Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	רטו נוופ	e 2022 calendar year, or tax year beginning ○○□ 1, 2○22 and end	unig U	UN 30, 2023	
В	Check if applicabl	C Name of organization		D Employer identifi	cation number
	Addre:	THE MIDORI FOUNDATION, INC.			
	Name chang	Doing business as MIDORI AND FRIENDS		13-36824	72
	Initial return	-	om/suite	E Telephone numbe	r
	Final return	352 SEVENTH AVENUE 30	1	212-767-	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,980,545.
	Ameno return	NEW YORK, NY 10001		H(a) Is this a group re	
	Application			for subordinates	? Yes X No
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
1	Tax-exe	empt status: X 501(c)(3) S 501(c)() (insert no.) S 4947(a)(1) or S	527	If "No," attach a	list. See instructions
	Websit			H(c) Group exemptio	
		organization: X Corporation Trust Association Other	L Year	of formation: 1992 $_{ m N}$	1 State of legal domicile: \mathbf{DE}
P	art I	Summary			
ø	1	Briefly describe the organization's mission or most significant activities: ${\color{red} { ext{SEE}} \ \ { ext{SC}}}$	HEDU	LE O	
Activities & Governance					
ern	2	Check this box if the organization discontinued its operations or disposed	of more	1	
Š				3	24
۵		Number of independent voting members of the governing body (Part VI, line 1b) \dots			24
ies		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			81
ΞΞ		Total number of volunteers (estimate if necessary)			20
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	······		0.
		0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-	Prior Year 1,692,342.	Current Year 1,623,758.
ne		Contributions and grants (Part VIII, line 1h)		330,523.	207,989.
Revenue		Program service revenue (Part VIII, line 2g)		330,323.	201,303.
Be		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,757.	3,353.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,025,622.	1,835,100.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	0.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		945,145.	_
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		43,200.	43,200.
ben	h	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 313,459	····	13/2001	13/2001
X	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	· -	798,886.	668,734.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,787,231.	1,808,321.
		Revenue less expenses. Subtract line 18 from line 12		238,391.	26,779.
or	1.0	Tevendo leso experiose. Cabillate inte 10 il off inte 12	Be	ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		1,430,114.	1,701,163.
ASS 1 Ba	21	Total liabilities (Part X, line 26)		209,142.	453,412.
Set	22	Net assets or fund balances. Subtract line 21 from line 20		1,220,972.	1,247,751.
P	art II	Signature Block			
Und	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules an	nd stateme	ents, and to the best of m	y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which	preparer	has any knowledge.	
Sig	n	Signature of officer		Date	
He	re	LARISA GELMAN, EXECUTIVE DIRECTOR			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check Check	PTIN
Pai		JESSICA DIGIAMO DIAZ		self-employ	P01994693
	parer	Firm's name LUTZ AND CARR, CPAS LLP		Firm's EIN 1	3-1655065
Use	Only	Firm's address 551 FIFTH AVENUE, SUITE 400			0 600 0000
		NEW YORK, NY 10176		Phone no.21	2-697-2299
Ма	y the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No

Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: THE MIDORI FOUNDATION PROVIDES HIGH QUALITY MUSIC EDUCATION AND MUSIC	
	LITERACY PROGRAMS TO NEW YORK CITY SCHOOLS AND COMMUNITY CENTERS AT NO	$\overline{\circ}$
	CHARGE TO THE INDIVIDUAL STUDENTS.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	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?	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 \$717,128 • including grants of \$) (Revenue \$) (Revenue \$)	3.)
	PLAY TO LEARN:	
	PLAY TO LEARN PROVIDES INSTRUMENTAL AND VOCAL INSTRUCTION FOR STUDENTS	
	IN AND OUT OF SCHOOL TIME. MIDORI & FRIENDS TEACHING ARTISTS WORK WITH	
	STUDENTS TO INSTILL COURAGEOUS SELFEXPRESSION, THE JOY OF LEARNING, AN	ND
	A SPIRIT OF SERVICE THROUGH HIGH-QUALITY MUSIC EDUCATION PROGRAMS.	
	STUDENTS SHOWCASE THEIR ARTISTIC GROWTH IN A CULMINATING PERFORMANCE,	
	WHICH AMPLIFIES YOUTH VOICES, THEIR CREATIVITY, AND THE TRANSFORMATIVE	<u>E</u>
	POWER OF THE ARTS TO IGNITE POSITIVE SOCIAL CHANGE. PLAY TO LEARN	
	FOLLOWS THE NEW YORK STATE LEARNING STANDARDS FOR THE ARTS AND	
	BLUEPRINT FOR TEACHING &	
	LEARNING IN MUSIC: TO CREATE, PERFORM, RESPOND, AND CONNECT. (Code:) (Expenses \$ 392,818 · including grants of \$) (Revenue \$ 77,436)	
4b	(Code:) (Expenses \$ 392,818. including grants of \$) (Revenue \$ 77,436	<u>o •</u>)
	CELEBRATE! MUSIC:	
	CELEBRATE! MUSIC PROGRAM INVITES YOUNG LEARNERS TO BECOME GLOBAL	
	CITIZENS IN AN ACTIVE EXPLORATION OF WORLD MUSIC. BY LEARNING ABOUT THE	<u> </u>
	RICHNESS OF CULTURAL TRADITIONS, WORKS OF ART, AND MUSICAL CUSTOMS	.115
	AROUND THE GLOBE, IN CLASS AND THROUGH LIVE PERFORMANCES, STUDENTS	
	CULTIVATE A GLOBAL PERSPECTIVE THAT NURTURES EMPATHY AND UNDERSTANDING	<u>-</u>
	CELEBRATE! MUSIC	
	BRINGS ENGAGING MUSIC ENSEMBLES FROM AROUND THE WORLD AND CORRESPONDING	NG
	WORKSHOPS INTO NEW YORK CITY PUBLIC SCHOOLS. STUDENTS EXPERIENCE LIVE	
	ARTIST	
	PERFORMANCES AND INTERACTIVE WORKSHOPS WITH TEACHING ARTISTS, DEEPENIN	NG
4c	(Code:) (Expenses \$ 66,621 • including grants of \$) (Revenue \$	
	NEXTGEN MUSICIAN:	
	NEXTGEN MUSICIAN, A YOUTH LEADERSHIP AND ADVOCACY PROGRAM, LAUNCHED IN	
	2022 FOR NEW YORK CITY PUBLIC SCHOOL TEENS. SCHOLARSHIPS ARE PROVIDED	
	FOR STUDENTS TO EXPLORE CAREER PATHWAYS, IN MUSIC AND BEYOND, THROUGH	
	WORKSHOPS, PRIVATE LESSONS, MASTERCLASSES, PERFORMANCES, WORK-STUDY	
	OPPORTUNITIES, AND CAREER LABS WITH CRITICAL THINKERS IN DIVERSE	
	FIELDS OF STUDY AND EXTRAORDINARY ARTISTS, INCLUDING WORLD-RENOWNED	
	VIRTUOSO VIOLINIST, MIDORI! TEENS SHARPEN THEIR ADVOCACY SKILLS THROUGH	<u>JH</u>
	STORYTELLING, PUBLIC SPEAKING, AND PERSUASIVE WRITING. THE PROGRAM	
	CULMINATES WITH A COMMUNITY PRESENTATION OF THEIR COLLABORATIVE ARTS	
	ADVOCACY CAMPAIGN FEATURING THE NEXT GENERATION OF MUSIC LEADERS.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses 1,176,567.	000=
	Form 990 (2	2022)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			37
	public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			37
_	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		Х
•	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			Х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
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	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
5	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	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	Ť		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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	11b		X
С	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	11c		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	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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	14b		Х
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	טדו		
.0	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
•••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	21		X

