IRS e-file Signature Authorization for a Tax Exempt Entity

OMB	No.	1545-0047

For calendar year 2022, or fiscal year beginning

, 2022, and ending

b Total tax (Form 4720, Part III, line 1)

b Amount of credit payment requested (Form 8038-CP, Part III, line 22)

Department of the Treasury Internal Revenue Service

7a

8a

9a

10a

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

Go to www.irs.gov/Form8879TE for the latest information. Name of filer **EIN or SSN** ONWARD FOUNDATION 20-4651590 Name and title of officer or person subject to tax MARVIN WENIGER PRESIDENT Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. Form 990 check here b Total revenue, if any (Form 990, Part VIII, column (A), line 12) ______1b 1a Form 990-EZ check here ... b Total revenue, if any (Form 990-EZ, line 9) 2b 2a b Total tax (Form 1120-POL, line 22) 3a Form 1120-POL check here Form 990-PF check here ... b Tax based on investment income (Form 990-PF, Part V, line 5) 4b 42 Form 8868 check here b Balance due (Form 8868, line 3c) 5b 5a Form 990-T check here 6a b Total tax (Form 990-T, Part III, line:4)

Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that X I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) , (EIN) and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, l'authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a

b FMV of assets at end of tax year (Form 5227, Item D)

payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN:	check	one	box	only
------	-------	-----	-----	------

Form 4720 check here

Form 5227 check here

Form 5330 check here

Form 8038-CP check here

X | authorize CHERRY BEKAERT ADVISORY LLC

to enter my PIN

51590

ERO firm name

b Tax due (Form 5330, Part II, line 19)

Enter five numbers, but do not enter all zeros

as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

ignature of officer or person subject to tax

Part III | Gertification and Authentication

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

54428599039

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

ERO Must Retain This Form - See Instructions

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

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8879-TE (2022)

Form 990-W (Worksheet)

Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations

(and on Investment Income for Private Foundations) FORM 990-PF

▶ Keep for your records. Do not send to the Internal Revenue Service.

