Form **990**

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.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2021 calendar year, or tax year beginning , 2021, and ending , 20

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization MARCH FIELD MUSEUM FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): POB 6463

Room/suite

City or town, state or province, country, and ZIP or foreign postal code: MARCH AIR RESERVE BASE, CA 92518

D Employer identification number: 95-3539447

E Telephone number: (951) 902-5949

G Gross receipts $ 1,175,918.

F Name and address of principal officer: JAMIL DADA, 22550 VAN BUREN, MARCH ARB, CA 92518

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions.

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◄ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ► http://www.marchfield.org/

H(c) Group exemption number ►

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ►

L Year of formation: 1979

M State of legal domicile: CA

Part I Summary

1	Briefly describe the organization's mission or most significant activities: SUPPORT THE MUSEUM FOR EDUCATIONAL, RESTORATIVE, AND HISTORICAL PURPOSES.		
2	Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	36
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	13
6	Total number of volunteers (estimate if necessary)	6	100
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	144,844.	257,532.
9	Program service revenue (Part VIII, line 2g)	253,325.	595,651.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	427.	257.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	108,537.	230,034.
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	507,133.	1,083,474.
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	332,927.	277,710.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ► 22,830.		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	435,977.	580,431.
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	768,904.	858,141.
19	Revenue less expenses. Subtract line 18 from line 12	-261,771.	225,333.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	1,607,717.	1,898,578.
21	Total liabilities (Part X, line 26)	273,353.	255,131.
22	Net assets or fund balances. Subtract line 21 from line 20	1,334,364.	1,643,447.

Part II Signature Block

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

Sign Here

Signature of officer — Date

JAMIL DADA, PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☒ if self-employed	PTIN
Mary Carlson E.A.	Mary Carlson E.A.			P00228037

Firm's name ► TUCKERS TAX SERVICE — Firm's EIN ► 33-0788872

Firm's address ► 24104 SUNNYMEAD BLVD SUITE A, MORENO VALLEY, CA 92553 — Phone no. (951) 924-5421

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

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

SUPPORT THE MUSEUM FOR EDUCATIONAL, RESTORATIVE, AND HISTORICAL PURPOSES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No

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

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

4a (Code:) (Expenses $ 790,404. including grants of $ 0.) (Revenue $ 595,651.)

THE MUSEUM EXISTS TO EDUCATE PRESENT AND FUTURE GENERATIONS BY COLLECTING, EXHIBITING, RESTORING, AND MAINTAINING ARTIFACTS AND HISTORICAL AIRCRAFT FOR PUBLIC VIEWING. MOST YEARS OVER 70,000 VISITORS ARE SERVED ANNUALLY INCLUDING SENIORS, VETERANS AND SCHOOL CHILDREN. THIS IS A BLUE STAR MUSEUM THAT HAS INCREASED THE AIRCRAFT UNDER CARE TO OVER 100. THE INVENTORY NOW INCLUDES A 149-FOOT NASA SOLID ROCKET BOOSTER. COLLECTIONS STORAGE HAS BEEN INCREASED BY OVER 110% ENSURING A SAFE HOME FOR THE OVER 20,000 ARTIFACTS CURRENTLY IN OUR CARE. WE HAVE COMPLETED THE RESTORATION OF A F-101 VOODOO AIR DEFENSE INTERCEPTOR ONCE FLOWN BY COLONEL JACK VETH, FAMED SR-71 BLACKBIRD PILOT. 2021 SAW THE OPENING OF A FULLY IMMERSIVE EXHIBIT TITLED "THE EXPLORATION OF SPACE". MANY OTHER ACCOMPLISHMENTS AND MORE TO COME.

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

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

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ 790,404.

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 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 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 similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	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
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	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
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	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		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV.*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV.*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	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

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *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? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

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

Part VI **Governance, Management, and Disclosure.** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☒

Section 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.	1a	36		
b	Enter the number of voting members included on line 1a, above, who are independent .	1b	36		
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			X
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			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
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	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 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:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
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			X

Section 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	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*.	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14		X
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?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☐ 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, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

MUSEUM OFFICE, 22550 VAN BUREN, MARCH ARB, CA 92518 (951)902-5949

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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMIL DADA PRESIDENT	5.00			X				0.	0.	0.
(2) MEL GUTIERREZ VICE PRESIDENT	2.00			X				0.	0.	0.
(3) RICHARD LEMIRE SECRETARY	5.00			X				0.	0.	0.
(4) RICK TEICHERT TREASURER	2.00			X				0.	0.	0.
(5) GREGORY KUSTER DIRECTOR	40.00					X		58,989.	0.	0.
(6) ROBERT FIELD DIRECTOR	1.00	X						0.	0.	0.
(7) GLEN NEWMAN DIRECTOR	1.00	X						0.	0.	0.
(8) JIM ROEVER DIRECTOR	1.00	X						0.	0.	0.
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b **Subtotal** ▶								58,989.	0.	0.
c **Total from continuation sheets to Part VII, Section A** ▶										
d **Total (add lines 1b and 1c)** ▶								58,989.	0.	0.

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

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

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b	16,326.			
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	241,206.			
	g	Noncash contributions included in lines 1a–1f	1g	$			
	h	**Total.** Add lines 1a–1f ▶		257,532.			
Program Service Revenue			Business Code				
	2a	MUSEUM ADMISSIONS	712110	426,098.	426,098.	0.	0.
	b	MUSEUM TOURS/TRAM	712110	22,108.	22,108.	0.	0.
	c	OTHER MUSEUM ACTIVITIES	712110	40,205.	40,205.	0.	0.
	d	EVENT CONTRACTS	712110	107,240.	107,240.	0.	0.
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f ▶		595,651.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		257.	257.	0.	0.
	4	Income from investment of tax-exempt bond proceeds ▶					
	5	Royalties ▶					
			(i) Real / (ii) Personal				
	6a	Gross rents 6a: 71,750.					
	b	Less: rental expenses 6b:					
	c	Rental income or (loss) 6c: 71,750.					
	d	Net rental income or (loss) ▶		71,750.	71,750.	0.	0.
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory 7a:					
	b	Less: cost or other basis and sales expenses 7b:					
	c	Gain or (loss) 7c:					
	d	Net gain or (loss) ▶					
	8a	Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 8a:					
	b	Less: direct expenses 8b:					
	c	Net income or (loss) from fundraising events ▶					
	9a	Gross income from gaming activities. See Part IV, line 19 9a:					
	b	Less: direct expenses 9b:					
	c	Net income or (loss) from gaming activities ▶					
	10a	Gross sales of inventory, less returns and allowances 10a: 248,077.					
	b	Less: cost of goods sold 10b: 92,444.					
	c	Net income or (loss) from sales of inventory ▶		155,633.	155,633.	0.	0.
Miscellaneous Revenue			Business Code				
	11a						
	b						
	c						
	d	All other revenue		2,651.	2,386.	0.	265.
	e	**Total.** Add lines 11a–11d ▶		2,651.			
	12	**Total revenue.** See instructions ▶		1,083,474.	825,677.	0.	265.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
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	58,989.	37,989.	15,000.	6,000.
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	150,933.	143,958.	2,325.	4,650.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	40,483.	39,268.	810.	405.
10 Payroll taxes	27,305.	23,645.	2,185.	1,475.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	7,798.	5,398.	1,600.	800.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	3,459.	3,459.	0.	0.
13 Office expenses	55,271.	38,771.	11,000.	5,500.
14 Information technology	38,483.	26,783.	7,700.	4,000.
15 Royalties				
16 Occupancy	172,100.	172,100.	0.	0.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	121.	0.	121.	0.
20 Interest	3,046.	347.	2,699.	0.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	78,626.	78,626.	0.	0.
23 Insurance	15,470.	14,278.	1,192.	0.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a VOLUNTEER SUPPORT	3,877.	3,877.	0.	0.
b SPECIAL EVENTS/EDUCATION COSTS	22,057.	22,057.	0.	0.
c COLLECTIONS & EXHIBIT COSTS	180,123.	179,848.	275.	0.
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	858,141.	790,404.	44,907.	22,830.
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)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	2,835.	1	2,319.
	2	Savings and temporary cash investments	322,735.	2	632,966.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	56,198.	8	63,324.
	9	Prepaid expenses and deferred charges	2,834.	9	3,783.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 2,714,799.			
	b	Less: accumulated depreciation — 10b: 1,518,613.	1,223,115.	10c	1,196,186.
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	1,607,717.	16	1,898,578.
Liabilities	17	Accounts payable and accrued expenses	9,000.	17	4,724.
	18	Grants payable		18	
	19	Deferred revenue	4,300.	19	4,375.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	13,284.	24	13,284.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	246,769.	25	232,748.
	26	**Total liabilities.** Add lines 17 through 25	273,353.	26	255,131.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☒ and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	1,246,001.	27	1,505,084.
	28	Net assets with donor restrictions	88,363.	28	138,363.
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	1,334,364.	32	1,643,447.
	33	Total liabilities and net assets/fund balances	1,607,717.	33	1,898,578.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,083,474.
2	Total expenses (must equal Part IX, column (A), line 25)	2	858,141.
3	Revenue less expenses. Subtract line 2 from line 1	3	225,333.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,334,364.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,559,697.

Part XII Financial Statements and Reporting

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

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

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 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.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization	Employer identification number
MARCH FIELD MUSEUM FOUNDATION	95-3539447

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 ☒ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . .

g Provide the following information about the supported organization(s).

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

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4						
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.)						
11 **Total support.** Add lines 7 through 10						

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

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) . . . . 14 %

15 Public support percentage from 2020 Schedule A, Part II, line 14 . . . . . 15 %

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

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

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

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	134,455.	223,180.	192,606.	143,102.	252,134.	945,477.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	541,410.	477,979.	757,923.	403,484.	923,527.	3,104,323.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	675,865.	701,159.	950,529.	546,586.	1,175,661.	4,049,800.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						4,049,800.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6	675,865.	701,159.	950,529.	546,586.	1,175,661.	4,049,800.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	441.	199.	559.	427.	257.	1,883.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	441.	199.	559.	427.	257.	1,883.
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	0.	0.	0.	0.	0.	0.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	676,306.	701,358.	951,088.	547,013.	1,175,918.	4,051,683.

