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. . . . *.*__

OMB No. 1545-0047

Open to Public

Department of the Treasury

Inter	nal Rev	enue Service Go to www.irs.gov/Form990 for instructions and th	ie latest in	formation.	Inspection
Α	For th	e 2022 calendar year, or tax year beginning $ { m JUL}1,2022$ and e	ending J	UN 30, 2023	
В	Check if applicat	C Name of organization		D Employer identific	ation number
;					
	Addr chan	ge MAYA EDUCATIONAL FOUNDATION			
	Nam chan			03-033515	59
	Initia returi	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final returi	V PO BOX 1483		508-349-2	L330
	termi ated	ⁿ⁻ City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,045,377.
	Amer returi	WELLFLEEI, MA 02007		H(a) Is this a group re	turn
	Appli tion	F Name and address of principal officer: ELISABETH S. NICHOL	SON	for subordinates	? Yes X No
	pend	^{ng} P.O. BOX 1483, WELLFLEET, MA 02667		H(b) Are all subordinates in	cluded? Yes No
1	Tax-e>	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) o	r 527	lf "No," attach a	list. See instructions
	Webs			H(c) Group exemption	
		f organization: X Corporation Trust Association Other	L Year	of formation: 1992 N	I State of legal domicile: ${ m VT}$
Pa	art I	Summary			
đ	1	Briefly describe the organization's mission or most significant activities: TO SU	JPPORT	THE EDUCATI	ONAL AND
Activities & Governance		PROFESSIONAL ADVANCEMENT OF THE MAYA PEOPL			
er në	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass	
Ň	3				7
ۍ م	4	Number of independent voting members of the governing body (Part VI, line 1b)			7
es	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)			0
iti	6	Total number of volunteers (estimate if necessary)			8
Act	7a	Total unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.
_	<u> </u> b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		1,194,150.	961,342.
ent	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	·····	50,957.	77,364.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		88.	35.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,245,195.	1,038,741.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		630,338.	645,196.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	L b			EC 024	102 /07
	1 "	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		56,034. 686,372.	<u>103,487.</u> 748,683.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			290,058.
	19	Revenue less expenses. Subtract line 18 from line 12		558,823. ginning of Current Year	End of Year
Net Assets or				4,404,873.	5,158,485.
SSe	20	Total assets (Part X, line 16)		71,455.	
let A	21	Total liabilities (Part X, line 26)		4,333,418.	<u>34,630.</u> 5,123,855.
	<u>22</u> art II	Net assets or fund balances. Subtract line 21 from line 20		4,JJJ,410.	J,14J,0JJ.
		alties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	nto and to the heat of my	knowledge and belief it is
					knowledge and beller, It IS
u u t	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of whi	iun preparer	nas any knowledge.	

Sign	Signature of officer			Date				
Here	ELISABETH S. NICHOLSON, E	XECUTIVE DIRECTOR						
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN			
Paid	JOSEPH GISO	JOSEPH GISO	03/21	/24 self-employed	P00030126			
Preparer	Firm's name JOHNSON O'CONNOR	FERON & CARUCCI LLP		Firm's EIN 20-	3985546			
Use Only	Firm's address 101 EDGEWATER DRI	VE, SUITE 210						
	WAKEFIELD, MA 018	80		Phone no. (781	.) 914-3400			
May the I	May the IRS discuss this return with the preparer shown above? See instructions							
232001 12-1	32001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

		age 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: THE FOUNDATION'S MISSION IS TO SUPPORT THE EDUCATIONAL AND	
	PROFESSIONAL ADVANCEMENT OF THE MAYA PEOPLE IN GUATEMALA, MEXICO AND	
	BELIZE, AS WELL AS THE NEIGHBORING INDIGENOUS CULTURES, WITH SPECIAL	
	EMPHASIS ON THE NEEDS OF THOSE MARGINALIZED BY THEIR SOCIETY. THE	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a)
	THE FOUNDATION PRIMARILY PROVIDES GRANTS THAT SUPPORT AND PROMOTE	
	EDUCATIONAL AND SCHOLARSHIP PROGRAMS IN THE MAYA REGION OF CENTRAL	
	AMERICA. APPROXIMATELY 15 - 20 GRANTS ARE AWARDED ANNUALLY.	
	ADDITIONALLY, REPRESENTATIVES OF THE FOUNDATION TRAVEL TO THESE AREAS	
	ANNUALLY TO MONITOR AND OBSERVE THE PROGRAMS.	
	224.267 224.267	
4b	(Code:) (Expenses \$ 334,367. including grants of \$ 334,367.) (Revenue \$ THE FOUNDATION ANNUALLY PROVIDES GRANTS TO CIRMA AND SHA JTZ'IBAJOM,)
	WHOSE MISSIONS ARE TO FOSTER STUDY AND PRESERVATION OF THE LANGUAGE AN	<u></u>
	CULTURES OF CENTRAL AMERICA.	<u> </u>
	CONTORED OF CENTRAL AMERICA.	
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 696,795.	(0000)

Form 990 (EDUCATIONAL	FOUNDATION					
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	Х	
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			37
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		v
•	Schedule D, Part III	8		<u> </u>
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?	•		х
10	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		х
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
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.			
~	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а		110		х
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a		
D		11b	х	
с	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	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	110		
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
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	х	
12a				
	Schedule D, Parts XI and XII	12a		х
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	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	L
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	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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		<u> </u>
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

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			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 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 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
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	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		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X 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	051		x
	Schedule L, Part I	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x
00	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
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 current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
a		28a		x
h	"Yes," complete Schedule L, Part IV	20a 28b		X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	200		
U	"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	25		<u> </u>
00	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? <i>If</i> "Yes." <i>complete</i>			<u> </u>
0L	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	х	1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	х	
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	Х	
Par	t 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 2			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	1

(gambling) winnings to prize winners?

