CA Current	Federal Current	Difference Fed - CA
Section 179 Expense:								
6	COMPUTERS	5/09/22	2,268	N/A	0	2,268	2,268	0
			<u>2,268</u>	<u>N/A</u>	<u>0</u>	<u>2,268</u>	<u>2,268</u>	<u>0</u>
Prior MACRS:								
2	COMPUTER	11/30/12	1,485	1,485	1,485	0	0	0
	Sold/Scrapped: 5/09/22							
3	COMPUTER AND PRINTER	3/18/13	836	836	836	0	0	0
	Sold/Scrapped: 5/09/22							
			<u>2,321</u>	<u>2,321</u>	<u>2,321</u>	<u>0</u>	<u>0</u>	<u>0</u>
Other Depreciation:								
1	DATABASE SOFTWARE	2/17/12	16,150	16,150	16,150	0	0	0
4	WEBSITE	1/01/16	15,045	15,045	15,045	0	0	0
5	COMPUTER	12/16/16	1,326	1,326	1,193	133	133	0
6	COMPUTERS	5/09/22	N/A*	0	0	0	0	0
	Total Other Depreciation		<u>32,521</u>	<u>32,521</u>	<u>32,388</u>	<u>133</u>	<u>133</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>32,521</u>	<u>32,521</u>	<u>32,388</u>	<u>133</u>	<u>133</u>	<u>0</u>
	Grand Totals		37,110	34,842	34,709	2,401	2,401	0
	Less: Dispositions		2,321	2,321	2,321	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>34,789</u>	<u>32,521</u>	<u>32,388</u>	<u>2,401</u>	<u>2,401</u>	<u>0</u>

*Because this asset has 179 expense, its cost has been included in the Section 179 Property cost total

NY Asset Report**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Basis for Depr	NY Prior	NY Current	Federal Current	Difference Fed - NY
Section 179 Expense:								
6	COMPUTERS	5/09/22	2,268	N/A	0	2,268	2,268	0
			<u>2,268</u>	<u>N/A</u>	<u>0</u>	<u>2,268</u>	<u>2,268</u>	<u>0</u>
Prior MACRS:								
2	COMPUTER	11/30/12	1,485	1,485	1,485	0	0	0
	Sold/Scrapped: 5/09/22							
3	COMPUTER AND PRINTER	3/18/13	836	836	836	0	0	0
	Sold/Scrapped: 5/09/22							
			<u>2,321</u>	<u>2,321</u>	<u>2,321</u>	<u>0</u>	<u>0</u>	<u>0</u>
Other Depreciation:								
1	DATABASE SOFTWARE	2/17/12	16,150	16,150	16,150	0	0	0
4	WEBSITE	1/01/16	15,045	15,045	15,045	0	0	0
5	COMPUTER	12/16/16	1,326	1,326	1,193	133	133	0
6	COMPUTERS	5/09/22	N/A*	0	0	0	0	0
	Total Other Depreciation		<u>32,521</u>	<u>32,521</u>	<u>32,388</u>	<u>133</u>	<u>133</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>32,521</u>	<u>32,521</u>	<u>32,388</u>	<u>133</u>	<u>133</u>	<u>0</u>
	Grand Totals		37,110	34,842	34,709	2,401	2,401	0
	Less: Dispositions		2,321	2,321	2,321	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>34,789</u>	<u>32,521</u>	<u>32,388</u>	<u>2,401</u>	<u>2,401</u>	<u>0</u>

*Because this asset has 179 expense, its cost has been included in the Section 179 Property cost total

T3930 THE GOOD PEOPLE FUND INC.

26-1887249

FYE: 6/30/2022

AMT Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Prior MACRS:									
2	COMPUTER	11/30/12	1,485		X	742	5 HY S/L	1,485	0
	Sold/Scrapped: 5/09/22								
3	COMPUTER AND PRINTER	3/18/13	836		X	418	5 HY S/L	836	0
	Sold/Scrapped: 5/09/22								
			<u>2,321</u>			<u>1,160</u>		<u>2,321</u>	<u>0</u>
Other Depreciation:									
5	COMPUTER	12/16/16	1,326			1,326	5 MO S/L	1,193	133
6	COMPUTERS	5/09/22	2,268			2,268	5 MO S/L	0	76
	Total Other Depreciation		<u>3,594</u>			<u>3,594</u>		<u>1,193</u>	<u>209</u>
	Total ACRS and Other Depreciation		<u>3,594</u>			<u>3,594</u>		<u>1,193</u>	<u>209</u>
	Grand Totals		5,915			4,754		3,514	209
	Less: Dispositions and Transfers		<u>2,321</u>			<u>1,160</u>		<u>2,321</u>	<u>0</u>
	Net Grand Totals		<u>3,594</u>			<u>3,594</u>		<u>1,193</u>	<u>209</u>

T3930 THE GOOD PEOPLE FUND INC.