232003 12-13-22

Form **990** (2022)

MIDORI_1

Dest IV	Charlist of Dogwing Cabadulas	/ !! !!
Partiv	Checklist of Required Schedules	(continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		.,	
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
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%			x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
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</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			3,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		21
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			.,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	20	х	
Pai	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	L
u	Check if Schedule O contains a response or note to any line in this Part V			
	Should be sometime a response of note to any line in the rate v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 38		. 55	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

232004 12-13-22

Form **990** (2022)

022) THE MIDORI FOUNDATION, INC. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				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 81			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?	2 b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	financial account in a foreign country (such as a bank account, securities account, or other financial		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 A	ccounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	any contributions that were not tax deductible as charitable contributions?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	to file Form 8282?		7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
_	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.		0-		
a			9a 9b		
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:		ЭD		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	100			
	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		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	•			
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		X
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

232005 12-13-22

Form **990** (2022)

MIDORI_1

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
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 24			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a				
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY			
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) availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d fina	ncial	
	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 THOMAS CAWLEY - 212-767-1300			
	352 SEVENTH AVENUE, 301, NEW YORK, NY 10001			

Form **990** (2022)

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 the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organizat		orga	aniza			mpe	nsat			
(A)	(B))) Pos	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	heck	more	than	one	Reportable 	Reportable	Estimated
	hours per week					is bot or/trus		compensation from	compensation from related	amount of other
	(list any	tor						the	organizations	compensation
	hours for	direc.				pa		organization	(W-2/1099-MISC/	from the
	related	tee or	trustee			ensat		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	nal tr		loyee	omp		1099-NEC)		and related
	below	Individual trustee or director	Institutional	Officer	Key employee	Highest compensated employee	Former			organizations
(1) DON GLATDODNE	line) 1.00	트	<u> </u>	₩	- S	ij.e	호			
(1) RON CLAIBORNE CHAIR	1.00	x		х				0.	0.	0.
(2) MARILYN COHEN	1.00	^		^				0.	0.	0.
VICE CHAIR AND TREASURER	1.00	X		х				0.	0.	0.
(3) GEETA SHARMA, M.D	1.00	122						•		•
SECRETARY	1.00	x		х				0.	0.	0.
(4) ALAN FISCHER	1.00	123						•	•	•
CHAIRMAN EMERITUS	1 2100	x						0.	0.	0.
(5) LARAINE FISCHER	1.00	 						•		
FOUNDING MEMBER		x						0.	0.	0.
(6) PETER GLASER	1.00							<u> </u>		
BOARD MEMBER		X						0.	0.	0.
(7) DANIEL GOLDHAGEN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) MIDORI GOTO	1.00									
FOUNDER AND PRESIDENT EMER		Х						0.	0.	0.
(9) SETSU GOTO	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) HEIDI ARONIN	1.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(11) MANDY DEPHILLIPO	1.00	ļ								
BOARD MEMBER		Х						0.	0.	0.
(12) JENNIFER HANLEY	1.00	١						•		•
BOARD MEMBER	1 00	Х						0.	0.	0.
(13) YUKA HASHIMOTO	1.00	ļ ,,						_		0
BOARD MEMBER	1 00	Х						0.	0.	0.
(14) MEGAN JAKEL	1.00	₩						0		0
BOARD MEMBER	1.00	Х						0.	0.	0.
(15) DEANNA LANDIVAR-RUIZ	1.00	X						0.	0.	0.
BOARD MEMBER (16) ROBERT MERRELL	1.00	┢		\vdash	_	-		· ·	0.	<u> </u>
BOARD MEMBER	1.00	x						0.	0.	0.
(17) MARC RICHTER	1.00	122						•	0.	•
BOARD MEMBER	1.00	X						0.	0.	0.
			1		L	1			ı	