2023

Unrelated business taxable income expected in the tax year						
					6	
					7	Name of the second
					8	
					9	
Da Subtract line 9 from line 8. Note: If less than \$500, the organization does not need to make						
b Enter the tax shown on the 2022 return. Caution: If zero or the tax year was for less than 12 months, skip this line						
2023 Estimated Tax. Enter the smaller of line 10a or lin	ne 10b. If	the organization is requir	ed to skip line 10b, enter	the amount	40-	1 260
		(a)	(b)	(c)	100	1,360.
Installment due dates	11	05/15/23	06/15/23	09/15/2	3	12/15/23
Installments. Enter 25% of line 10c in columns (a) through (d)	12	340.	340	3	40	
	13		5.10.		±0.	340.
Payment due (Subtract line 13 from line 12)	14	340.	340.	3.	40.	340.
	Alternative minimum tax for trusts Total. Add lines 2 and 3 Estimated tax credits Subtract line 5 from line 4 Other taxes Total. Add lines 6 and 7 Credit for federal tax paid on fuels Subtract line 9 from line 8. Note: If less than \$500, the estimated tax payments Enter the tax shown on the 2022 return. Caution: If zero or the tax year was for less than 12 months, skip t and enter the amount from line 10a on line 10c 2023 Estimated Tax. Enter the smaller of line 10a or lin from line 10a on line 10c Installment due dates Installments. Enter 25% of line 10c in columns (a) through (d)	Tax on the amount on line 1 Alternative minimum tax for trusts Total. Add lines 2 and 3 Estimated tax credits Subtract line 5 from line 4 Other taxes Total. Add lines 6 and 7 Credit for federal tax paid on fuels Subtract line 9 from line 8. Note: If less than \$500, the organizal estimated tax payments Enter the tax shown on the 2022 return. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c 2023 Estimated Tax. Enter the smaller of line 10a or line 10b. If from line 10a on line 10c Installment due dates Installments. Enter 25% of line 10c in columns (a) through (d) 12 2022 Overpayment 13	Tax on the amount on line 1 Alternative minimum tax for trusts Total. Add lines 2 and 3 Estimated tax credits Subtract line 5 from line 4 Other taxes Total. Add lines 6 and 7 Credit for federal tax paid on fuels Subtract line 9 from line 8. Note: If less than \$500, the organization does not need to mak estimated tax payments Enter the tax shown on the 2022 return. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c 2023 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is requir from line 10a on line 10c (a) Installment due dates 11 05/15/23 Installments. Enter 25% of line 10c in columns (a) through (d) 2022 Overpayment 13	Tax on the amount on line 1 Alternative minimum tax for trusts Total. Add lines 2 and 3 Estimated tax credits Subtract line 5 from line 4 Other taxes Total. Add lines 6 and 7 Credit for federal tax paid on fuels Subtract line 9 from line 8. Note: If less than \$500, the organization does not need to make estimated tax payments Enter the tax shown on the 2022 return. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c 2023 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter from line 10a on line 10c (a) (b) Installment due dates 11 05/15/23 06/15/23 Installments. Enter 25% of line 10c in columns (a) through (d) 12 340. 340.	Alternative minimum tax for trusts Total. Add lines 2 and 3 Estimated tax credits Subtract line 5 from line 4 Other taxes Total. Add lines 6 and 7 Credit for federal tax paid on fuels Subtract line 9 from line 8. Note: If less than \$500, the organization does not need to make estimated tax payments Enter the tax shown on the 2022 return. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c 2023 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c (a) (b) (c) Installment due dates 11 05/15/23 06/15/23 09/15/2 Installments. Enter 25% of line 10c in columns (a) through (d) 12 340 • 340 • 340 • 3 2022 Overpayment	Tax on the amount on line 1 Alternative minimum tax for trusts 3 Total. Add lines 2 and 3 Estimated tax credits 5 Subtract line 5 from line 4 Other taxes 7 Total. Add lines 6 and 7 Credit for federal tax paid on fuels 9 Subtract line 9 from line 8. Note: If less than \$500, the organization does not need to make estimated tax payments Enter the tax shown on the 2022 return. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c 10b 1,335. 22 10a 11 05/15/23 06/15/23 09/15/23 Installment due dates 11 05/15/23 06/15/23 09/15/23 Installmente. Enter 25% of line 10c in columns (a) through (d) 12 340. 340. 340.

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. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print 20-4651590 ONWARD FOUNDATION File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 411 WALNUT STREET, #7605 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. GREEN COVE SPRINGS, FL 32043-3443 Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4 Application Return Application Return Is For Code Is For Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) Form 4720 (other than individual) 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 MARVIN WENIGER -411 WALNUT STREET, #7605 - GREEN COVE The books are in the care of ► SPRINGS, FL 32043-3443 Telephone No. ► 703-582-7559 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 I 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. I request an automatic 6-month extension of time until NOVEMBER 15, 2023, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2022 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less

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.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

estimated tax payments made. Include any prior year overpayment allowed as a credit.

any nonrefundable credits. See instructions.

Form 8868 (Rev. 1-2022)

За

3b

1,335.

1,029.

Form 990-PF

Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2023 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