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	99.95 %
16	Public support percentage from 2020 Schedule A, Part III, line 15	16	98.6 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2021** (line 10c, column (f), divided by line 13, column (f))	17	0.05 %
18	Investment income percentage from **2020** Schedule A, Part III, line 17	18	0.07 %

19a **33 1/3% support tests—2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

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

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supporting Organizations**

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *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.*	1		
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).*	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.*	3a		
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.*	3b		
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.*	3c		
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.*	4a		
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.*	4b		
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.*	4c		
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).*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
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.***	6		
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).*	7		
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).*	8		
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.***	9a		
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.***	9b		
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.***	9c		
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.*	10a		
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.)*	10b		

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (***see instructions***).*

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a governmental entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer lines 2a and 2b below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. ***Answer lines 3a and 3b below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in* ***Part VI.***	3a		
b	Did the organization 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		

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

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

Section A—Adjusted Net Income			(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	8		

Section B—Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors *(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, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

Section C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

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

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

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

Schedule B (Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990 or Form 990-PF.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2021

Name of the organization
MARCH FIELD MUSEUM FOUNDATION

Employer identification number
95-3539447

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33⅓% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization: MARCH FIELD MUSEUM FOUNDATION

Employer identification number: 95-3539447

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LEWIS MANAGEMENT CORPORATION 1156 N MOUNTAIN AVE UPLAND CA 91786	$ 25,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
2	JACQUIE PIANALTO CANYON CREST DR RIVERSIDE CA 92507	$ 50,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
3	FRED SIEGEL FOUNDATION 2857 PARADISE RD UNIT 3503 LAS VEGAS NV 89109	$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
4	WALTER FUS 26266 KALMIA AVE MORENO VALLEY CA 925551723	$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
5	MARIETTE BLOMMAERT LIVING TRUST 13574 PLANTATION WAY MORENO VALLEY CA 92555	$ 10,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
6	MERIDIAN PARK LLC 1156 MOUNTAIN AVE UPLAND CA 91786	$ 25,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization: MARCH FIELD MUSEUM FOUNDATION

Employer identification number: 95-3539447

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	PHYLLIS PARKELL 5550 GLOUCESTER WAY RIVERSIDE CA 92506	$ 20,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization: MARCH FIELD MUSEUM FOUNDATION

Employer identification number: 95-3539447

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

Name of organization: MARCH FIELD MUSEUM FOUNDATION

Employer identification number: 95-3539447

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e)** and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization: MARCH FIELD MUSEUM FOUNDATION

Employer identification number: 95-3539447

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.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above 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 easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____
b Assets included in Form 990, Part X ▶ $ _____

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

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

a ☒ Public exhibition
b ☐ Scholarly research
c ☒ Preservation for future generations
d ☐ Loan or exchange program
e ☐ Other _____

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII . . . ☐

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	22,163.	22,163.	22,163.	22,163.	22,163.
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	22,163.	22,163.	22,163.	22,163.	22,163.

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

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

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

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

		Yes	No
(i) Unrelated organizations	3a(i)	×	
(ii) Related organizations	3a(ii)		×
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0.			0.
b Buildings		1,314,003.	419,827.	894,176.
c Leasehold improvements		1,070,248.	804,185.	266,063.
d Equipment		330,548.	294,601.	35,947.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				1,196,186.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 13.)* ▶		

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PAYROLL TAXES PAYABLE	6,612.
(3) SALES TAX PAYABLE	7,502.
(4) VACATION PAYABLE	6,672.
(5) PAYCHECK PROTECTION LOAN #1	0.
(6) EIDL	148,212.
(7) PAYCHECK PROTECTION LOAN #2	63,750.
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	232,748.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

Part XIII Supplemental Information.

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

Pt III, Line 4: THE ORGANIZATION IS AN AIR MUSEUM THAT HOUSES HISTORICAL AND MILITARY AIRCRAFT, MEMORABILIA, AND ARTIFACTS. THE PURPOSE OF THE ORGANIZATION IS EDUCATIONAL AND HISTORICAL - THE MUSEUM HAS COLLECTIONS AVAILABLE FOR SCHOOL AND OTHER GROUPS, AS WELL AS THE GENERAL PUBLIC TO VIEW FOR THESE PURPOSES.

Pt V, Line 4: AT THIS TIME, THE BOARD IS KEEPING THE ENDOWMENT FUNDS IN RESERVE.

Part XIII Supplemental Information *(continued)*

SCHEDULE O (Form 990)	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	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.	2021 Open to Public Inspection

Name of the organization	Employer identification number
MARCH FIELD MUSEUM FOUNDATION	95-3539447

Pt VI, Line 11b: THE RETURN IS REVIEWED BY THE FINANCE COMMITTEE AND IS MADE AVAILABLE TO THE EXECUTIVE COMMITTEE.

Pt VI, Line 12c: THE BOARD REGULARLY QUESTIONS POTENTIAL CONFLICTS WHEN DECISIONS ARE MADE.

Pt VI, Line 15a: THE PERSONNEL AND THE EXECUTIVE COMMITTEES REVIEW, APPROVE, DETERMINE, AND SUBSTANTIATE THE COMPENSATION OF THE EXECUTIVE DIRECTOR.

Pt VI, Line 15b: THE PERSONNEL AND THE EXECUTIVE COMMITTEES REVIEW, APPROVE, DETERMINE, AND SUBSTANTIATE THE COMPENSATION OF ANY OTHER KEY EMPLOYEES, IF ANY.

Special Depreciation Allowance Elections under IRC Section 168(k)(5) and IRC Section 168(k)(7),

►Attach to your income tax return

Name(s) Shown on Return	Identification Number
MARCH FIELD MUSEUM FOUNDATION	95-3539447

Tax Year: December 31, 2021

Special Depreciation Allowance Election under IRC Section 168(k)(5)

Taxpayer hereby elects the application of IRS Section 168(k)(5)to the following specified plant(s) for tax year ending:

Description of Property	Special Depr. Allowance

Election Out of Qualified Economic Stimulus Property

Attach to your return

Taxpayer hereby elects under IRC Section 168(k)(7) out of having Qualified Economic Stimulus property for the following asset classes placed in service during the tax year ending: December 31, 2021

7 Year Property

Additional information from your 2021 Federal Exempt Tax Return

Schedule D: Supplemental Financial Statements

Buildings col (b) **Itemization Statement**

Description	Amount
RESTORATION HANGAR	226,542.
HANGAR 2	1,057,777.
MEZZANIN - RESTOR. HANGAR	21,684.
MODULAR BUILDING	8,000.
Total	**1,314,003.**

Form **8868**

(Rev. January 2022)

Department of the Treasury
Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**
▶ **Go to *www.irs.gov/Form8868* for the latest information.**

OMB No. 1545-0047

Electronic filing (*e-file*). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions.	Taxpayer identification number (TIN)
File by the due date for filing your return. See instructions.	MARCH FIELD MUSEUM FOUNDATION	95-3539447
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	POB 6463	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	MARCH AIR RESERVE BASE CA 92518	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

• The books are in the care of ▶ MUSEUM OFFICE

Telephone No. ▶ (951)902-5949 Fax No. ▶

• If the organization does not have an office or place of business in the United States, check this box . . . . . ▶ ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . . . ▶ ☐. If it is for part of the group, check this box . . . . ▶ ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until Nov 15, 20 22, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ ☒ calendar year 20 21 or
▶ ☐ tax year beginning _____, 20 _____, and ending _____, 20 _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	$ 0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	$ 0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

051

Date Accepted _____

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR **2021**

California e-file Return Authorization for Exempt Organizations

FORM **8453-EO**

Exempt Organization name	Identifying number
MARCH FIELD MUSEUM FOUNDATION	95-3539447

Part I Electronic Return Information (whole dollars only)

1 Total gross receipts (Form 199, line 4)	1	1,173,267.
2 Total gross income (Form 199, line 8)	2	1,080,823.
3 Total expenses and disbursements (Form 199, line 9)	3	858,415.

Part II Settle Your Account Electronically for Taxable Year 2021

4 ☐ Electronic funds withdrawal **4a** Amount _____ **4b** Withdrawal date (mm/dd/yyyy) _____

Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number _____

6 Account number _____ **7** Type of account: ☐ Checking ☐ Savings

Part IV Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2021 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.**

Sign Here

▶ _____ Signature of officer | _____ Date | ▶ PRESIDENT Title

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2021 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign

ERO's signature ▶ | Date | Check if also paid preparer ☐ | Check if self-employed ☒ | ERO's PTIN P00228037

Firm's name (or yours if self-employed) and address ▶ TUCKERS TAX SERVICE | Firm's FEIN 33-0788872

24104 SUNNYMEAD BLVD SUITE A, MORENO VALLEY, CA | ZIP code 92553

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign

Paid preparer's signature ▶ | Date 11/23/2022 | Check if self-employed ☒ | Paid preparer's PTIN P00228037

Firm's name (or yours if self-employed) and address ▶ MARY CARLSON E.A. | Firm's FEIN 33-0788872

24104 SUNNYMEAD BLVD SUITE A MORENO VALLEY, CA | ZIP code 92553

TAXABLE YEAR

2021 California Exempt Organization Annual Information Return

FORM 199

Calendar Year 2021 or fiscal year beginning (mm/dd/yyyy) _____, and ending (mm/dd/yyyy) _____

Corporation/Organization name: MARCH FIELD MUSEUM FOUNDATION

California corporation number: 0989293

Additional information. See instructions.