232007 12-13-22

Form 990 (2022)

Page 8

Section A. Officers, Directors, Trus		Picy	ees			gne	SIC			1		
(A)	(B)			(C Posi	-			(D)	(E)		(F)	
Name and title	Average		not c	heck	more	than		Reportable	Reportable	1	Estimat	
	hours per week			ss pe nd a d				compensation	compensation	4	amount	
	(list any	\vdash					É	from	from related		othe	
	hours for	director						the organization	organizations (W-2/1099-MISC/	CO	mpens from th	
	related	e or d	tee			sated		(W-2/1099-MISC/	1099-NEC)		rganiza	
	organizations	trustee or	trus		ee ee	ubeu		1099-NEC)	1033-1120)	1	ınd rela	
	below	ualt	ional		ploy	yee	L	1033-1120)		1	ganizat	
	line)	Individual t	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				gamea	
(18) CHRIS RIGGS	1.00		_		<u>×</u>	1	_					
BOARD MEMBER		X						0.	0	•		0.
(19) YUKARI SAEGUSA	1.00	П								1		
BOARD MEMBER		x						0.	0			0.
(20) HOWARD SENDROVITZ	1.00	П										
BOARD MEMBER		X						0.	0			0.
(21) MAKIKO TANAKA	1.00	П										
BOARD MEMBER		X						0.	0	•		0.
(22) MARCELO TAU	1.00	П										
BOARD MEMBER		Х						0.	0	<u>. </u>		0.
(23) ELANA SLOBODIEN	1.00											
BOARD MEMBER		Х						0.	0	•		0.
(24) FERNANDA UBATUBA	1.00											
BOARD MEMBER		X						0.	0	•		0.
(25) LARISA GELMAN	40.00]							_			
EXECUTIVE DIRECTOR		Ш		Х				211,970.	0	•	1,0	30.
(26) THOMAS CAWLEY	40.00]							_			
CHIEF FINANCIAL OFFICER				Х				105,020.	0		26,5	
1b Subtotal								316,990.	0		27,6	
c Total from continuation sheets to Part V	I, Section A							0.	0			0.
d Total (add lines 1b and 1c)		<u></u>						316,990.	0	•	27,6	510.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) wł	no r	eceived more than \$100	,000 of reportable			_
compensation from the organization												2
											Yes	No
3 Did the organization list any former officer,	•	-	сеу с	empl	loye	e, o	r hig	phest compensated emp	oloyee on			١
line 1a? If "Yes," complete Schedule J for s	uch individual									3		X
4 For any individual listed on line 1a, is the su								•	the organization		4	
and related organizations greater than \$15	•		•							4	X	
5 Did any person listed on line 1a receive or a					-		elat	ted organization or indivi	dual for services			1 37
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedul	e J to	or si	uch _I	pers	son .				5		X
<u> </u>							4	Hand on a Stand on a set Hand	Φ4.00.000 -f			
 Complete this table for your five highest co the organization. Report compensation for 										Sation	1 IIOIII	
(A)	ine calendar y	eare	enui	ng v	VILII	OI W	101111	(B)	year.		(C)	
Name and business	address	NC	INC	3				Description of s	ervices		ensatio	on
-							\dashv	•				

Form **990** (2022)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Pa	rt v	/ 1111			and the transport VIIII			
			Check if Schedule O contains a response	or note to any lir	ne in this Part VIII (A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated	Revenue excluded from tax under
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts		b d e f	Federated campaigns	172,910. ,150,245. 300,603. Business Code 611600	207,989.			sections 512 - 514
Ь			All other program service revenue					
	3 4 5		Total. Add lines 2a-2f Investment income (including dividends, inter other similar amounts) Income from investment of tax-exempt bond Royalties	est, and proceeds	207,989.			
		b c	Gross rents 6a Less: rental expenses 6b Rental income or (loss)	(ii) Personal				
Revenue	7	a b	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses 7b	(ii) Other				
eve			Gain or (loss) 7c					
Other R	8	а		145,445.				
			Net income or (loss) from fundraising events		0.			
	9	а	Gross income from gaming activities. See Part IV, line 19 Less: direct expenses 9a					
			Net income or (loss) from gaming activities	<u>' I </u>				
	10	a b	Gross sales of inventory, less returns and allowances 10: Less: cost of goods sold 10!	Ь				
		С	Net income or (loss) from sales of inventory .					
Miscellaneous Revenue	11	a b	OTHER REVENUE	Business Code 611600	3,353.			3,353.
Scel		С						
Ξ̈́			All other revenue		3,353.			
	12		Total. Add lines 11a-11d Total revenue. See instructions		1,835,100.	207,989.	0.	3,353.
	12				<u></u>	, , , , , , , , ,		_

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).