For calendar year 2022 or tax year beginning and ending Name of foundation A Employer identification number ONWARD FOUNDATION 20-4651590 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number 411 WALNUT STREET, #7605 703-582-7559 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here GREEN COVE SPRINGS, FL 32043-3443 Initial return G Check all that apply: Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here ... I Fair market value of all assets at end of year | J Accounting method: | Cash If the foundation is in a 60-month termination (from Part II, col. (c), line 16) X Other (specify) MODIFIED CASH under section 507(b)(1)(B), check here ... 221, 160. (Part I, column (d), must be on cash basis.) \$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and expenses per books (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) income income 46,939. N/A Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 1,563. 1,563. Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 94,456. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 510,798. 7 Capital gain net income (from Part IV, line 2) 94,456. 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold ... c Gross profit or (loss) 11 Other income 142,958. 96,019. 12 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc. 0. 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees STMT 1 1,450. 1,450 0. c Other professional fees STMT 2 95 0. 17 Interest Taxes Depreciation and depletion 19 20 Occupancy Travel, conferences, and meetings 21 22 Printing and publications 25. 23 Other expenses STMT 3 0. 25. 24 Total operating and administrative 1,570. expenses. Add lines 13 through 23 1,570 0. 30,000. 25 Contributions, gifts, grants paid 30,000. 26 Total expenses and disbursements. 31,570. 0 . 31,570. Add lines 24 and 25 27 Subtract line 26 from line 12: 111,388 a Excess of revenue over expenses and disbursements 96,019. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A

Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End of y	
	cordini should be for end-or-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	The state of both mig	1,131.	1,161.	1,161.
2	Savings and temporary cash investments	422.	554.	554.
3	Accounts receivable			
	Less: allowance for doubtful accounts			
4	Pledges receivable			
	Less: allowance for doubtful accounts			
5	***************************************			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable			·
	Less: allowance for doubtful accounts			
g 8	Inventories for sale or use	The state of the s		
Assets 6 8				
€ 10:	a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 4	197,369.	221,656.	197 264
	c Investments - corporate bonds		221,000.	187,364.
11	Investments - land, buildings, and equipment: basis			
- 1	Less: accumulated depreciation	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
12	Investments - mortgage loans			
13	Investments - other STMT 5	0.	86,939.	20 001
14	(A) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B		00,939.	32,081.
	Less accumulated depreciation			
15	Less: accumulated depreciation Other assets (describe			
16				
10	Total assets (to be completed by all filers - see the	100 000		DESCRIPTION OF WARRING
-	instructions. Also, see page 1, item I)	198,922.	310,310.	221,160.
17	Accounts payable and accrued expenses			
18	Grants payable			
S 19	Deferred revenue			
Ciabilities 20 21 22	Loans from officers, directors, trustees, and other disqualified persons			
<u>유</u> 21	Mortgages and other notes payable			
- 22	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow FASB ASC 958, check here			
S	and complete lines 24, 25, 29, and 30.			
2 24	Net assets without donor restrictions			
25	Net assets with donor restrictions	1		
0	Foundations that do not follow FASB ASC 958, check here			****
튀	and complete lines 26 through 30.			
b 26	Capital stock, trust principal, or current funds	0.	0.	
\$ 27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
S 28	Retained earnings, accumulated income, endowment, or other funds	198,922.	310,310.	
Net Assets or Fund Balances 24 25 26 27 28 29 29	Total net assets or fund balances	198,922.	310,310.	
ž			00/0	
30	Total liabilities and net assets/fund balances	198,922.	310,310.	
Part				
Tota	The state of the s			
	I net assets or fund balances at beginning of year - Part II, column (a), line 29			
(mus	st agree with end-of-year figure reported on prior year's return)			198,922.
	r amount from Part I, line 27a		2	111,388.
Othe	r increases not included in line 2 (itemize)		3	0.
Add	lines 1, 2, and 3		4	310,310.
	eases not included in line 2 (itemize)		5	0.
Total	l net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	mn (b), line 29		310,310.
			The state of the s	Form 990-PF (2022)