26-1887249

FYE: 6/30/2022

Bonus Depreciation Report

Form 990, Page 1

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
1	DATABASE SOFTWARE	2/17/12	16,150		0	0	8,075	8,075
2	COMPUTER	11/30/12	1,485		0	0	743	742
3	COMPUTER AND PRINTER	3/18/13	836		0	0	418	418
Grand Total			18,471		0	0	9,236	9,235
Less: Dispositions and Transfers			2,321		0	0	1,161	1,160
Net Grand Total			16,150		0	0	8,075	8,075

T3930 THE GOOD PEOPLE FUND INC.

26-1887249

FYE: 6/30/2022

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
MACRS Adjustments:						
Page 1	1	2	COMPUTER	0	0	0
Page 1	1	3	COMPUTER AND PRINTER	0	0	0
				<u>0</u>	<u>0</u>	<u>0</u>
				<u>0</u>	<u>0</u>	<u>0</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
Other Depreciation:					
1	DATABASE SOFTWARE	2/17/12	16,150	0	0
4	WEBSITE	1/01/16	15,045	0	0
5	COMPUTER	12/16/16	1,326	0	0
6	COMPUTERS	5/09/22	2,268	0	453
	Total Other Depreciation		<u>34,789</u>	<u>0</u>	<u>453</u>
	Total ACRS and Other Depreciation		<u>34,789</u>	<u>0</u>	<u>453</u>
	Grand Totals		<u>34,789</u>	<u>0</u>	<u>453</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>CA</u>
Other Depreciation:				
1	DATABASE SOFTWARE	2/17/12	16,150	0
4	WEBSITE	1/01/16	15,045	0
5	COMPUTER	12/16/16	1,326	0
6	COMPUTERS	5/09/22	2,268	0
	Total Other Depreciation		<u>34,789</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>34,789</u>	<u>0</u>
	Grand Totals		<u>34,789</u>	<u>0</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>NY</u>
<u>Other Depreciation:</u>				
1	DATABASE SOFTWARE	2/17/12	16,150	0
4	WEBSITE	1/01/16	15,045	0
5	COMPUTER	12/16/16	1,326	0
6	COMPUTERS	5/09/22	2,268	0
	Total Other Depreciation		<u>34,789</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>34,789</u>	<u>0</u>
	Grand Totals		<u>34,789</u>	<u>0</u>

Form 990	Two Year Comparison Report	2020 & 2021
For calendar year 2021, or tax year beginning 07/01/21 , ending 06/30/22		

Name **THE GOOD PEOPLE FUND INC.** Taxpayer Identification Number **26-1887249**

		2020	2021	Differences
Revenue	1. Contributions, gifts, grants	2,654,499	3,269,634	615,135
	2. Membership dues and assessments			
	3. Government contributions and grants			
	4. Program service revenue			
	5. Investment income	217	264	47
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory			
	8. Net income or (loss) from fundraising events			
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory			
	11. Other revenue			
	12. Total revenue. Add lines 1 through 11	2,654,716	3,269,898	615,182
Expenses	13. Grants and similar amounts paid	2,567,991	3,176,699	608,708
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	90,000	94,583	4,583
	16. Salaries, other compensation, and employee benefits	7,466	8,007	541
	17. Professional fundraising fees			
	18. Other professional fees	78,315	83,412	5,097
	19. Occupancy, rent, utilities, and maintenance			
	20. Depreciation and Depletion	1,769	2,401	632
	21. Other expenses	50,457	82,475	32,018
	22. Total expenses. Add lines 13 through 21	2,795,998	3,447,577	651,579
	23. Excess or (Deficit). Subtract line 22 from line 12	-141,282	-177,679	-36,397
Other Information	24. Total exempt revenue	2,654,716	3,269,898	615,182
	25. Total unrelated revenue			
	26. Total excludable revenue	217	264	47
	27. Total assets	420,749	245,262	-175,487
	28. Total liabilities			
	29. Retained earnings	420,749	245,262	-175,487
	30. Number of voting members of governing body	10	8	
	31. Number of independent voting members of governing body	10	8	
	32. Number of employees	1	1	
33. Number of volunteers				