FEIN: 95-3539447

Street address (suite or room): POB 6463

PMB no.:

City: MARCH AIR RESERVE BASE

State: CA

Zip code: 92518

Foreign country name | Foreign province/state/county | Foreign postal code

A First return . . . ☐ Yes ☒ No

B Amended return . . . ● ☐ Yes ☒ No

C IRC Section 4947(a)(1) trust . . . ☐ Yes ☒ No

D Final information return?
● ☐ Dissolved ☐ Surrendered (Withdrawn) ☐ Merged/Reorganized
Enter date: (mm/dd/yyyy) ● ____ / ____ / _____

E Check accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other

F Federal return filed? (1) ● ☐ 990T (2) ● ☐ 990PF (3) ● ☐ Sch H (990)
(4) ☒ Other 990 series

G Is this a group filing? See instructions . . . ● ☐ Yes ☒ No

H Is this organization in a group exemption . . . ☐ Yes ☒ No
If "Yes," what is the parent's name?

I Did the organization have any changes to its guidelines not reported to the FTB? See instructions . . . ● ☐ Yes ☒ No

J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions . . . ● ☐ Yes ☐ No

K Is the organization exempt under R&TC Section 23701g? . . ● ☐ Yes ☒ No
If "Yes," enter the gross receipts from nonmember sources . . $ _____

L Is the organization a limited liability company? . . . ● ☐ Yes ☒ No

M Did the organization file Form 100 or Form 109 to report taxable income? . . . ● ☐ Yes ☒ No

N Is the organization under audit by the IRS or has the IRS audited in a prior year? . . . ● ☐ Yes ☒ No

O Is federal Form 1023/1024 pending? . . . ☐ Yes ☒ No
Date filed with IRS _____

Part I **Complete Part I unless not required to file this form. See General Information B and C.**

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8		1	915,735 00
	2	Gross dues and assessments from members and affiliates		2	00
	3	Gross contributions, gifts, grants, and similar amounts received		3	257,532 00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. **This line must be completed.** If the result is less than $50,000, see General Information B		4	1,173,267 00
	5	Cost of goods sold	5: 92,444 00		
	6	Cost or other basis, and sales expenses of assets sold	6: 00		
	7	Total costs. Add line 5 and line 6.		7	92,444 00
	8	Total gross income. Subtract line 7 from line 4.		8	1,080,823 00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18		9	858,415 00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8		10	222,408 00
Filing Fee	11	Total payments		11	00
	12	Use tax. See General Information K		12	0 00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11		13	00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12		14	00
	15	Penalties and interest. See General Information J		15	00
	16	**Balance due.** Add line 12 and line 15. Then subtract line 11 from the result		16	0 00

Sign Here

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

Signature of officer ▶ | Title: PRESIDENT | Date | ● Telephone: (951) 902-5949

Paid Preparer's Use Only

Preparer's signature ▶ MARY CARLSON E.A. | Date | Check if self-employed ▶ ☒ | ● PTIN: P00228037

Firm's name (or yours, if self-employed) and address ▶ TUCKERS TAX SERVICE
24104 SUNNYMEAD BLVD SUITE A
MORENO VALLEY CA 92553

● Firm's FEIN: 33-0788872

● Telephone: (951) 924-5421

May the FTB discuss this return with the preparer shown above? See instructions . . . ● ☒ Yes ☐ No

Part II **Organizations with gross receipts of more than $50,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish substitute information.**

Receipts from Other Sources	1 Gross sales or receipts from all business activities. See instructions	1	248,077	00
	2 Interest	2		00
	3 Dividends	3		00
	4 Gross rents	4	71,750	00
	5 Gross royalties	5		00
	6 Gross amount received from sale of assets (See instructions)	6		00
	7 Other income. Attach schedule See Stmt	7	595,908	00
	8 **Total** gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	8	915,735	00
Expenses and Disbursements	9 Contributions, gifts, grants, and similar amounts paid. Attach schedule	9		00
	10 Disbursements to or for members	10		00
	11 Compensation of officers, directors, and trustees. Attach schedule See Stmt	11	58,989	00
	12 Other salaries and wages	12	150,933	00
	13 Interest	13	3,046	00
	14 Taxes	14	27,305	00
	15 Rents	15	172,100	00
	16 Depreciation and depletion (See instructions)	16	78,900	00
	17 Other expenses and disbursements. Attach schedule See Stmt	17	367,142	00
	18 **Total** expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	858,415	00

Schedule L Balance Sheet

Assets	Beginning of taxable year (a)	(b)	End of taxable year (c)	(d)
1 Cash		325,570		635,285
2 Net accounts receivable				
3 Net notes receivable				
4 Inventories		56,198		63,324
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments. Attach schedule				
10 a Depreciable assets	2,663,102		2,714,799	
b Less accumulated depreciation	1,439,987	1,223,115	1,518,613	1,196,186
11 Land		0		0
12 Other assets. Attach schedule SEE STMT		2,834		3,783
13 **Total assets**		1,607,717		1,898,578
Liabilities and net worth				
14 Accounts payable		9,000		4,724
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities. Attach schedule SEE STMT		264,353		250,407
19 Capital stock or principal fund SEE STMT				
20 Paid-in or capital surplus. Attach reconciliation		1,334,364		1,643,447
21 Retained earnings or income fund				
22 **Total liabilities and net worth**		1,607,717		1,898,578

Schedule M-1 **Reconciliation of income per books with income per return**
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than $50,000.

1 Net income per books	225,333	7 Income recorded on books this year not included in this return. Attach schedule	
2 Federal income tax		8 Deductions in this return not charged against book income this year. Attach schedule	
3 Excess of capital losses over capital gains			
4 Income not recorded on books this year. Attach schedule			
5 Expenses recorded on books this year not deducted in this return. Attach schedule		9 Total. Add line 7 and line 8	
6 Total. Add line 1 through line 5	225,333	10 Net income per return. Subtract line 9 from line 6	225,333

Form 199
Schedule L

Other Assets

2021

Name as Shown on Return
MARCH FIELD MUSEUM FOUNDATION

California Corporation No.
0989293

Other Investments:	Beginning of Tax Year	End of Tax Year
Totals to Form 199, Schedule L, line 9 ►		

Other Assets:	Beginning of Tax Year	End of Tax Year
PREPAID EXPENSES AND DEFERRED CHARGES	2,834.	3,783.
Totals to Form 199, Schedule L, line 12 ►	2,834.	3,783.

Form 199
Schedule L

Other Liabilities and Equity

2021

Name as Shown on Return
MARCH FIELD MUSEUM FOUNDATION

California Corporation No.
0989293

Other Liabilities:	Beginning of Tax Year	End of Tax Year
DEFERRED REVENUE	4,300.	4,375.
UNSECURED NOTES AND LOANS PAYABLE TO UNRELATED THIRD PARTIES	13,284.	13,284.
PAYROLL TAXES PAYABLE	2,620.	6,612.
SALES TAX PAYABLE	3,727.	7,502.
VACATION PAYABLE	6,672.	6,672.
PAYCHECK PROTECTION LOAN #1	83,750.	0.
EIDL	150,000.	148,212.
PAYCHECK PROTECTION LOAN #2	0.	63,750.
Totals to Form 199, Schedule L, line 18 ►	264,353.	250,407.

Paid-in or Capital Surplus:	Beginning of tax year	End of tax year
UNRESTRICTED NET ASSETS	1,246,001.	1,505,084.
RESTRICTED NET ASSETS	88,363.	138,363.
Totals to Form 199, Schedule L, line 20 ►	1,334,364.	1,643,447.

Form 4562 — Depreciation and Amortization Report — 2021

Tax Year 2021

► Keep for your records

Name as Shown on Return: MARCH FIELD MUSEUM FOUNDATION

Identifying Number: 95-3539447

QuickZoom here to enter assets . . . . . ►

QuickZoom here to set MACRS convention for assets acquired in 2021 . . . . . ►

Activity: Form 990 - / Form 990EZ

Asset Description	Code *	Date In Service	Cost (Net of Land)	Land	Bus Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
DEPRECIATION												
MODULAR BLDG		02/16/21	8,000		100.00			8,000	39.00	SL/MM		179
2021 MOTO ELECTRIC TRAM		06/10/21	26,932		100.00			26,932	7.00	200DB/HY		3,847
TRAM A/C UNIT/BATTERIES		06/15/21	10,770		100.00			10,770	7.00	200DB/HY		1,539
TRAM VINYL WRAP DESIGN & INSTALL		06/15/21	5,995		100.00			5,995	7.00	200DB/HY		856
SUBTOTAL CURRENT YEAR			51,697	0		0	0	51,697			0	6,421
EQ SAW		01/01/85	435		100.00			435	5.00	PRE/NA	435	0
EQ WISHING WELL		01/01/86	671		100.00			671	5.00	PRE/NA	671	0
EQ SAW		01/01/86	463		100.00			463	5.00	PRE/NA	463	0
EQ TWO SECTION LECTERN		03/06/95	765		100.00			765	7.00	200DB/HY	765	0
EQ BAND SAW DONATED		01/16/97	500		100.00			500	7.00	200DB/HY	500	0
LH IMPROVEMENT		01/20/97	1,807		100.00			1,807	7.00	200DB/HY	1,807	0
LH GAS LINE		02/14/97	650		100.00			650	7.00	200DB/HY	650	0
LH MASONRY WORK		02/14/97	16,441		100.00			16,441	7.00	200DB/HY	16,441	0
LH BLOCK WALL DONATED		02/20/97	1,800		100.00			1,800	7.00	200DB/HY	1,800	0
EQ REFRIGERATOR		02/20/97	2,020		100.00			2,020	7.00	200DB/HY	2,020	0
LH DRAIN DONATED		03/20/97	900		100.00			900	7.00	200DB/HY	900	0
LH COURTYARD IMMPRV		04/07/97	20,800		100.00			20,800	7.00	200DB/HY	20,800	0
LH FIXTURES		08/21/97	1,995		100.00			1,995	7.00	200DB/HY	1,995	0
EQ - HIGH LIFT		01/15/98	7,004		100.00			7,004	7.00	200DB/HY	7,004	0
EQ - AIR COMPRESSOR		01/27/98	548		100.00			548	7.00	200DB/HY	548	0
LH SIDEWALK/CYARD PROJECT		02/06/98	16,338		100.00			16,338	7.00	200DB/HY	16,338	0
LH VISITORS DESK		02/25/98	5,413		100.00			5,413	7.00	200DB/HY	5,413	0
COURTYARD DRAIN		03/11/98	90		100.00			90	7.00	200DB/HY	90	0
LH SIGN		05/07/98	259		100.00			259	7.00	200DB/HY	259	0
LH BALLPARK LIGHTING		05/11/98	7,094		100.00			7,094	7.00	200DB/HY	7,094	0
LH DOOLITTLE BUST		05/26/98	2,300		100.00			2,300	7.00	200DB/HY	2,300	0
LH PIPELINE PROJECT		05/31/98	1,595		100.00			1,595	7.00	200DB/HY	1,595	0
LH WALL AT ENTRANCE		06/08/98	3,276		100.00			3,276	7.00	200DB/HY	3,276	0
EQ - BIG SCREEN TV		06/10/98	2,153		100.00			2,153	7.00	200DB/HY	2,153	0
LH PHONE CONDUIT		06/23/98	986		100.00			986	7.00	200DB/HY	986	0
LH PHONE LINE UPGRADE		06/30/98	286		100.00			286	7.00	200DB/HY	286	0
LH GIFT SHOP REMODEL		06/30/98	8,006		100.00			8,006	7.00	200DB/HY	8,006	0
LH WALL CONSTRUCTION		06/30/98	14,007		100.00			14,007	7.00	200DB/HY	14,007	0
EQ - WELDER		07/16/98	328		100.00			328	7.00	200DB/HY	328	0
LH PAVEMENT PROJECT		07/24/98	5,000		100.00			5,000	7.00	200DB/HY	5,000	0