(a) List and describe th 2-story brick war	ne kind(s) of property sold (for examele kind(s) of property sold (for examele kind(s)) of prope	mple, real estate, . MLC Co.)	I P	How acquired - Purchase - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED			+) - Dollation		(mos, day, yii)
b			_		***************************************	
С						
d						
е						TOTAL TORRESTORY
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale			(h) Gain or (loss) ((e) plus (f) minus (g))
a 510,798.		416,3	42.	-		94,456.
b						
С				***************************************		
d	The same of the sa					
e						
Complete only for assets showing	gain in column (h) and owned by t	he foundation on 12/31/69.		(1) Gains (Col. (h) gain r	ninus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		còl	(k), but not less than Losses (from col. (h	-0-) or
a					*****	94,456.
b					***************************************	
С						***************************************
d						
е					·	**************************************
2 Capital gain net income or (net capi	(in Part I, line 7	}	2		94,456.
Net short-term capital gain or (loss)) as defined in sections 1222(5) and	d (6):				
If gain, also enter in Part I, line 8, co	olumn (c). See instructions, If (loss), enter -0- in				
Part I, line 8 Part V Excise Tax Base	d on Investment Incom	o (Section 4040/a)	0404	3	N/A	
1a Everent energing foundations de	a on investment income	e (Section 4940(a), 4	1940(1	o), or 4948 -	see instruction	s)
1a Exempt operating foundations de	scribed in section 4940(d)(2), chec	k here and enter	"N/A" on	line 1.		
h All other domestic foundations or	tter: (atta	ach copy of letter if necessa	ry - see	instructions)	<u> </u>	1,335.
b All other domestic foundations er	net 1.39% (0.0139) of fille 270. Exe	empt foreign organizations,				
2 Tay under section 511 (demostic	col. (b)			ر		- 100
2 Tax under section 511 (domestic3 Add lines 1 and 2						0.
**************************************	contian 4047/a\/1\ trusta and tave				3	1,335.
5 Tay based on investment income	section 4947(a)(1) trusts and taxa	ole foundations only; others,	enter -0	-)	4	Ω
ay pased ou maestilletif lileoute					5	0.
6 Credits/Payments*	e. Subtract line 4 from line 3. If zer	o or 1000, eriter -0-		**************************		
6 Gredits/Payments:						
a 2022 estimated tax payments and	I 2021 overpayment credited to 202	2 6a		1,029		
 a 2022 estimated tax payments and b Exempt foreign organizations - tax 	I 2021 overpayment credited to 202 x withheld at source	2 6a 6b		1,029 0	•	
 a 2022 estimated tax payments and b Exempt foreign organizations - tax c Tax paid with application for exter 	I 2021 overpayment credited to 202 x withheld at source nsion of time to file (Form 8868)	6a 6b 6c		1,029 0 0	•	
a 2022 estimated tax payments and b Exempt foreign organizations - tax c Tax paid with application for exter d Backup withholding erroneously w	I 2021 overpayment credited to 202 x withheld at source nsion of time to file (Form 8868) withheld	6a 6b 6c 6d		1,029 0 0	•	1,335.
 a 2022 estimated tax payments and b Exempt foreign organizations - tax c Tax paid with application for exterd d Backup withholding erroneously with a payments. Add it 	I 2021 overpayment credited to 202 x withheld at source nsion of time to file (Form 8868) withheld ines 6a through 6d	6a 6b 6c 6d		1,029 0 0	7	1,335. 1,029.
a 2022 estimated tax payments and b Exempt foreign organizations - tax c Tax paid with application for exter d Backup withholding erroneously v Total credits and payments. Add I B Enter any penalty for underpayments.	I 2021 overpayment credited to 202 x withheld at source nsion of time to file (Form 8868) vithheld ines 6a through 6d ent of estimated tax. Check here	6a 6b 6c 6d 1f Form 2220 is attached		1,029 0 0	7 8	1,335. 1,029. 0.
a 2022 estimated tax payments and b Exempt foreign organizations - tax c Tax paid with application for exter d Backup withholding erroneously v Total credits and payments. Add I Enter any penalty for underpayments and ue. If the total of lines 5 and	I 2021 overpayment credited to 202 x withheld at source nsion of time to file (Form 8868) withheld ines 6a through 6d	6a 6b 6c 6d 6d if Form 2220 is attached wed		1,029 0 0	7 8 9	1,335. 1,029.