Do	Check if Schedule O contains a responsion include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		СХРСПЗСЗ	general expenses	схренаев
•	and domestic governments. See Part IV, line 21				
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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	347,796.	81,641.	204,924.	61,231.
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	566,341.	465,293.	2,077.	98,971.
8	Pension plan accruals and contributions (include				·
	section 401(k) and 403(b) employer contributions)	24,488.	23,288.		1,200.
9	Other employee benefits	95,343.	85,489.		1,200. 9,854. 13,639.
10	Payroll taxes	62,419.	32,187.	16,593.	13,639.
11	Fees for services (nonemployees):	•	,		·
	Management				
b	Legal	12,547.	8,596.	1,850.	2,101.
	Accounting	39,766.	7,000	39,766.	
	Lobbying	7.7.			
e	D (' 1(1 ' ' ' O D ' N ' ' ' 17	43,200.			43,200.
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch O.)	270,434.	262,560.	800.	7.074.
12	Advertising and promotion	9,698.	6,371.	713.	7,074. 2,614.
13	Office expenses	82,808.	45,707.	11,195.	25,906.
14	Information technology	02,0001	2377077		20,000
15	Royalties				
16		161,571.	104,556.	26,568.	30,447.
17	Occupancy	10,006.	9,635.	88.	283.
18		20,0001	3,0001		
10	Payments of travel or entertainment expenses for any federal, state, or local public officials				
10	Conferences, conventions, and meetings				
19 20	,, , , , , , , , , , , , , , , , , , ,				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	595.		595.	
		9,609.	5,896.	1,441.	2,272.
23 24	Other expenses. Itemize expenses not covered	5,005	3,0301	-,	2 2 2
4 4	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
_	amount, list line 24e expenses on Schedule 0.) PROGRAMMING SUPPPLIES	31,151.	31,151.		
a	MEALS AND ENTERTAINMENT	15,267.	2,918.	8,020.	4,329.
b	MISCELLANEOUS EXPENSES	11,321.	2,457.	2,185.	6,679.
q	INSTRUMENT AND EQUIPMEN	9,022.	6,256.	1,305.	1,461.
d		4,939.	2,566.	175.	2,198.
e oe	· — — –	1,808,321.	1,176,567.	318,295.	313,459.
25	Total functional expenses. Add lines 1 through 24e	I,000,341•	1,110,30/•	310,493.	J1J,4JJ.
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 if following SOP 98-2 (ASC 958-720)				
	Check here if following SOP 98-2 (ASC 958-720)				F 000 (0000)

Form 990 (2022) Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or n	ote to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	67,938.	1	45,556		
	2	Savings and temporary cash investments			815,944.	2	354,225
	3	Pledges and grants receivable, net		252,350.	3	900,190	
	4	Accounts receivable, net		209,393.	4	136,434	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial o	contributor, or 35%			
		controlled entity or family member of any of th		5			
its	6	Loans and other receivables from other disqua	alified pe	rsons (as defined			
		under section 4958(f)(1)), and persons describ	ed in sed	ction 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			48,055.	9	16,634
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	57,111.	_		
	b	Less: accumulated depreciation	10b	42,640.	0.	10c	14,471
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets	26 424	14	222 652		
	15	Other assets. See Part IV, line 11			36,434.	15	233,653
	16	Total assets. Add lines 1 through 15 (must eq			1,430,114.	16	1,701,163
	17	Accounts payable and accrued expenses	199,642.	17	241,366		
	18	Grants payable	0 500	18	10.070		
	19	Deferred revenue			9,500.	19	12,979
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, sub					
<u> </u>		controlled entity or family member of any of th	•			22	
	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrelat				24	
	25	Other liabilities (including federal income tax, p					
		parties, and other liabilities not included on line			0.	05	199,067
	00	of Schedule D			209,142.	25	453,412
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, cl			200,142.	26	455,412
es		and complete lines 27, 28, 32, and 33.	ieck iiei	e 121			
auc	27	Net assets without donor restrictions			1,155,972.	27	1,227,751
Bali	28	Net assets with donor restrictions			65,000.	28	20,000
<u> </u>	20	Organizations that do not follow FASB ASC			03,000	20	20,000
Ī		and complete lines 29 through 33.	500, CIII				
ō	29	Capital stock or trust principal, or current fund	s			29	
ets	30	Paid-in or capital surplus, or land, building, or				30	
AS	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances		—	1,220,972.	32	1,247,751
_	33	Total liabilities and net assets/fund balances		1	1,430,114.	33	1,701,163
		. Staabiiido and not abboto/fand balanoto			,,		Form 990 (2022

Form **990** (2022)

Da	TVI = William Child				
Ра	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,83	5.1	00.
2	Total expenses (must equal Part IX, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25)		$\frac{1,80}{1,80}$		
3		3			79.
4	Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		$\frac{2}{1,22}$		
5		5		• , ,	, _ •
6	Net unrealized gains (losses) on investments	6			
7	Donated services and use of facilities	7			
8	Investment expenses	8			
9	Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O)	9			0.
	•	9			•
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	10	1,24	7 7	51
Pa	column (B)) rt XIII Financial Statements and Reporting	10	1,24	','	<u> </u>
	Check if Schedule O contains a response or note to any line in this Part XII				
	Officer if Schedule O contains a response of flote to any line in this Part All			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separar	te basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sc				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

232012 12-13-22

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

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

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE MIDORI FOUNDATION INC.