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Activity: Form 990 - / Form 990EZ

Asset Description	Code *	Date In Service	Cost (Net of Land)	Land	Bus Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
LH GIFT SHOP DOOR		07/31/98	90		100.00			90	7.00	200DB/HY	90	0
LH PHONE LINES REPLCMT		08/06/98	2,832		100.00			2,832	7.00	200DB/HY	2,832	0
LH FLIGHTLINE FENCE		09/16/98	1,920		100.00			1,920	7.00	200DB/HY	1,920	0
EQ - BIG TV PROJECTIVE SCREEN		09/21/98	199		100.00			199	7.00	200DB/HY	199	0
LH REMODEL MASTER PLANS		10/15/98	3,703		100.00			3,703	7.00	200DB/HY	3,703	0
LH ROCK PROJECT		12/17/98	65		100.00			65	7.00	200DB/HY	65	0
EQ - DRILL PRESS DONATED		12/31/98	200		100.00			200	7.00	200DB/HY	200	0
EQ - FORD 545 TRACTOR DONATED		12/31/98	13,500		100.00			13,500	7.00	200DB/HY	13,500	0
LH ROCK MOUNT		01/07/99	86		100.00			86	7.00	200DB/HY	86	0
LH DOOLITTLE PLAQUE		03/18/99	1,500		100.00			1,500	7.00	200DB/HY	1,500	0
LH HANGAR DOOR REPAIRS		03/29/99	2,571		100.00			2,571	7.00	200DB/HY	2,571	0
LH MISSILE PLAQUE MONUMENT		04/08/99	20,006		100.00			20,006	7.00	200DB/HY	20,006	0
EQ GRINDER		05/24/99	65		100.00			65	7.00	200DB/HY	65	0
LH CEILING FAN/POWER LINE		06/11/99	302		100.00			302	7.00	200DB/HY	302	0
LH 15TH WALL SLEVE ANCHOR		06/28/99	136		100.00			136	7.00	200DB/HY	136	0
LH BATHROOMS REMODEL		07/23/99	17,296		100.00			17,296	7.00	200DB/HY	17,296	0
LH BASE MOUNT		07/27/99	438		100.00			438	7.00	200DB/HY	438	0
LH IRON GATE		08/13/99	850		100.00			850	7.00	200DB/HY	850	0
LH PALM TREES		09/16/99	4,008		100.00			4,008	7.00	200DB/HY	4,008	0
LH C-141 FENCE		11/02/99	5,913		100.00			5,913	7.00	200DB/HY	5,913	0
EQ AIR COMPRESSOR		11/15/99	1,961		100.00			1,961	7.00	200DB/HY	1,961	0
LH 8" WATER MAIN		12/03/99	2,000		100.00			2,000	7.00	200DB/HY	2,000	0
LH FENCE		12/28/99	143		100.00			143	7.00	200DB/HY	143	0
LHWD WAR DOG MEMORIAL		02/11/00	2,143		100.00			2,143	10.00	SL/HY	2,143	0
LHHW HERITAGE WALL		04/04/00	7,656		100.00			7,656	7.00	200DB/HY	7,656	0
EQ BAND SAW		05/17/00	4,980		100.00			4,980	7.00	200DB/HY	4,980	0
EQ HOT DOG COOKER		06/01/00	448		100.00			448	7.00	200DB/HY	448	0
EQ GOLF CART		06/01/00	1,500		100.00			1,500	7.00	200DB/HY	1,500	0
LHRH RESTORATION HANGAR		07/06/00	226,542		100.00			226,542	40.00	ALT/MM	121,789	5,360
EQ AIR COMPRESSOR		07/21/00	3,432		100.00			3,432	7.00	200DB/HY	3,432	0
LHAS AIRCRAFT SIGNS		08/25/00	6,818		100.00			6,818	7.00	200DB/HY	6,818	0
EQ GUN CLEANER		09/12/00	700		100.00			700	7.00	200DB/HY	700	0
LH WORLEY BENCHES		11/07/00	1,076		100.00			1,076	7.00	200DB/HY	1,076	0
LH SLAT WALL - GIFT SHOP		12/19/00	736		100.00			736	7.00	200DB/HY	736	0
EQ TABLES		12/31/00	3,815		100.00			3,815	7.00	200DB/HY	3,815	0
EQ TABLE SET DONATED		01/05/01	1,000		100.00			1,000	7.00	200DB/HY	1,000	0
LH ELECTRIC POWER		01/30/01	950		100.00			950	7.00	200DB/HY	950	0

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EQ DISPLAY RACKS		03/20/01	1,319		100.00			1,319	7.00	200DB/HY	1,319	0
EQ COLLECTIONS C		05/30/01	1,689		100.00			1,689	7.00	200DB/HY	1,689	0
LH WATER FOUNTAIN		06/19/01	2,151		100.00			2,151	7.00	200DB/HY	2,151	0
LH POLE FOR SOUND SYSTEM		06/30/01	1,200		100.00			1,200	7.00	200DB/HY	1,200	0
LHRH MEZZANIN - RESTOR. HANGAR		06/30/01	21,684		100.00			21,684	40.00	ALT/MM	11,056	519
LH EXTERIOR LIGHT FOR PKG		08/22/01	7,350		100.00			7,350	7.00	200DB/HY	7,350	0
EQ LOCKHHED TR 2		09/07/01	667		100.00			667	7.00	200DB/HY	667	0
EQ 2 USED VERT BAND SAWS		09/10/01	2,580		100.00			2,580	7.00	200DB/HY	2,580	0
LHFE IMPROVEMENTS		10/18/01	9,325		100.00			9,325	7.00	200DB/HY	9,325	0
LH PATIO HEATERS (3)		01/01/02	1,050		100.00			1,050	7.00	200DB/HY	1,050	0
EQ TILDEN COIL TOOL TRAILER		01/01/02	1,500		100.00			1,500	7.00	200DB/HY	1,500	0
EQ MILL PANCHO ENT		01/01/02	600		100.00			600	7.00	200DB/HY	600	0
EQ SOUND SYSTEM COURTYARD		01/01/02	5,000		100.00			5,000	7.00	200DB/HY	5,000	0
CP TOWERS 3		01/29/02	1,201		100.00			1,201	5.00	200DB/HY	1,201	0
LH AUTOMATIC DOORS & 6 EXITS		01/31/02	24,440		100.00			24,440	15.00	SL/HY	24,440	0
EQ LATHE REGAL		03/01/02	1,300		100.00			1,300	7.00	200DB/HY	1,300	0
EQ TREE TOOL & DIE MACHINE		03/01/02	1,200		100.00			1,200	7.00	200DB/HY	1,200	0
LH PALM TREES		03/12/02	1,590		100.00			1,590	7.00	SL/HY	1,590	0
LHFE IMPROVEMENTS		04/15/02	3,774		100.00			3,774	7.00	SL/HY	3,774	0
EQ SMALL BREAK DEXTO		04/17/02	150		100.00			150	7.00	SL/HY	150	0
EQ LIGHT ALL CART		04/17/02	1,000		100.00			1,000	7.00	SL/HY	1,000	0
EQ DRILL PRESS		04/17/02	100		100.00			100	7.00	SL/HY	100	0
EQ AIR COMP MC2A		04/17/02	200		100.00			200	7.00	SL/HY	200	0
EQ AIR COMP IR		04/17/02	200		100.00			200	7.00	SL/HY	200	0
EQ FLOOR CRANE		04/17/02	300		100.00			300	7.00	SL/HY	300	0
EQ FORKLIFT 10K		04/17/02	5,000		100.00			5,000	7.00	SL/HY	5,000	0
EQ AIR COMP		04/17/02	300		100.00			300	7.00	SL/HY	300	0
EQ DISC SANDER DELTA		04/17/02	100		100.00			100	7.00	SL/HY	100	0
EQ HORIZ BAND SAW		04/17/02	500		100.00			500	7.00	SL/HY	500	0
EQ PRESSURE WASHER/TRAILER		04/17/02	3,500		100.00			3,500	7.00	SL/HY	3,500	0
EQ LARGE BREAK		04/17/02	300		100.00			300	7.00	SL/HY	300	0
EQ GENERATOR DIESEL		04/17/02	2,000		100.00			2,000	7.00	SL/HY	2,000	0
EQ HUCK RIVITER		04/17/02	500		100.00			500	7.00	SL/HY	500	0
EQ TOWER 7		05/07/02	906		100.00			906	7.00	SL/HY	906	0
LH RESTROOM DOORS		05/07/02	1,285		100.00			1,285	7.00	SL/HY	1,285	0
EQ CHAIRS & RACKS		05/21/02	3,490		100.00			3,490	7.00	SL/HY	3,490	0
EQ SLIP ROLL		06/18/02	853		100.00			853	7.00	SL/HY	853	0