18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
	but it spend more than a roo during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
,	Did the foundation file Form 1100 DOL for this word			
	Did the foundation file Form 1120-POL for this year?	1c		X
	1 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ O . (2) On foundation managers. \$ O .			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
2	If "Yes," attach a detailed description of the activities.			
o	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
As	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
h	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
5	of "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
J	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5		X
6	Are the requirements of section 509(a) (relating to section 4044 the section 509(a) (relating to section 509(a))			
U	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?			
7	remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the years to the part of the par	6	_X	
1	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	0.	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	8b		
	year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII			v
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	9		$\frac{x}{x}$
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	10		Δ
	section 512(b)(13)? If "Yes," attach schedule. See instructions	44		v
2	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	11		<u> </u>
	If "Yes," attach statement. See instructions	12		Х
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	x	
	Website address ONWARDFOUNDATIONONLINE.ORG	13		
4	The books are in care of MARVIN WENIGER Telephone no. 703-58	2-7	559	
	Located at 411 WALNUT STREET, #7605, GREEN COVE SPRINGS, FL 7/P+4 32	043	-	13
5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		<u> </u>	Ť
	and enter the amount of tax-exempt interest received or accrued during the year		/A	L
6	At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank,		Terrent de la constitución de la	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
2.00%	foreign country			
	Fo	rm 99 0	-PF	2022)

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1	Form 990-PF (2022) ONWARD FOUNDATION 2.0-465	1500		_
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish poods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception, Check *No* if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if freminating within gold days.) 1a(6) X b if any answer is "Yes" to fa(1)-(6), did any of the acts fall to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions 1a(6) X 1b C Organizations relying on a current notice regarding disaster assistance? See instructions 1b A Organizations relying on a current notice regarding disaster assistance, check here d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022? 1 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(i)(3) or 4942(i)(5): a At the end of tax year 2023 (differ the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022? If "Yes," list the years b Ar there arry years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to t	Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required	1290		Page (
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NONE Individual test of other employees paid over \$50,000	NONE Interest to the state of other employees paid over \$50,000				(d) Contributions to	16	1 - Ynan	ther
otal number of other employees paid over \$50,000	U	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	acc acc	ount of	62
Otal number of other employees paid over \$50,000	U	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred compensation	acc al	ount of	
otal number of other employees paid over \$50,000	U	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred compensation	acc al	ount of	
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otal number of other employees paid over \$50,000	U	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred compensation	(e acc al	ount of	
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FORM 990-PF (2022) ONWARD FOUNDATION	20-	4651590 Page 7
Part VII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ation Managers, Highly	4651590 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter	OF UNIONE II	
(a) Name and address of each person paid more than \$50,000		
NONE	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers produced.	stical information such as the	F
1 N/A	duced, etc.	Expenses
2		
3		
4		
Part VIII-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on		
1 N/A	lines 1 and 2.	Amount
All other program-related investments. See instructions.		
otal. Add lines 1 through 3		

Form **990-PF** (2022)