Employer identification number 13-3682472

_				HEILIT ON , THE !				3 3002172	
Pa	rt I	Reason for Public (Charity Status.	(All organizations must o	omplete ti	nis part.) S	See instructions.		
The	organ	ization is not a private found	lation because it is: ((For lines 1 through 12, o	check only	one box.)			
1		A church, convention of ch	urches, or association	on of churches described	d in sectio	n 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 organiz	ation operated in co	njunction with a hospital	described	d in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,	
		city, and state:							
5		An organization operated for	or the benefit of a co	ollege or university owner	d or opera	ted by a g	overnmental unit describ	ped in	
_		section 170(b)(1)(A)(iv). (C		J ,		, ,			
6		A federal, state, or local gov	. ,	nental unit described in	section 17	70(h)(1)(A)	(v)		
_	X	An organization that norma						nublic described in	
•		section 170(b)(1)(A)(vi). (C		initial part of its support i	ioiii a gov	errineritai	dilit of from the general	public described in	
			•	(4)(A)(vi) (Camarlata Dav	L 11 \				
8	H	A community trust describe							
9		An agricultural research org	-			-	-	-	
		or university or a non-land-g	grant college of agric	culture (see instructions).	Enter the	name, city	y, and state of the colleg	e or	
		university:							
10		An organization that norma							
		activities related to its exen	•	•				-	
		income and unrelated busing	ness taxable income	(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.	
		See section 509(a)(2). (Cor	mplete Part III.)						
11	Щ	An organization organized a	and operated exclus	ively to test for public sa	ifety. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclus	ively for the benefit of, to	perform	the function	ons of, or to carry out the	e purposes of one or	
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3). (Check the box on	
		lines 12a through 12d that	describes the type o	of supporting organizatio	n and con	nplete line	s 12e, 12f, and 12g.		
а			anization operated, s	supervised, or controlled	by its sup	ported or	ganization(s), typically by	giving giving	
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trustees of the s	supporting	
		organization. You must o	complete Part IV, Se	ections A and B.					
b		Type II. A supporting org	anization supervised	d or controlled in connec	tion with it	s support	ed organization(s), by ha	iving	
		control or management o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or manage the sup	ported	
		organization(s). You mus	t complete Part IV,	Sections A and C.					
С		Type III functionally inte	grated. A supportin	g organization operated	in connec	tion with,	and functionally integrat	ed with,	
		its supported organization						,	
d		Type III non-functionally		•				zation(s)	
		that is not functionally int						. ,	
		requirement (see instruct	-	•	•		•		
е		Check this box if the orga	•	-					
Ŭ		functionally integrated, or					2 1 ypc 1, 1 ypc 11, 1 ypc 111		
f	Ente	er the number of supported of	• •	many integrated support	ing organi	Lation.			
		ride the following information		ad organization(s)					
9		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other	
		organization		(described on lines 1-10	in your governi Yes	No	support (see instructions)	support (see instructions)	
				above (see instructions))					
								_	
Tota	al						I		

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

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

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	1492414.	1533390.	1307560.	1692342.	1623758.	7649464.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities						_	
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	1492414.	1533390.	1307560.	1692342.	1623758.	7649464.	
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)						238,368.	
6	Public support. Subtract line 5 from line 4.						7411096.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
7	Amounts from line 4	1492414.	1533390.	1307560.	1692342.	1623758.	7649464.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources							
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.)	709.	885.	8,650.	2,757.	3,353.	16,354.	
11	Total support. Add lines 7 through 10						7665818.	
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	932,085.	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)		
	organization, check this box and stop							
	ction C. Computation of Publ						0.5.50	
14	Public support percentage for 2022 (14	96.68 %	
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	96.57 %	
16a	33 1/3% support test - 2022. If the o	•		•		•		
	stop here. The organization qualifies							
b	33 1/3% support test - 2021. If the c							
	and stop here. The organization qual							
17a	10% -facts-and-circumstances tes	-						
	and if the organization meets the fact		•	-	•	VI how the organiz	ation	
	meets the facts-and-circumstances to	ū	•					
b	10% -facts-and-circumstances tes	· ·				•	10% or	
	more, and if the organization meets the				-			
	organization meets the facts-and-circ							
<u>18</u>	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

Schedule A (Form 990) 2022

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.)

Se	ction A. Public Support	, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	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						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support			•	•	•	•
Cale	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	. ,		` '		, ,	
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	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			1			
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third.	fourth, or fifth tax	vear as a section	501(c)(3) organizat	ion.
-	check this box and stop here	•		,			,
Se	ction C. Computation of Publ						
	Public support percentage for 2022 (column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inve						
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
	a 33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

232023 12-09-22

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
_		
2		
3a		
3b		
JD		
3с		
4a		
-1 a		
4b		
4c		
F-		
5a		
5b		
5c		
6		
7		
8		
,		
0-		
9a		
9b		
9с		
10a		
10b		
100		

Par	t IV S	upporting Organizations _(continued)			
				Yes	No
11	Has the c	organization accepted a gift or contribution from any of the following persons?			
а	A person	who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c belov	w, the governing body of a supported organization?	11a		
b	A family r	nember of a person described on line 11a above?	11b		
С	A 35% co	ontrolled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in F		11c		
Sect	ion B.	Type I Supporting Organizations			
				Yes	No
1		overning body, members of the governing body, officers acting in their official capacity, or membership of one or			
		ported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s), operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		ion, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
		d organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the o	rganization operate for the benefit of any supported organization other than the supported			
	•	ion(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI h	ow providing such benefit carried out the purposes of the supported organization(s) that operated,			
		d, or controlled the supporting organization.	2		
Sect	ion C.	Type II Supporting Organizations			
				Yes	No
1		najority of the organization's directors or trustees during the tax year also a majority of the directors			
		es of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	_	ement of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>		orted organization(s).	1		
Seci	ion D. A	All Type III Supporting Organizations		T	
				Yes	No
1		rganization provide to each of its supported organizations, by the last day of the fifth month of the			
	•	ion's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
•		ion's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2		of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		ion(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how ization maintained a close and continuous working relationship with the supported organization(s).	2		
3	_	n of the relationship described on line 2, above, did the organization's supported organizations have a			
3	-	It voice in the organization's investment policies and in directing the use of the organization's			
	U	r assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		d organizations played in this regard.	3		
Sect		Type III Functionally Integrated Supporting Organizations			
1		e box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
a		e organization satisfied the Activities Test. Complete line 2 below.	-		
b		e organization is the parent of each of its supported organizations. Complete line 3 below.			
С		e organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns).	
2	Activities	Test. Answer lines 2a and 2b below.		Yes	No
а	Did subst	tantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supp	orted organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those su	pported 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	e activities constituted substantially all of its activities.	2a		
b	Did the a	ctivities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or me	ore of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI th	ne reasons for the organization's position that its supported organization(s) would have engaged in			
	these act	ivities but for the organization's involvement.	2b		
3	Parent of	Supported Organizations. Answer lines 3a and 3b below.			
а		rganization have the power to regularly appoint or elect a majority of the officers, directors, or			
		of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the o	rganization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b | 232025 | 12-09-22 | Schedule A (Form 990) 2022