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LH TENT		07/19/02	1,340		100.00			1,340	7.00	SL/HY	1,340	0
LH GRANTIE PLAQUE RESTORATION		07/30/02	1,185		100.00			1,185	7.00	SL/HY	1,185	0
EQ TRAM		07/31/02	11,292		100.00			11,292	7.00	SL/HY	11,292	0
EQ EZ UP 3 W/SIDEWALLS		08/15/02	668		100.00			668	7.00	SL/HY	668	0
LH IMPROVEMENTS		10/08/02	1,669		100.00			1,669	7.00	SL/HY	1,669	0
LH UPS COD-PHONE SYSTEM		10/21/02	7,598		100.00			7,598	7.00	SL/HY	7,598	0
EQ HI LIFT ENGINE		03/18/03	2,500		100.00			2,500	7.00	SL/HY	2,500	0
EQ TRAILER FOR TRAM		07/08/03	1,700		100.00			1,700	7.00	SL/HY	1,700	0
SW WINDOWS & OFFICE XP		08/12/03	2,101		100.00			2,101	5.00	SL/HY	2,101	0
LHAS AIRCRAFT SIGNS		09/16/03	3,265		100.00			3,265	7.00	SL/HY	3,265	0
EQ FRANKLIN DISPLAY		09/30/03	1,625		100.00			1,625	7.00	SL/HY	1,625	0
EQ POSTER DISPLAY		11/10/03	794		100.00			794	7.00	SL/HY	794	0
EQ PORTABLE BARS		12/02/03	1,297		100.00			1,297	7.00	SL/HY	1,297	0
LHAS AIRCRAFT SIGNS		03/19/04	3,265		100.00			3,265	7.00	SL/HY	3,265	0
EQ TRAILER		03/30/04	250		100.00			250	7.00	SL/HY	250	0
LH O/S ELECTRIC OUTLET		06/07/04	1,853		100.00			1,853	7.00	SL/HY	1,853	0
LH CEMENT PAD		06/10/04	49,946		100.00			49,946	7.00	SL/HY	49,946	0
EQ PRESSURE WASHER		08/23/04	485		100.00			485	7.00	SL/HY	485	0
EQ - PANEL SAW		02/23/05	1,149		100.00			1,149	7.00	SL/HY	1,149	0
CP TOUCH SCREEN MONITOR		04/23/05	524		100.00			524	5.00	SL/HY	524	0
CP COMPUTER TOWER 15		04/23/05	431		100.00			431	5.00	SL/HY	431	0
CP COMPUTER TOWER 8		05/06/05	237		100.00			237	5.00	SL/HY	237	0
EQ DUST COLLECTOR FOR PANEL		07/11/05	366		100.00			366	7.00	SL/HY	366	0
EQ ROTARY HAND PUMP X 2		07/11/05	249		100.00			249	7.00	SL/HY	249	0
LH BENCH		08/02/05	1,147		100.00			1,147	7.00	SL/HY	1,147	0
LH CAMERA SYSTEM		09/08/05	8,500		100.00			8,500	5.00	SL/HY	8,500	0
CP LAPTOP FOR DIRECTOR		12/31/05	1,002		100.00			1,002	5.00	SL/HY	1,002	0
VEH 1991 CHEVY TRUCK		12/31/05	4,500		100.00			4,500	5.00	SL/HY	4,500	0
EQ TV DVD PLAYER		12/31/05	196		100.00			196	7.00	SL/HY	196	0
CP COMPUTERS (2)		12/31/05	1,618		100.00			1,618	5.00	SL/HY	1,618	0
EQ CHAINSAW		12/31/05	50		100.00			50	7.00	SL/HY	50	0
LH O/S EXHIBIT SIDEWALK		12/31/05	101,000		100.00			101,000	25.00	SL/HY	61,804	4,126
LHWL - WATERLINE		12/31/05	346,233		100.00			346,233	20.00	SL/HY	264,623	18,136
EQ SCISSOR LIFT DONATED		01/23/06	3,500		100.00			3,500	7.00	SL/HY	3,500	0
LH - RESTORATION FENCE		01/26/06	1,500		100.00			1,500	15.00	SL/HY	1,450	50
EQ SAW		01/31/06	325		100.00			325	7.00	SL/HY	325	0
EQ LINCOLN WELDER DONATED		02/03/06	400		100.00			400	7.00	SL/HY	400	0

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LH - SIDEWALK LANDSCAPING DONATED		02/11/06	11,000		100.00			11,000	15.00	SL/HY	10,633	367
EQ GLASS FRONT WINE REFRIG		02/14/06	215		100.00			215	7.00	SL/HY	215	0
EQ GLASS FRONT CAN REFRIG		02/14/06	676		100.00			676	7.00	SL/HY	676	0
EQ HAND HELD RADIOS (3)		02/23/06	823		100.00			823	7.00	SL/HY	823	0
EQ GOLF CART #UL14646 DONATED		03/21/06	2,000		100.00			2,000	7.00	SL/HY	2,000	0
EQ GOLF CART #UL13760 DONATED		03/21/06	2,000		100.00			2,000	7.00	SL/HY	2,000	0
EQ 80 CHAIRS		03/23/06	799		100.00			799	7.00	SL/HY	799	0
EQ DOG TAG MACHINE		04/04/06	7,400		100.00			7,400	10.00	SL/HY	7,400	0
EQ BEARCOM		05/23/06	2,528		100.00			2,528	7.00	SL/HY	2,528	0
EQ SWAMP COOLER (C-141)		06/27/06	585		100.00			585	10.00	SL/HY	585	0
VEH DEUCE TRUCK		07/12/06	2,500		100.00			2,500	5.00	SL/HY	2,500	0
VEH COMMERCIAL VAN		07/17/06	20,000		100.00			20,000	5.00	SL/HY	20,000	0
EQ TRACTOR		09/25/06	2,007		100.00			2,007	10.00	SL/HY	2,007	0
EQ FURNITURE ONLINE		03/20/07	1,129		100.00			1,129	7.00	SL/HY	1,129	0
EQ - LOWES ?		03/27/07	534		100.00			534	7.00	SL/HY	534	0
EQ CHAIRS		05/08/07	679		100.00			679	5.00	SL/HY	679	0
LHPL - PARKING LOT -DONATED		05/31/07	16,000		100.00			16,000	20.00	SL/HY	10,800	800
EQ SOUND SYSTEM		10/25/07	6,134		100.00			6,134	5.00	SL/HY	6,134	0
COMPUTER FRONT DESK		10/01/09	662		100.00			662	5.00	200DB/HY	662	0
EQ - 40 60" ROUND TABLES		07/29/10	1,523		100.00			1,523	7.00	200DB/MQ	1,523	0
EQ - 300 CHAIRS/WHITE		09/30/10	7,345		100.00			7,345	7.00	200DB/MQ	7,345	0
LHDFC - DFC MONUMENT		10/01/10	38,124		100.00			38,124	15.00	150DB/MQ	27,149	2,251
EQ - LIGHTS/BLDG 1		10/31/10	2,042		100.00			2,042	7.00	200DB/MQ	2,042	0
EQ - SIGNS - 2 4X8		10/31/10	923		100.00			923	7.00	200DB/MQ	923	0
EQ - CHAIR CARTS (4)		01/04/11	469		100.00			469	7.00	200DB/HY	469	0
EQ - MIRRORS		05/03/11	490		100.00			490	7.00	200DB/HY	490	0
EQ - SIGNS		07/28/11	665		100.00			665	7.00	200DB/HY	665	0
EQ - 8X6 ROLLING DISPLAY WALLS		08/03/11	1,650		100.00			1,650	7.00	200DB/HY	1,650	0
LHDAD-WHEELSTOPS, HANDSIGNS, SURVSEAL		08/18/11	3,610		100.00			3,610	15.00	150DB/HY	2,438	213
EQ - ALARM SYSTEM		08/30/11	4,758		100.00			4,758	7.00	200DB/HY	4,758	0
LH HERITAGE/EDUC HANGAR 2		08/31/11	1,056,005		100.00			1,056,005	39.00	SL/MM	253,847	27,077
EQ - PROJECTOR/MONITOR		10/05/11	628		100.00			628	7.00	200DB/HY	628	0
LH - H2 SIDEWALK		10/27/11	1,000		100.00			1,000	15.00	150DB/HY	675	59
LH - H2 - PANIC DOOR EQUIP		10/27/11	709		100.00			709	39.00	SL/MM	166	18
EQ - CANOPY EZ UP		03/19/12	1,214		100.00			1,214	7.00	200DB/HY	1,214	0
EQ - HP DESKTOP		05/17/12	652		100.00			652	5.00	200DB/HY	652	0
H2 FURN - COUNTERS		06/26/12	1,500		100.00			1,500	7.00	200DB/HY	1,500	0

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Name as Shown on Return
MARCH FIELD MUSEUM FOUNDATION

Identifying Number
95-3539447

QuickZoom here to enter assets . . . . . ►
QuickZoom here to set MACRS convention for assets acquired in 2021 . . . . . ►
Activity: Form 990 - / Form 990EZ