F	Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations	cocinetarity
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	T T	see instructions.)
a	Average monthly fair market value of securities Average of monthly cash halances		
b		1a	325,081.
C	Fair market value of all other assets (see instructions) Total (add lines 1a, b, and c)	1b	6,223.
d	Total (add lines 1a, b, and c)	10	
е	Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and	1d	331,304.
	to (attach detailed explanation)		
2	1c (attach detailed explanation) 1e 0 •		
3	Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d	2	0.
4	South and E II of II mile to	3	331,304.
5	The second total for original additional and the second se	4	4,970.
6	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	326,334.
-	Mannian investment return. Enter 5% (0.05) Of line 5	6	16,317.
	foreign organizations, check here and do not complete this part.)	and certain	
1	Minimum investment return from Part IX, line 6	1	16,317.
2a	Tax on investment income for 2022 from Part V, line 5		10,311
b	income tax for 2022. (This does not include the tax from Part V.)		
C	Add lines 2a and 2b	2c	1 225
3	platibulable amount before adjustments. Subtract line 2c from line 1	3	1,335.
4	Recoveries of amounts treated as qualifying distributions Add lines 3 and 4		14,982.
5	Find miles of differ	4	14 000
6	Deduction from distributable amount (see instructions)	5	14,982.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	6	0.
Pa	Qualifying Distributions (see instructions)	7	14,982.
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		West Control of the C
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	. 1	21 570
U	r rogram-related investments - total from Part VIII-B	1a	31,570.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		0.
3	Amounts set aside for specific charitable projects that satisfy the:	2	
a	Suitability test (prior IRS approval required) Cash distribution test (attach the required school II)		
b	Cash distribution test (attach the required schedule)	3a	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	3b	24
	and on that And on the Angline 4	4	31,570.
			Form 990-PF (2022)

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				
2 Undistributed income, if any, as of the end of 2022:				14,982.
a Enter amount for 2021 only			2 000	
b Total for prior years:			3,802.	
3 Excess distributions carryover, if any, to 2022:		0.		
a From 2017				
b From 2018				
c From 2019				
d From 2020				
e From 2021				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2022 from				
Part XI, line 4: \$31,570.				
a Applied to 2021, but not more than line 2a			2 002	
b Applied to undistributed income of prior			3,802.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2022 distributable amount				
e Remaining amount distributed out of corpus	12,786.			14,982.
Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			
6 Enter the net total of each column as indicated below:	0.			0.
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	12,786.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'		U•		
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions				
e Undistributed income for 2021. Subtract line		0.		
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2022. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2023				
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2017				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2023.				
Subtract lines 7 and 8 from line 6a	12,786.			
10 Analysis of line 9:				
a Excess from 2018				
b Excess from 2019				
c Excess from 2020				
d Excess from 2021				
e Excess from 2022 12,786.				

ONWARD FOUNDATION

Form 990-PF (2022)

20-4651590

Page 10

Supplementary Information (continued) Part XIV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of recipient contribution any foundation manager Name and address (home or business) or substantial contributor a Paid during the year HOPE 4 LIFE NONE PC MOBILE PREGNANCY RESOURCE CENTER 7590 BEECHLAND ROAD ELBERON, VA 23846 5,000. CHURCH ORGANIZATION ODU CATHOLIC CAMPUS MINISTRY NONE PC 1306 W. 49TH STREET 5,000. NORFOLK, VA 23508 PRIESTS FOR LIFE NONE PC HELPING PRIESTS TO TEACH AND PREACH 5211 S WASHINGTON AVENUE DEFENDING HUMAN LIFE TITUSVILLE, FL 32780 FROM ABORTION 5,000. ST. PIUS X CATHOLIC CHURCH CHURCH ORGANIZATION NONE PC 7800 HALPRIN DRIVE 15,000. NORFOLK, VA 23518-4408 30,000. 3a Total b Approved for future payment NONE 0 . Total

101111 330 11 (2022)	OMMAND FOUNDA	TTOM
Part XV-A	Analysis of Income-Prod	ducing Activities
Enter gross amounts	Unrelated bu	
and grown arrows arrows out of miles in discussions		(a)