Form 990	Tax Return History	2021
Name THE GOOD PEOPLE FUND INC.		Employer Identification Number 26-1887249

	2017	2018	2019	2020	2021	2022
Contributions, gifts, grants	2,029,833	2,100,285	2,686,066	2,654,499	3,269,634	
Membership dues						
Program service revenue						
Capital gain or loss						
Investment income	766	673	558	217	264	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue						
Total revenue	2,030,599	2,100,958	2,686,624	2,654,716	3,269,898	
Grants and similar amounts paid	1,798,302	1,866,488	2,136,767	2,567,991	3,176,699	
Benefits paid to or for members						
Compensation of officers, etc.	79,160	80,974	81,139	90,000	94,583	
Other compensation	34,352	24,608	29,362	7,466	8,007	
Professional fees	60,015	64,101	79,401	78,315	83,412	
Occupancy costs						
Depreciation and depletion	3,390	3,274	3,274	1,769	2,401	
Other expenses	49,994	51,402	56,450	50,457	82,475	
Total expenses	2,025,213	2,090,847	2,386,393	2,795,998	3,447,577	
Excess or (Deficit)	5,386	10,111	300,231	-141,282	-177,679	
Total exempt revenue	2,030,599	2,100,958	2,686,624	2,654,716	3,269,898	
Total unrelated revenue						
Total excludable revenue	766	673	558	217	264	
Total Assets	251,689	261,800	562,031	420,749	245,262	
Total Liabilities						
Net Fund Balances	251,689	261,800	562,031	420,749	245,262	

T3930 THE GOOD PEOPLE FUND INC.

26-1887249

FYE: 6/30/2022

Federal Statements

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
	\$ <u>264</u>		14			
TOTAL	\$ <u><u>264</u></u>					

T3930 THE GOOD PEOPLE FUND INC.
26-1887249
FYE: 6/30/2022

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
ADMINISTRATIVE SUPPORT	\$ 39,860	\$	\$ 39,860	\$
CONSULTING	30,788	1,200	29,588	
PAYROLL SERVICE	264	184	40	40
TOTAL	<u>\$ 70,912</u>	<u>\$ 1,384</u>	<u>\$ 69,488</u>	<u>\$ 40</u>

T3930 THE GOOD PEOPLE FUND INC.
26-1887249
FYE: 6/30/2022

Federal Statements

Schedule A, Part II, Line 1(e)

<u>Description</u>	<u>Amount</u>
	\$ 1,929,474
THE HERB ALPERT FOUNDATION CASH CONTRIBUTION	700,000
AMOS AND RUTH WILNAI FOUNDATION CASH CONTRIBUTION	150,000
SUSAN & ROBERT WEISS CASH CONTRIBUTION	165,000
MORTON H MEYERSON FAMILY FOUNDATION CASH CONTRIBUTION	110,160
CONDUIT FOUNDATION CASH CONTRIBUTION	69,000
LSK FOUNDATION CASH CONTRIBUTION	74,000
GELBAND FAMILY FOUNDATION CASH CONTRIBUTION	72,000
TOTAL	<u>\$ 3,269,634</u>

Schedule A, Part II, Line 8(e)

<u>Description</u>	<u>Amount</u>
	\$ 264
TOTAL	<u>\$ 264</u>

Schedule A, Part III, Line 1(e)

<u>Description</u>	<u>Amount</u>
	\$ 1,929,474
THE HERB ALPERT FOUNDATION CASH CONTRIBUTION	700,000
AMOS AND RUTH WILNAI FOUNDATION CASH CONTRIBUTION	150,000
SUSAN & ROBERT WEISS CASH CONTRIBUTION	165,000

T3930 THE GOOD PEOPLE FUND INC.
26-1887249
FYE: 6/30/2022

Federal Statements

Schedule A, Part III, Line 1(e) (continued)

<u>Description</u>	<u>Amount</u>
MORTON H MEYERSON FAMILY FOUNDATION	\$
CASH CONTRIBUTION	110,160
CONDUIT FOUNDATION	
CASH CONTRIBUTION	69,000
LSK FOUNDATION	
CASH CONTRIBUTION	74,000
GELBAND FAMILY FOUNDATION	
CASH CONTRIBUTION	72,000
TOTAL	<u>\$ 3,269,634</u>

Schedule A, Part III, Line 10a(e)

<u>Description</u>	<u>Amount</u>
TOTAL	<u>\$ 264</u>
	<u>\$ 264</u>