Asset Description	Code *	Date In Service	Cost (Net of Land)	Land	Bus Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
EQ - STANCHIONS		08/31/12	2,748		100.00			2,748	7.00	200DB/HY	2,748	0
EQ - EXHIBIT HALL TV		09/11/12	598		100.00			598	7.00	200DB/HY	598	0
LH - SPACE RM GLASS DOORS		01/10/13	2,931		100.00			2,931	39.00	SL/MM	597	75
EQ - PLANETARIUM DOME		08/26/13	31,994		100.00			31,994	7.00	200DB/MQ	31,994	0
EQ - AIR COMPRESSOR		09/16/13	2,652		100.00			2,652	7.00	200DB/MQ	2,652	0
EQ - FLAT SCREEN TVS - 2		09/17/13	1,288		100.00			1,288	7.00	200DB/MQ	1,288	0
LH - ADA SIDEWALKS		10/31/13	102,950		100.00			102,950	15.00	150DB/MQ	55,077	6,079
EQ - SECURITY CAMERAS		12/21/13	726		100.00			726	7.00	200DB/MQ	726	0
EQ - ID BADGE MACHINE		01/30/14	1,760		100.00			1,760	7.00	200DB/MQ	1,741	19
H2 - GLASS DOORS		01/31/14	1,772		100.00			1,772	39.00	SL/MM	314	46
EQ - EV - DANCE FLOOR		02/25/14	540		100.00			540	7.00	200DB/MQ	534	6
EQ - BEARCOM RADIOS		03/31/14	1,328		100.00			1,328	7.00	200DB/MQ	1,313	15
EQ - TV/DVD PLAYER		04/09/14	707		100.00			707	7.00	200DB/MQ	684	23
EQ - DELL COMPUTER		05/21/14	773		100.00			773	5.00	200DB/MQ	773	0
B52 - CONCRETE FOOTING/PERMITS		09/04/14	6,547		100.00			6,547	15.00	150DB/MQ	3,213	387
EQ - TOOLS - PRESSURE WASHER 479		12/02/14	7,109		100.00			7,109	7.00	200DB/MQ	6,566	543
EQ - BOOKSHELVES		12/03/14	1,166		100.00			1,166	7.00	200DB/MQ	1,077	89
EQ - DELL 3000 DESKTOP		12/03/14	642		100.00			642	5.00	200DB/MQ	642	0
EQ - TOOLS - FLATBED TRAILER		12/04/14	1,620		100.00			1,620	7.00	200DB/MQ	1,496	124
2 WAY RADIOS		02/15/15	1,128		100.00			1,128	7.00	200DB/HY	977	101
SOUNDLAB SYSTEM - SPEAKERS, AMPS		03/08/15	3,371		100.00			3,371	7.00	200DB/HY	2,920	301
ARCHWAY LIGHTING TRUSS SYSTEM		04/21/15	784		100.00			784	7.00	200DB/HY	679	70
POS SOFTWARE		05/09/15	1,143		100.00			1,143	3.00	SL/NA	1,143	0
POS SYSTEM		05/13/15	1,271		100.00			1,271	5.00	200DB/HY	1,271	0
SPEAKER SYSTEM		09/16/15	1,795		100.00			1,795	7.00	200DB/HY	1,554	161
SPECO AMPLIFIER & SPEAKER		11/15/15	1,958		100.00			1,958	7.00	200DB/HY	1,696	175
EQ-SCISSOR LIFT		04/21/16	2,160		100.00			2,160	7.00	200DB/HY	1,679	192
LHI-SIDEWALKS		08/02/16	114,430		100.00			114,430	39.00	SL/MM	12,836	2,934
EQ REACHLIFT		09/27/16	17,712		100.00			17,712	7.00	200DB/HY	13,760	1,581
EQ PARKING LOT LIGHTS		10/18/16	4,947		100.00			4,947	15.00	150DB/HY	1,864	308
SUBTOTAL PRIOR YEAR			2,663,102	0		0	0	2,663,102			1,439,987	72,205
TOTALS			2,714,799	0		0	0	2,714,799			1,439,987	78,626

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Form 3885 — Depreciation and Amortization Report — 2021

Tax Year 2021

► Keep for your records

Name as Shown on Return: MARCH FIELD MUSEUM FOUNDATION

Identifying Number: 95-3539447

Activity: CA 199 - MAIN ACTIVITY

Asset Description	Code *	Date In Service	Cost (Net of Land)	Land	Bus Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
DEPRECIATION												
MODULAR BLDG		02/16/21	8,000		100.00			8,000	39.00	SL/MM		171
2021 MOTO ELECTRIC TRAM		06/10/21	26,932		100.00			26,932	7.00	200DB/HY		4,489
TRAM A/C UNIT/BATTERIES		06/15/21	10,770		100.00			10,770	7.00	200DB/HY		1,795
TRAM VINYL WRAP DESIGN & INSTALL		06/15/21	5,995		100.00			5,995	7.00	200DB/HY		999
SUBTOTAL CURRENT YEAR			51,697	0		0		51,697			0	7,454
EQ SAW		01/01/85	435		100.00			435	5.00	150DB		0
EQ WISHING WELL		01/01/86	671		100.00			671	5.00	150DB		0
EQ SAW		01/01/86	463		100.00			463	5.00	150DB		0
EQ TWO SECTION LECTERN		03/06/95	765		100.00			765	7.00	200DB/HY		0
EQ BAND SAW DONATED		01/16/97	500		100.00			500	7.00	200DB/HY		0
LH IMPROVEMENT		01/20/97	1,807		100.00			1,807	7.00	200DB/HY		0
LH GAS LINE		02/14/97	650		100.00			650	7.00	200DB/HY		0
LH MASONRY WORK		02/14/97	16,441		100.00			16,441	7.00	200DB/HY		0
LH BLOCK WALL DONATED		02/20/97	1,800		100.00			1,800	7.00	200DB/HY		0
EQ REFRIGERATOR		02/20/97	2,020		100.00			2,020	7.00	200DB/HY		0
LH DRAIN DONATED		03/20/97	900		100.00			900	7.00	200DB/HY		0
LH COURTYARD IMMPRV		04/07/97	20,800		100.00			20,800	7.00	200DB/HY		0
LH FIXTURES		08/21/97	1,995		100.00			1,995	7.00	200DB/HY		0
EQ - HIGH LIFT		01/15/98	7,004		100.00			7,004	7.00	200DB/HY		0
EQ - AIR COMPRESSOR		01/27/98	548		100.00			548	7.00	200DB/HY		0
LH SIDEWALK/CYARD PROJECT		02/06/98	16,338		100.00			16,338	7.00	200DB/HY		0
LH VISITORS DESK		02/25/98	5,413		100.00			5,413	7.00	200DB/HY		0
COURTYARD DRAIN		03/11/98	90		100.00			90	7.00	200DB/HY		0
LH SIGN		05/07/98	259		100.00			259	7.00	200DB/HY		0
LH BALLPARK LIGHTING		05/11/98	7,094		100.00			7,094	7.00	200DB/HY		0
LH DOOLITTLE BUST		05/26/98	2,300		100.00			2,300	7.00	200DB/HY		0
LH PIPELINE PROJECT		05/31/98	1,595		100.00			1,595	7.00	200DB/HY		0
LH WALL AT ENTRANCE		06/08/98	3,276		100.00			3,276	7.00	200DB/HY		0
EQ - BIG SCREEN TV		06/10/98	2,153		100.00			2,153	7.00	200DB/HY		0
LH PHONE CONDUIT		06/23/98	986		100.00			986	7.00	200DB/HY		0
LH PHONE LINE UPGRADE		06/30/98	286		100.00			286	7.00	200DB/HY		0
LH GIFT SHOP REMODEL		06/30/98	8,006		100.00			8,006	7.00	200DB/HY		0
LH WALL CONSTRUCTION		06/30/98	14,007		100.00			14,007	7.00	200DB/HY		0
EQ - WELDER		07/16/98	328		100.00			328	7.00	200DB/HY		0
LH PAVEMENT PROJECT		07/24/98	5,000		100.00			5,000	7.00	200DB/HY		0

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Name as Shown on Return
MARCH FIELD MUSEUM FOUNDATION

Identifying Number
95-3539447

Activity: CA 199 - MAIN ACTIVITY

Asset Description	Code *	Date In Service	Cost (Net of Land)	Land	Bus Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
LH GIFT SHOP DOOR		07/31/98	90		100.00			90	7.00	200DB/HY		0
LH PHONE LINES REPLCMT		08/06/98	2,832		100.00			2,832	7.00	200DB/HY		0
LH FLIGHTLINE FENCE		09/16/98	1,920		100.00			1,920	7.00	200DB/HY		0
EQ - BIG TV PROJECTIVE SCREEN		09/21/98	199		100.00			199	7.00	200DB/HY		0
LH REMODEL MASTER PLANS		10/15/98	3,703		100.00			3,703	7.00	200DB/HY		0
LH ROCK PROJECT		12/17/98	65		100.00			65	7.00	200DB/HY		0
EQ - DRILL PRESS DONATED		12/31/98	200		100.00			200	7.00	200DB/HY		0
EQ - FORD 545 TRACTOR DONATED		12/31/98	13,500		100.00			13,500	7.00	200DB/HY		0
LH ROCK MOUNT		01/07/99	86		100.00			86	7.00	200DB/HY		0
LH DOOLITTLE PLAQUE		03/18/99	1,500		100.00			1,500	7.00	200DB/HY		0
LH HANGAR DOOR REPAIRS		03/29/99	2,571		100.00			2,571	7.00	200DB/HY		0
LH MISSILE PLAQUE MONUMENT		04/08/99	20,006		100.00			20,006	7.00	200DB/HY		0
EQ GRINDER		05/24/99	65		100.00			65	7.00	200DB/HY		0
LH CEILING FAN/POWER LINE		06/11/99	302		100.00			302	7.00	200DB/HY		0
LH 15TH WALL SLEVE ANCHOR		06/28/99	136		100.00			136	7.00	200DB/HY		0
LH BATHROOMS REMODEL		07/23/99	17,296		100.00			17,296	7.00	200DB/HY		0
LH BASE MOUNT		07/27/99	438		100.00			438	7.00	200DB/HY		0
LH IRON GATE		08/13/99	850		100.00			850	7.00	200DB/HY		0
LH PALM TREES		09/16/99	4,008		100.00			4,008	7.00	200DB/HY		0
LH C-141 FENCE		11/02/99	5,913		100.00			5,913	7.00	200DB/HY		0
EQ AIR COMPRESSOR		11/15/99	1,961		100.00			1,961	7.00	200DB/HY		0
LH 8" WATER MAIN		12/03/99	2,000		100.00			2,000	7.00	200DB/HY		0
LH FENCE		12/28/99	143		100.00			143	7.00	200DB/HY		0
LHWD WAR DOG MEMORIAL		02/11/00	2,143		100.00			2,143	10.00	SL/HY		0
LHHW HERITAGE WALL		04/04/00	7,656		100.00			7,656	7.00	200DB/HY		0
EQ BAND SAW		05/17/00	4,980		100.00			4,980	7.00	200DB/HY		0
EQ HOT DOG COOKER		06/01/00	448		100.00			448	7.00	200DB/HY		0
EQ GOLF CART		06/01/00	1,500		100.00			1,500	7.00	200DB/HY		0
LHRH RESTORATION HANGAR		07/06/00	226,542		100.00			226,542	39.00	SL/MM		5,809
EQ AIR COMPRESSOR		07/21/00	3,432		100.00			3,432	7.00	200DB/HY		0
LHAS AIRCRAFT SIGNS		08/25/00	6,818		100.00			6,818	7.00	200DB/HY		0
EQ GUN CLEANER		09/12/00	700		100.00			700	7.00	200DB/HY		0
LH WORLEY BENCHES		11/07/00	1,076		100.00			1,076	7.00	200DB/HY		0
LH SIAT WALL - GIFT SHOP		12/19/00	736		100.00			736	7.00	200DB/HY		0
EQ TABLES		12/31/00	3,815		100.00			3,815	7.00	200DB/HY		0
EQ TABLE SET DONATED		01/05/01	1,000		100.00			1,000	7.00	200DB/HY		0
LH ELECTRIC POWER		01/30/01	950		100.00			950	7.00	200DB/HY		0