Enter grane amounts unless athenuise indicated	Unrelated t	business income	Excluded by	y section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	rinodit	code	Amount	Tanction income
a					
b					The state of the s
C				-	
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities	AND A 1 CONTROL OF THE STATE OF	N	14	1,563.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					mass mismosana (Massa
8 Gain or (loss) from sales of assets other					
than inventory			18	94,456.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					article Processor and Article Section (Company Company) and Article Section (Company)
G				**************************************	
d				······································	
Α		DATE HERANDERS STATE OF THE STA		· · · · · · · · · · · · · · · · · · ·	
12 Subtotal. Add columns (b), (d), and (e)	6E-36E-1	0.		96,019.	0.
13 Total. Add line 12, columns (b), (d), and (e)	L				
(See worksheet in line 13 instructions to verify calculations.)					
Part XV-B Relationship of Activities to	o the Accom	plishment of Ex	empt Pu	rposes	and the second s
Line No. Explain below how each activity for which inco			contributed	importantly to the accompl	ishment of
the foundation's exempt purposes (other than	by providing funds	s for such purposes).			
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	White the same of				**************************************
		West-100 1 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 -			
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Form **990-PF** (2022)

Form 990-PF (2022)

Part X	VI Information Re Exempt Organ		fers to ar	nd Transac	tions an	d Relations	ships With Nonchar	itable		
1 Did ti	ne organization directly or indir		f the following	g with any othe	r organization	n described in s	ection 501(c)		Yes	No
	r than section 501(c)(3) organ			en international new codes and the con-	The state of the s	T document in o	oonan oo no			
	sfers from the reporting founda									
	Cash		(6) 3					1a(1)		X
	Other assets							-		X
	transactions:	***************************************			*************	*****************				-
	Sales of assets to a noncharital	ble exempt organizati	on					1b(1)		X
	Purchases of assets from a nor									X
	Rental of facilities, equipment,									X
	Reimbursement arrangements								~	X
	Loans or loan guarantees							100000000		X
	Performance of services or me							-		X
	ing of facilities, equipment, ma									X
d If the	answer to any of the above is	"Yes." complete the fe	ollowing sche	dule, Column (	b) should alw	avs show the fa	ir market value of the goods	other ass	ets.	
	rvices given by the reporting fo								20.00	
	nn (d) the value of the goods,					The state of the s				
(a) Line no.	(b) Amount involved	A STATE OF THE PARTY OF THE PAR	CONTRACTOR OF THE PARTY OF THE	exempt organi	zation	(d) Descrip	otion of transfers, transactions, and	d sharing arra	ngemer	its
			N/A			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				Marie Village
***************************************										
			***************************************						XXIII (1815)	
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					West of the second					
					MY DESTRUCTION OF THE STATE OF					10:10 = 10 MS(11-0-11)
in se	e foundation directly or indirection 501(c) (other than sections," complete the following sch	on 501(c)(3)) or in sec		or more tax-ex	empt organiz	zations describe	d	Yes	X	No
- 1	(a) Name of or		**************************************	(b) Type of o	rganization		(c) Description of relatio	nship		
	N/A					ľ				
							Constitution and Management Constitution and Constitution and			
				THE STATE OF THE S			and the state of t	www.		
Sign Here	Under penalties of perjury, I declar and belief, it is true, corpect, and co	Newger	is return, includir reparer (other tha	an taxpayer) is bas	schedules and sed on all inform	PRESID	arer has any knowledge.	May the IRS return with the shown below	e prepar ?? See in	rer
	Signature of officer or truste		I Dua I -	Date	<u> </u>	Title	Check   if   PTI	NI		
	Print/Type preparer's n	ame	Preparer's s		2022 25 -	Date	Check if PTI self- employed	IN		
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#### 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

2022

Schedule B (Form 990) (2022)

Name of the organization Employer identification number ONWARD FOUNDATION 20-4651590 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% 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).