	All other Type III non-functionally integrated supporting organizations mus	t complete	Sections A through E.	
Sect	ion 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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,	+		
7	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	Illy integrate	ed Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

b Excess from 2019c Excess from 2020d Excess from 2021e Excess from 2022

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.)

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 Inspection

Name of the organization

THE MIDORI FOUNDATION, INC.

Employer identification number 13-3682472

Par	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.				
	organization answered fes on Form 990, Part IV, III	(a) Donor advised funds	(b) Funds and other accounts		
1	Total number at end of year	(4, 25.13. 44.1354 14.145	(2) (3) (3) (3) (3) (3) (3) (3)		
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year		+		
5	Did the organization inform all donors and donor advisors in	l writing that the assets held in donor a	L dvised funds		
J	are the organization's property, subject to the organization's	_			
6	Did the organization inform all grantees, donors, and donor a				
Ü	for charitable purposes and not for the benefit of the donor of				
Par					
1	Purpose(s) of conservation easements held by the organizat				
•	Preservation of land for public use (for example, recrea		n of a historically important land area		
	Protection of natural habitat		of a certified historic structure		
	Preservation of open space	1 10001 valion	Total detailed filototic directure		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the fo	orm of a conservation easement on the last		
_	day of the tax year.		Held at the End of the Tax Year		
а	Total number of conservation easements		2a		
	Total acreage restricted by conservation easements				
	Number of conservation easements on a certified historic str				
	Number of conservation easements included in (c) acquired				
	historic structure listed in the National Register		2d		
3	Number of conservation easements modified, transferred, re				
	year	, ,			
4	Number of states where property subject to conservation ea	sement is located			
5	Does the organization have a written policy regarding the pe		of		
	violations, and enforcement of the conservation easements i				
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing of	conservation easements during the year		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conse	ervation easements during the year		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section	170(h)(4)(B)(i)		
	and section 170(h)(4)(B)(ii)?		Yes No		
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expe	nse statement and		
	balance sheet, and include, if applicable, the text of the footi	note to the organization's financial sta	ements that describes the		
	organization's accounting for conservation easements.				
Par	t III Organizations Maintaining Collections o		Other Similar Assets.		
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue stateme	nt and balance sheet works		
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research	n furtherance of public		
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these	items.		
b	If the organization elected, as permitted under FASB ASC 95	· ·			
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in t	urtherance of public service,		
	provide the following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1		•		
	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, historical tre	asures, or other similar assets for final	ncial gain, provide		
	the following amounts required to be reported under FASB $\!$				
а	Revenue included on Form 990, Part VIII, line 1		\$		
	Assets included in Form 990, Part X		\$		
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2022		

232051 09-01-22

	t III Organizations Maintaining C	collections of A			easures. o	r Other	Similar A	ssets/c/		raye z ()
3	Using the organization's acquisition, accessi		-		-					,
	collection items (check all that apply):									
а	Public exhibition d Loan or exchange program									
b	Scholarly research	6		ner	inango program					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how they	further t	ne organizatio	n's exem	pt purpose ir	Part XIII		
5	During the year, did the organization solicit o									
	to be sold to raise funds rather than to be ma							Ye	s [☐ No
Pai	t IV Escrow and Custodial Arran								9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for co	ntribution	s or other ass	sets not in	ncluded			
	on Form 990, Part X?							Ye	s [☐ No
b	If "Yes," explain the arrangement in Part XIII									
								Am	ount	
С	Beginning balance						1c			
	d Additions during the year1d									
	e Distributions during the year									
f	Ending balance						1f			
	Did the organization include an amount on F							, 📖 Ye	∙s _	No
_	If "Yes," explain the arrangement in Part XIII.								<u></u>	
Pai	t V Endowment Funds. Complete i									
		(a) Current year	(b) Prio	r year	(c) Two years	s back (d	I) Three years I	oack (e)	Four year	rs back
	Beginning of year balance									
b	Contributions									
	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	•	ce (line 1g,	column (a	ı)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С		%								
_	The percentages on lines 2a, 2b, and 2c sho	•								
За	Are there endowment funds not in the posse	ssion of the organiz	ation that a	are held a	nd administer	red for the	9		Var	No
	organization by:							<u></u>	Yes	No
	(i) Unrelated organizations								a(i)	<u> </u>
	(ii) Related organizations	#! I'-4I						38	a(ii)	<u> </u>
D	If "Yes" on line 3a(ii), are the related organiza							L	3b	
Pa:	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wrnent tur	ius.						
ı aı	Complete if the organization answere		n Part IV li	ne 11a S	See Form 990	Part X lii	ne 10			
-		(a) Cost or o			-			(4)	Book val	luo
	Description of property	basis (investr		(b) Cost basis			cumulated eciation	(a)	JUUK Väl	iu C
12	Land	` `		24010	(23,101)	асрі				
	Land Buildings									
	Leasehold improvements							1		
	Equipment			4	3,511.	•	29,040.	1	14	471.
	Other				3,600.		13,600.			0.