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MARCH FIELD MUSEUM FOUNDATION

Identifying Number
95-3539447

Activity: CA 199 - MAIN ACTIVITY

Asset Description	Code *	Date In Service	Cost (Net of Land)	Land	Bus Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
EQ DISPLAY RACKS		03/20/01	1,319		100.00			1,319	7.00	200DB/HY		0
EQ COLLECTIONS C		05/30/01	1,689		100.00			1,689	7.00	200DB/HY		0
LH WATER FOUNTAIN		06/19/01	2,151		100.00			2,151	7.00	200DB/HY		0
LH POLE FOR SOUND SYSTEM		06/30/01	1,200		100.00			1,200	7.00	200DB/HY		0
LHRH MEZZANIN - RESTOR. HANGAR		06/30/01	21,684		100.00			21,684	39.00	SL/MM		556
LH EXTERIOR LIGHT FOR PKG		08/22/01	7,350		100.00			7,350	7.00	200DB/HY		0
EQ LOCKHHED TR 2		09/07/01	667		100.00			667	7.00	200DB/HY		0
EQ 2 USED VERT BAND SAWS		09/10/01	2,580		100.00			2,580	7.00	200DB/HY		0
LHFE IMPROVEMENTS		10/18/01	9,325		100.00			9,325	7.00	200DB/HY		0
LH PATIO HEATERS (3)		01/01/02	1,050		100.00			1,050	7.00	200DB/HY		0
EQ TILDEN COIL TOOL TRAILER		01/01/02	1,500		100.00			1,500	7.00	200DB/HY		0
EQ MILL PANCHO ENT		01/01/02	600		100.00			600	7.00	200DB/HY		0
EQ SOUND SYSTEM COURTYARD		01/01/02	5,000		100.00			5,000	7.00	200DB/HY		0
CP TOWERS 3		01/29/02	1,201		100.00			1,201	5.00	200DB/HY		0
LH AUTOMATIC DOORS & 6 EXITS		01/31/02	24,440		100.00			24,440	15.00	SL/HY		0
EQ LATHE REGAL		03/01/02	1,300		100.00			1,300	7.00	200DB/HY		0
EQ TREE TOOL & DIE MACHINE		03/01/02	1,200		100.00			1,200	7.00	200DB/HY		0
LH PALM TREES		03/12/02	1,590		100.00			1,590	7.00	SL/HY		0
LHFE IMPROVEMENTS		04/15/02	3,774		100.00			3,774	7.00	SL/HY		0
EQ SMALL BREAK DEXTO		04/17/02	150		100.00			150	7.00	SL/HY		0
EQ LIGHT ALL CART		04/17/02	1,000		100.00			1,000	7.00	SL/HY		0
EQ DRILL PRESS		04/17/02	100		100.00			100	7.00	SL/HY		0
EQ AIR COMP MC2A		04/17/02	200		100.00			200	7.00	SL/HY		0
EQ AIR COMP IR		04/17/02	200		100.00			200	7.00	SL/HY		0
EQ FLOOR CRANE		04/17/02	300		100.00			300	7.00	SL/HY		0
EQ FORKLIFT 10K		04/17/02	5,000		100.00			5,000	7.00	SL/HY		0
EQ AIR COMP		04/17/02	300		100.00			300	7.00	SL/HY		0
EQ DISC SANDER DELTA		04/17/02	100		100.00			100	7.00	SL/HY		0
EQ HORIZ BAND SAW		04/17/02	500		100.00			500	7.00	SL/HY		0
EQ PRESSURE WASHER/TRAILER		04/17/02	3,500		100.00			3,500	7.00	SL/HY		0
EQ LARGE BREAK		04/17/02	300		100.00			300	7.00	SL/HY		0
EQ GENERATOR DIESEL		04/17/02	2,000		100.00			2,000	7.00	SL/HY		0
EQ HUCK RIVITER		04/17/02	500		100.00			500	7.00	SL/HY		0
EQ TOWER 7		05/07/02	906		100.00			906	7.00	SL/HY		0
LH RESTROOM DOORS		05/07/02	1,285		100.00			1,285	7.00	SL/HY		0
EQ CHAIRS & RACKS		05/21/02	3,490		100.00			3,490	7.00	SL/HY		0
EQ SLIP ROLL		06/18/02	853		100.00			853	7.00	SL/HY		0

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Identifying Number
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Activity: CA 199 - MAIN ACTIVITY

Asset Description	Code *	Date In Service	Cost (Net of Land)	Land	Bus Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
LH TENT		07/19/02	1,340		100.00			1,340	7.00	SL/HY		0
LH GRANITE PLAQUE RESTORATION		07/30/02	1,185		100.00			1,185	7.00	SL/HY		0
EQ TRAM		07/31/02	11,292		100.00			11,292	7.00	SL/HY		0
EQ EZ UP 3 W/SIDEWALLS		08/15/02	668		100.00			668	7.00	SL/HY		0
LH IMPROVEMENTS		10/08/02	1,669		100.00			1,669	7.00	SL/HY		0
LH UPS COD-PHONE SYSTEM		10/21/02	7,598		100.00			7,598	7.00	SL/HY		0
EQ HI LIFT ENGINE		03/18/03	2,500		100.00			2,500	7.00	SL/HY		0
EQ TRAILER FOR TRAM		07/08/03	1,700		100.00			1,700	7.00	SL/HY		0
SW WINDOWS & OFFICE XP		08/12/03	2,101		100.00			2,101	5.00	SL/HY		0
LHAS AIRCRAFT SIGNS		09/16/03	3,265		100.00			3,265	7.00	SL/HY		0
EQ FRANKLIN DISPLAY		09/30/03	1,625		100.00			1,625	7.00	SL/HY		0
EQ POSTER DISPLAY		11/10/03	794		100.00			794	7.00	SL/HY		0
EQ PORTABLE BARS		12/02/03	1,297		100.00			1,297	7.00	SL/HY		0
LHAS AIRCRAFT SIGNS		03/19/04	3,265		100.00			3,265	7.00	SL/HY		0
EQ TRAILER		03/30/04	250		100.00			250	7.00	SL/HY		0
LH O/S ELECTRIC OUTLET		06/07/04	1,853		100.00			1,853	7.00	SL/HY		0
LH CEMENT PAD		06/10/04	49,946		100.00			49,946	7.00	SL/HY		0
EQ PRESSURE WASHER		08/23/04	485		100.00			485	7.00	SL/HY		0
EQ - PANEL SAW		02/23/05	1,149		100.00			1,149	7.00	SL/HY		0
CP TOUCH SCREEN MONITOR		04/23/05	524		100.00			524	5.00	SL/HY		0
CP COMPUTER TOWER 15		04/23/05	431		100.00			431	5.00	SL/HY		0
CP COMPUTER TOWER 8		05/06/05	237		100.00			237	5.00	SL/HY		0
EQ DUST COLLECTOR FOR PANEL		07/11/05	366		100.00			366	7.00	SL/HY		0
EQ ROTARY HAND PUMP X 2		07/11/05	249		100.00			249	7.00	SL/HY		0
LH BENCH		08/02/05	1,147		100.00			1,147	7.00	SL/HY		0
LH CAMERA SYSTEM		09/08/05	8,500		100.00			8,500	5.00	SL/HY		0
CP LAPTOP FOR DIRECTOR		12/31/05	1,002		100.00			1,002	5.00	SL/HY		0
VEH 1991 CHEVY TRUCK		12/31/05	4,500		100.00			4,500	5.00	SL/HY		0
EQ TV DVD PLAYER		12/31/05	196		100.00			196	7.00	SL/HY		0
CP COMPUTERS (2)		12/31/05	1,618		100.00			1,618	5.00	SL/HY		0
EQ CHAINSAW		12/31/05	50		100.00			50	7.00	SL/HY		0
LH O/S EXHIBIT SIDEWALK		12/31/05	101,000		100.00			101,000	25.00	SL/HY		4,040
LHWL - WATERLINE		12/31/05	346,233		100.00			346,233	20.00	SL/HY		17,312
EQ SCISSOR LIFT DONATED		01/23/06	3,500		100.00			3,500	7.00	SL/HY		0
LH - RESTORATION FENCE		01/26/06	1,500		100.00			1,500	15.00	SL/HY		8
EQ SAW		01/31/06	325		100.00			325	7.00	SL/HY		0
EQ LINCOLN WELDER DONATED		02/03/06	400		100.00			400	7.00	SL/HY		0