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

Employer identification number

### ONWARD FOUNDATION

20-4651590

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	MARVIN AND CHRISTINE WENIGER  411 WALNUT STREET, #7605  GREEN COVE SPRINGS, FL 32043	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Name of the Control o		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

### ONWARD FOUNDATION

20-4651590

(a) No. (b) from Description of noncash property given	(c) FMV (or estimate) (See instructions.)  \$ (c) FMV (or estimate) (See instructions.)  \$ (c) FMV (or estimate) (See instructions.)	(d) Date received  (d) Date received  (d) Date received
No. from Part I  (a) No. from Part I  (a) No. from Description of noncash property given  (b) from Part I  (a) No. from Description of noncash property given  (b) Description of noncash property given  (a) No. (b) Description of noncash property given  Part I  (a) No. (b) Description of noncash property given  (a) No. (b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)  \$ (c) FMV (or estimate) (See instructions.)	Date received  (d)  Date received
No. from Part I  (a) No. from Part I  (a) No. from Description of noncash property given  (b) from Part I  (a) No. from Description of noncash property given  (b) Description of noncash property given  (a) No. (b) Description of noncash property given  Part I  (a) No. (b) Description of noncash property given  (a) No. (b) Description of noncash property given	\$  (c) FMV (or estimate) (See instructions.)  (c) FMV (or estimate) (See instructions.)	Date received  (d)  Date received
No. (b) from Description of noncash property given  (a) No. (b) from Description of noncash property given  Part I  (a) No. (b)  (b)  (b)  (c) (c) (d) (d) (d) (d) (e) (e)	(c) FMV (or estimate) (See instructions.)	Date received
No. (b)  from Part I  (a) No. (b)  from Description of noncash property given  (b)  (c) (c) (d) (d) (d) (e) (e) (e) (e) (from Description of noncash property given  (a) (b) (b) (c) (d) (d) (d) (e) (e)	FMV (or estimate) (See instructions.)	Date received
No. (b) from Description of noncash property given Part I  (a) No. (b)		(4)
No. (b) from Description of noncash property given Part I  (a) No. (b)	(c)	(4)
No. (b)	FMV (or estimate) (See instructions.)	Date received
No. (b)	\$	Control of the Contro
Part I	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(a) No. (b) from Description of noncash property given Part I	(c) FMV (or estimate) (See instructions.)	(d) Date received

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	1,450.	0.		1,450.	
TO FORM 990-PF, PG 1, LN 16B	1,450.	0.		1,450.	
FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PROFESSIONAL FEES	95.	0.	Management of the property of the control of the second	95.	
TO FORM 990-PF, PG 1, LN 16C	95.	0.		95.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ANNUAL STATE REGISTRATION FEE	25.	0.		25.	
TO FORM 990-PF, PG 1, LN 23	25.	0.		25.	

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FORM 990-PF	PART VII - LIST	OF OFFICERS, DIRECTORS	STATEMENT 6
	TRUSTEES AND	FOUNDATION MANAGERS	

NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
MARVIN WENIGER 411 WALNUT STREET, #7605 GREEN COVE SPRINGS, FL 32043	PRESIDENT 2.00	0.	0.	0.
CHRISTINE WENIGER 411 WALNUT STREET, #7605 GREEN COVE SPRINGS, FL 32043	SECRETARY 1.00	0.	0.	0
SANDRA A. COLLINS 411 WALNUT STREET, #7605 GREEN COVE SPRINGS, FL 32043	DIRECTOR 1.00	0.	0.	0.
NADYNE A. DEARY 13470 CHAPELWOOD CT. BRISTOW, VA 20136	DIRECTOR 1.00	0.	0.	0.
LEANN DISHART 411 WALNUT STREET, #7605 GREEN COVE SPRINGS, FL 32043	DIRECTOR 1.00	0.	0.	0.
SHELLEY A. PATTERSON 411 WALNUT STREET, #7605 GREEN COVE SPRINGS, FL 32043	DIRECTOR 1.00	0.	0.	0.
JEAN A. WENIGER 411 WALNUT STREET, #7605 GREEN COVE SPRINGS, FL 32043	DIRECTOR 1.00	0.	0.	0.
DONNA A. WENIGER-KIMMET 21 EUCLID AVE LOS GATOS, CA 95030	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VII	0.	0.	0.

FORM 990-PF

PART XIV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 7

NAME OF MANAGER

MARVIN WENIGER CHRISTINE WENIGER