Schedule D (Form 990) 2022

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Schedule D (Form 990) 2022 THE MIDORI I	FOUNDATION, INC	: . 1	.3-3682472 Page 3
Part VII Investments - Other Securities.			r ago c
Complete if the organization answered "Yes" of			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)	+		
(E)			
(F) (G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" (1d. See Form 990, Part X, line 15.	1 (1) 5
CECIDITAL DEDOCIAC	Description		(b) Book value
(1) SECURITY DEPOSITS	TOD ACCOM		36,434 197,219
(2) OPERATING LEASE RIGHT-OF-U	JOE HOSET		191,219
(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)			
Total, (Column (b) must equal Form 990, Part X, col. (B) line	15)		233,653
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line	25.
1. (a) Description of liability		, ,	(b) Book value
(1) Federal income taxes			
(2) OPERATING LEASE LIABILITY			199,067
(3)			
(4)			
(5)			
(6)			
(7)			

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...

Schedule D (Form 990) 2022

199,067.

(8)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

Par	t XI Reconciliation of Revenue per Audited Financial St	atements With Rever	ue per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, I	ine 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	1,835,100
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
	Donated services and use of facilities			
	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			0,
3	Subtract line 2e from line 1		3	1,835,100
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		•
	Add lines 4a and 4b			0.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12			1,835,100
Par	t XII Reconciliation of Expenses per Audited Financial S	•	nses per Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, I			1 000 201
1	Total expenses and losses per audited financial statements		1	1,808,321
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities			
b	Prior year adjustments			
	Other losses			
	Other (Describe in Part XIII.)	•		0
_	Add lines 2a through 2d			1,808,321
3	Subtract line 2e from line 1		3	1,000,341
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1		
	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIII.)	4b		0 .
	Add lines 4a and 4b			1,808,321
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line to tall Supplemental Information.	16.)	5	1,000,521
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a		Part V, line 4; Part	X, line 2; Part XI,

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Employer identification number

THE MIDORI FOUNDATION, INC. 13-3682472 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations f X Solicitation of government grants X Phone solicitations X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) have custody or control of contributions? (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) CONNELLY MCLAUGHLIN & WOLOZ -Yes No 233 BROADWAY SUITE 2310, NEW FUNDRAISING Х 0 43,200 0. 43 200 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. \overline{NY}

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2022

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gr				ots greater than \$5,000.	
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			30TH		NONE	(add col. (a) through	
			ANNIVERSARY	, , , ,		col. (c))	
e			(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	318,355.			318,355.	
	2	Less: Contributions	172,910.			172,910.	
	3	Gross income (line 1 minus line 2)	145,445.			145,445.	
	4	Cash prizes					
S	5	Noncash prizes					
xpense	6	Rent/facility costs	98,752.			98,752.	
Direct Expenses	7	Food and beverages					
	8	Entertainment	33,456.			33,456.	
	9	Other direct expenses	13,237.			13,237.	
	10		n 9 in column (d)			145,445.	
		Net income summary. Subtract line 10 from li				0.	
Pa	ırt I		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than		
		\$15,000 on Form 990-EZ, line 6a.	Ι	a > Dull take (in atom)		I . n =	
en			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue				singe/progressive singe		ooi. (a) till oagit ooi. (o)	
Ä	1	Gross revenue					
S	2	Cash prizes					
ense							
χi	3	Noncash prizes					
Direct Expenses	4	Rent/facility costs					
	_	Other direct expenses					
	3	Other direct expenses	Yes %	Yes %	Yes %		
	6	Volunteer labor	No No	No No	No No		
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)				
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)				
			(9)				
9	Ent	ter the state(s) in which the organization condu	ucts gaming activities:				
а	ls t	the organization licensed to conduct gaming a	ctivities in each of these	states?		Yes No	
b	If "	No," explain:					
40-	141-	ore only of the organization's coming lies and	avolted over and ad and	ormain at a discriment the attent	vaar?	Yes No	
	Oa Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?						
	"	- SO, OAPIGIT.					

Schedule G (Form 990) 2022

232082 10-27-22

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable garning? 13 Indicate the percentage of gaming activity conducted in: a The organization's facility b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
to administer charitable gaming?	
13 Indicate the percentage of gaming activity conducted in: a The organization's facility b An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	No
a The organization's facility b An outside facility 13a 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
b An outside facility	07
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	<u>%</u>
Name Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	%
Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ C If "Yes," enter name and address of the third party: Address 16 Gaming manager information:	
b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ c If "Yes," enter name and address of the third party: Name Address Gaming manager information:	
of gaming revenue retained by the third party \$ c If "Yes," enter name and address of the third party: Name Address Gaming manager information:	No
c If "Yes," enter name and address of the third party: Name Address Gaming manager information:	
Name Address Address Gaming manager information:	
Address Gaming manager information:	
16 Gaming manager information:	
Name	
Gaming manager compensation \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	
organization's own exempt activities during the tax year \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10	0h
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	JD,
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:	
/T) NAME OF BUNDDATCED. CONNELLY MOLAUCULTN C MOLOG	
(I) NAME OF FUNDRAISER: CONNELLY MCLAUGHLIN & WOLOZ	
(I) ADDRESS OF FUNDRAISER: 233 BROADWAY SUITE 2310, NEW YORK, NY 10279	

Schedule G	(Form 990)	THE MIDORI	FOUNDATION, INC.	13-3682472 Page 4
Part IV	(Form 990) Supplemental Info	rmation (continued)		, in the second
		(**************************************		
_				

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

THE MIDORI FOUNDATION, INC.