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Name as Shown on Return
MARCH FIELD MUSEUM FOUNDATION

Identifying Number
95-3539447

Activity: CA 199 - MAIN ACTIVITY

Asset Description	Code *	Date In Service	Cost (Net of Land)	Land	Bus Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
LH - SIDEWALK LANDSCAPING DONATED		02/11/06	11,000		100.00			11,000	15.00	SL/HY		66
EQ GLASS FRONT WINE REFRIG		02/14/06	215		100.00			215	7.00	SL/HY		0
EQ GLASS FRONT CAN REFRIG		02/14/06	676		100.00			676	7.00	SL/HY		0
EQ HAND HELD RADIOS (3)		02/23/06	823		100.00			823	7.00	SL/HY		0
EQ GOLF CART #UL14646 DONATED		03/21/06	2,000		100.00			2,000	7.00	SL/HY		0
EQ GOLF CART #UL13760 DONATED		03/21/06	2,000		100.00			2,000	7.00	SL/HY		0
EQ 80 CHAIRS		03/23/06	799		100.00			799	7.00	SL/HY		0
EQ DOG TAG MACHINE		04/04/06	7,400		100.00			7,400	10.00	SL/HY		0
EQ BEARCOM		05/23/06	2,528		100.00			2,528	7.00	SL/HY		0
EQ SWAMP COOLER (C-141)		06/27/06	585		100.00			585	10.00	SL/HY		0
VEH DEUCE TRUCK		07/12/06	2,500		100.00			2,500	5.00	SL/HY		0
VEH COMMERCIAL VAN		07/17/06	20,000		100.00			20,000	5.00	SL/HY		0
EQ TRACTOR		09/25/06	2,007		100.00			2,007	10.00	SL/HY		0
EQ FURNITURE ONLINE		03/20/07	1,129		100.00			1,129	7.00	SL/HY		0
EQ - LOWES ?		03/27/07	534		100.00			534	7.00	SL/HY		0
EQ CHAIRS		05/08/07	679		100.00			679	5.00	SL/HY		0
LHPL - PARKING LOT -DONATED		05/31/07	16,000		100.00			16,000	20.00	SL/HY		800
EQ SOUND SYSTEM		10/25/07	6,134		100.00			6,134	5.00	SL/HY		0
COMPUTER FRONT DESK		10/01/09	662		100.00			662	5.00	200DB/HY		0
EQ - 40 60" ROUND TABLES		07/29/10	1,523		100.00			1,523	7.00	200DB/MQ		0
EQ - 300 CHAIRS/WHITE		09/30/10	7,345		100.00			7,345	7.00	200DB/MQ		0
LHDFC - DFC MONUMENT		10/01/10	38,124		100.00			38,124	15.00	150DB/MQ		2,251
EQ - LIGHTS/BLDG 1		10/31/10	2,042		100.00			2,042	7.00	200DB/MQ		0
EQ - SIGNS - 2 4X8		10/31/10	923		100.00			923	7.00	200DB/MQ		0
EQ - CHAIR CARTS (4)		01/04/11	469		100.00			469	7.00	200DB/HY		0
EQ - MIRRORS		05/03/11	490		100.00			490	7.00	200DB/HY		0
EQ - SIGNS		07/28/11	665		100.00			665	7.00	200DB/HY		0
EQ - 8X6 ROLLING DISPLAY WALLS		08/03/11	1,650		100.00			1,650	7.00	200DB/HY		0
LHIAD-WHEELSTOP, HANDSIGN, SURVSEAL		08/18/11	3,610		100.00			3,610	15.00	150DB/HY		213
EQ - ALARM SYSTEM		08/30/11	4,758		100.00			4,758	7.00	200DB/HY		0
LH HERITAGE/EDUC HANGAR 2		08/31/11	1,056,005		100.00			1,056,005	39.00	SL/MM		27,077
EQ - PROJECTOR/MONITOR		10/05/11	628		100.00			628	7.00	200DB/HY		0
LH - H2 SIDEWALK		10/27/11	1,000		100.00			1,000	15.00	150DB/HY		59
LH - H2 - PANIC DOOR EQUIP		10/27/11	709		100.00			709	39.00	SL/MM		18
EQ - CANOPY EZ UP		03/19/12	1,214		100.00			1,214	7.00	200DB/HY		0
EQ - HP DESKTOP		05/17/12	652		100.00			652	5.00	200DB/HY		0
H2 FURN - COUNTERS		06/26/12	1,500		100.00			1,500	7.00	200DB/HY		0

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Name as Shown on Return
MARCH FIELD MUSEUM FOUNDATION

Identifying Number
95-3539447

Activity: CA 199 - MAIN ACTIVITY

Asset Description	Code *	Date In Service	Cost (Net of Land)	Land	Bus Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
EQ - STANCHIONS		08/31/12	2,748		100.00			2,748	7.00	200DB/HY		0
EQ - EXHIBIT HALL TV		09/11/12	598		100.00			598	7.00	200DB/HY		0
LH - SPACE FM GLASS DOORS		01/10/13	2,931		100.00			2,931	39.00	SL/MM		75
EQ - PLANETARIUM DOME		08/26/13	31,994		100.00			31,994	7.00	200DB/MQ		0
EQ - AIR COMPRESSOR		09/16/13	2,652		100.00			2,652	7.00	200DB/MQ		0
EQ - FLAT SCREEN TVS - 2		09/17/13	1,288		100.00			1,288	7.00	200DB/MQ		0
LH - ADA SIDEWALKS		10/31/13	102,950		100.00			102,950	15.00	150DB/MQ		6,079
EQ - SECURITY CAMERAS		12/21/13	726		100.00			726	7.00	200DB/MQ		0
EQ - ID BADGE MACHINE		01/30/14	1,760		100.00			1,760	7.00	200DB/MQ		13
H2 - GLASS DOORS		01/31/14	1,772		100.00			1,772	39.00	SL/MM		45
EQ - EV - DANCE FLOOR		02/25/14	540		100.00			540	7.00	200DB/MQ		8
EQ - BEARCOM RADIOS		03/31/14	1,328		100.00			1,328	7.00	200DB/MQ		29
EQ - TV/DVD PLAYER		04/09/14	707		100.00			707	7.00	200DB/MQ		16
EQ - DELL COMPUTER		05/21/14	773		100.00			773	5.00	200DB/MQ		0
B52 - CONCRETE FOOTING/PERMITS		09/04/14	6,547		100.00			6,547	15.00	150DB/MQ		387
EQ - TOOLS - PRESSURE WASHER 479		12/02/14	7,109		100.00			7,109	7.00	200DB/MQ		568
EQ - BOOKSHELVES		12/03/14	1,166		100.00			1,166	7.00	200DB/MQ		93
EQ - DELL 3000 DESKTOP		12/03/14	642		100.00			642	5.00	200DB/MQ		0
EQ - TOOLS - FLATBED TRAILER		12/04/14	1,620		100.00			1,620	7.00	200DB/MQ		129
2 WAY RADIOS		02/15/15	1,128		100.00			1,128	7.00	200DB/HY	1,021	99
SOUNDTUBE SYSTEM - SPEAKERS, AMPS		03/08/15	3,371		100.00			3,371	7.00	200DB/HY	3,026	296
ARCHWAY LIGHTING TRUSS SYSTEM		04/21/15	784		100.00			784	7.00	200DB/HY	691	70
POS SOFTWARE		05/09/15	1,143		100.00			1,143	3.00	SL	1,143	0
POS SYSTEM		05/13/15	1,271		100.00			1,271	5.00	200DB/HY	1,271	0
SPEAKER SYSTEM		09/16/15	1,795		100.00			1,795	7.00	200DB/HY	1,519	158
SPECO AMPLIFIER & SPEAKER		11/15/15	1,958		100.00			1,958	7.00	200DB/HY	1,644	171
EQ-SCISSOR LIFT		04/21/16	2,160		100.00			2,160	7.00	200DB/HY	1,714	191
LHI-SIDEWALKS		08/02/16	114,430		100.00			114,430	39.00	SL/MM	12,959	2,934
EQ REACHLIFT		09/27/16	17,712		100.00			17,712	7.00	200DB/HY	13,431	1,557
EQ PARKING LOT LIGHTS		10/18/16	4,947		100.00			4,947	15.00	150DB/HY	1,756	319
SUBTOTAL PRIOR YEAR			2,663,102	0		0		2,663,102			40,175	71,446
TOTALS			2,714,799	0		0		2,714,799			40,175	78,900

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Additional information from your 2021 California Exempt Organization Business

Form 199: CA Exempt Organization Annual Information
Part II, Line 7 - Other Income

Continuation Statement

Description	Amount
MUSEUM ADMISSIONS	426,098
MUSEUM TOURS/TRAM	22,108
OTHER MUSEUM ACTIVITIES	40,205
EVENT CONTRACTS	107,240
INVESTMENT INCOME	257
Total	595,908

Form 199: CA Exempt Organization Annual Information
Part II, Line 11 - Compensation

Continuation Statement

Description	Amount
JAMIL DADA	0
MEL GUTIERREZ	0
RICHARD LEMIRE	0
RICK TEICHERT	0
GREGORY KUSTER	58,989
ROBERT FIELD	0
GLEN NEWMAN	0
JIM ROEVER	0
Total	58,989

Form 199: CA Exempt Organization Annual Information
Part II, Line 17 - Expenses

Continuation Statement

Description	Amount
OTHER EMPLOYEE BENEFITS	40,483
ACCOUNTING	7,798
ADVERTISING AND PROMOTION	3,459
OFFICE EXPENSES	55,271
INFORMATION TECHNOLOGY	38,483
CONFERENCES AND MEETINGS	121
INSURANCE	15,470
VOLUNTEER SUPPORT	3,877
SPECIAL EVENTS/EDUCATION COSTS	22,057
COLLECTIONS & EXHIBIT COSTS	180,123
Total	367,142