 $Employer\ identification\ number\\13-3682472$

Pa	art I Questions Regarding Compensation						
			Yes	No			
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,						
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or charter travel Housing allowance or residence for personal use						
	Travel for companions Payments for business use of personal residence						
	Tax indemnification and gross-up payments Health or social club dues or initiation fees						
	Discretionary spending account Personal services (such as maid, chauffeur, chef)						
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or						
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	2					
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?						
2	Indicate which if any of the following the examination used to establish the compensation of the examination?						
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's						
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.						
	Compensation committee X Written employment contract						
	Independent compensation consultant Compensation survey or study						
	Form 990 of other organizations X Approval by the board or compensation committee						
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
	organization or a related organization:						
а	Receive a severance payment or change-of-control payment?	4a		Х			
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х			
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X			
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the revenues of:			37			
а	The organization?	5a		X			
b	Any related organization?	5b		Λ			
•	If "Yes" on line 5a or 5b, describe in Part III.						
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
_	contingent on the net earnings of:	C-		Х			
	The organization?	6a		X			
b	Any related organization? If "Yes" on line 6a or 6b, describe in Part III.	6b					
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments						
•	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х			
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the						
-	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III						
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			X			
	Regulations section 53.4958-6(c)?	9					

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

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title	(A) Name and Title		(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) LARISA GELMAN	(i)	178,970.	33,000.	0.	0.	1,030.	213,000.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)						Ī	l

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

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

2022

Open to Public Inspection

Name of the organization

THE MIDORI FOUNDATION, INC.

Employer identification number 13-3682472

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

THE MIDORI FOUNDATION PROVIDES HIGH QUALITY MUSIC EDUCATION AND

MUSIC LITERACY PROGRAMS TO NEW YORK CITY SCHOOLS AND COMMUNITY

CENTERS AT NO CHARGE TO THE INDIVIDUAL STUDENTS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

THEIR UNDERSTANDING OF A PARTICULAR MUSICAL TRADITION.

FORM 990, PART VI, SECTION A, LINE 2:

BOARD MEMBERS, ALAN FISCHER AND LARAINE FISCHER, HAVE A FAMILY

RELATIONSHIP.

FOUNDER AND BOARD MEMBER, MIDORI AND BOARD MEMBER, SETSU GOTO HAVE A FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 4:

AMENDED BY LAWS WERE RATIFIED DURING THE BOARD OF DIRECTORS MEETING ON MARCH 6, 2024.

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

THE DRAFT 990 IS PRESENTED TO THE AUDIT COMMITTEE FOR REVIEW. FOLLOWING THE REVIEW AND NECESSARY REVISIONS, THE AUDIT COMMITTEE PRESENTS THE DOCUMENTS TO THE EXECUTIVE COMMITTEE FOR REVIEW, AND THEN TO THE BOARD OF DIRECTORS FOR REVIEW BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

ENFORCEMENT OF CONFLICTS OF INTEREST POLICY FOR BOARD AND ADMINISTRATIVE

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

Schedule O (Form 990) 2022

232211 10-28-22

Schedule O (Form 990) 2022

Page 2 Name of the organization **Employer identification number** THE MIDORI FOUNDATION, INC. 13-3682472 STAFF: THE ORGANIZATION ENFORCES COMPLIANCE BY NOT KNOWINGLY ENTERING INTO ANY BUSINESS RELATIONSHIP WHICH WOULD CONSTITUTE A CONFLICT OF INTEREST. FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION PROCESS FOR TOP OFFICIAL AND OFFICERS: A VARIETY OF RESOURCES, INCLUDING NON-PROFIT TRADE ORGANIZATION REPORTS AND PUBLICATIONS, ARE USED TO ESTABLISH COMPARABLE RANGES OF SALARY/BENEFITS FOR ALL KEY EMPLOYEES. ALL OF THIS INFORMATION IS PERIODICALLY REVIEWED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS, AND IS TAKEN INTO CONSIDERATION ALONG WITH ADVICE FROM INDEPENDENT RECRUITING/PLACEMENT CONSULTANTS. FORM 990, PART VI, SECTION C, LINE 19: THE M&F GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE MIDORI FOUNDATION WEBSITE. FORM 990, PART IX, LINE 11G, OTHER FEES: ARTIST FEES: PROGRAM SERVICE EXPENSES 207,333. MANAGEMENT AND GENERAL EXPENSES 0. 300. FUNDRAISING EXPENSES TOTAL EXPENSES 207,633. OTHER PROFESSIONAL FEES: PROGRAM SERVICE EXPENSES 22,174. MANAGEMENT AND GENERAL EXPENSES 800. FUNDRAISING EXPENSES 6,774. 29,748. TOTAL EXPENSES 232212 10-28-22 Schedule O (Form 990) 2022 Schedule O (Form 990) 2022 Page 2 **Employer identification number** Name of the organization THE MIDORI FOUNDATION, INC. 13-3682472 PROGRAMMING: 33,053. PROGRAM SERVICE EXPENSES MANAGEMENT AND GENERAL EXPENSES FUNDRAISING EXPENSES 0. TOTAL EXPENSES 33,053. TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 270,434.