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Pa	t 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 0			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		77
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			x
h.	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>		
D	If "Yes," enter the name of the foreign country			
50	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50 50		<u> </u>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			<u> </u>
ou	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			<u> </u>
	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
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	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			
е	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	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.			
а	a Did the sponsoring organization make any taxable distributions under section 4966?			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	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:			
а	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.)			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	•	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b	-		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
4-	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	4-		1
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		

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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. X

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

Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		7			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with a	any other				
	officer, director, trustee, or key employee?		-		2		Х
3	Did the organization delegate control over management duties customarily performed by or under th						
	of officers, directors, trustees, or key employees to a management company or other person?			I	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form S				4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?			5		Х
6	Did the organization have members or stockholders?				6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	opoint	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, s						
	persons other than the governing body?				7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:	ľ			
а	The governing body?				8a	Х	
b	Each committee with authority to act on behalf of the governing body?				8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched a	it the				
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	<u></u>			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	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 ch	napters	, 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 bod	y befoi	re filing the fo	rm?	11a		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			ľ			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to con	flicts?		12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "	Yes," d	lescribe				
	on Schedule O how this was done				12c	X	
13	Did the organization have a written whistleblower policy?				13	Х	
14	Did the organization have a written document retention and destruction policy?				14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	al by in	dependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official				15a		<u>X</u>
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.			ľ			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment w	rith 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		-				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nizatior	ı's	ľ			
0.00	exempt status with respect to such arrangements?		<u></u>		16b		
	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed <u>MA</u>		T (
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	na 990	- I (section 50	п(с)(3)s	only)	availat	DIE
	for public inspection. Indicate how you made these available. Check all that apply.						
40	X Own website Another's website X Upon request X Other <i>(explain</i>				c .		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	DUTIICT (or interest poli	cy, and	rinano	lai	
	statements available to the public during the tax year.						

			5 5		
20	State the name, address	s, and telephone	number of the pers	son who possesses the organization's	books and records
	ELISABETH S.	NICHOLS	ON - (508)	349-1330	
	P.O. BOX 148	3, WELLF	LEET, MA	02667	

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	e Position (do not check more than one			nne	Reportable	Reportable	Estimated		
	hours per	box	box, unless pe		s person is both an d a director/trustee)		n an	compensation	compensation	amount of
	week						tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	ee			ated		organization (W-2/1099-MISC/	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		ee	upens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	lual tr	tional		loy	st con	-	1033-1120)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) PABLO CHAVAJAY	5.00									
PRESIDENT		Х		X				0.	Ο.	0.
(2) EDWARD FISCHER	2.00									
VICE PRESIDENT		х		х				0.	0.	0.
(3) JOSE URSUA	2.00									
TREASURER (THROUGH 1/31/2023)		Х		X				0.	0.	0.
(4) ELISABETH S. NICHOLSON (NON-VOTI	40.00									
SECRETARY, EX OFFICIO MEMB				X		-		0.	0.	0.
(5) MITCHELL DENBURG DIRECTOR	0.50	x						0.	0.	0.
(6) RANDHI WILSON	0.50					\vdash		0.	0.	0.
DIRECTOR	0.30	x						0.	0.	0.
(7) SERITA FREY	0.50									
DIRECTOR		x						0.	0.	0.
(8) KAREN KAISER	0.50									
DIRECTOR, TREASURER (FROM 2/1/2023)		х		x				0.	0.	0.
(9) KENDRON THOMAS	0.50									
DIRECTOR		Х						0.	0.	0.
						-				
						+				
		1								
			-	-	-	\vdash				
		1								
		I	I	I	I	1	I	1		

Form 990 (2022) MAYA EDUC	CATIONAL	ı F	'OU	ND	AT	'IO	N		03-03	351	59	Page 8
Part VII Section A. Officers, Directors, Trus		oloye	ees,			ghes	st C		, ,			
(A)	(B) Average			(C Posi	C) ition	h		(D)	(E)		(F)	
Name and title	hours per		not c	heck ı	more	than o is both		Reportable compensation	Reportable compensatior	,	Estima amoun	
	week					or/trus		from	from related		othe	
	(list any	ector						the	organizations		compens	
	hours for related	e or dir	tee			sated		organization	(W-2/1099-MIS)	C/	from t	
	organizations	Individual trustee or director	In stitutio nal tru stee		/ee	Highest compensated employee		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		organiza and rela	
	below	idual t	tution	er	Key employee	est co loyee	ler	,			organiza	
	line)	Indiv	Instit	Officer	Key e	High	Former					
						-						
						\vdash						
						1						
			-									
1b Subtotal								0.		0.		0.
c Total from continuation sheets to Part VI								0.		0.		0.
d Total (add lines 1b and 1c)								0.		0.		0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100	,000 of reportable			0
compensation from the organization											Yes	0 ; No
	.r									Г	Tes	5 NO
3 Did the organization list any former officer,			-		-		-		•	- 1	3	x
line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i> 4 For any individual listed on line 1a, is the su										··· -	3	
and related organizations greater than \$150										- 1	4	x
5 Did any person listed on line 1a receive or a										···· -		
rendered to the organization? If "Yes." com											5	X
Section B. Independent Contractors												
1 Complete this table for your five highest co	mpensated ind	lepei	ndei	nt co	ontra	acto	rs th	nat received more than	\$100,000 of comp	ensatio	on from	
the organization. Report compensation for	the calendar ye	ear e	ndir	ng w	ith c	or wi	thin T		vear.			
(A) Name and business	address	NTC	ONE					(B) Description of s	services	Co	(C) mpensati	on
	4001033	INC		5			_	Description of			препзан	
							-					
2 Total number of independent contractors (ii	ooludina hut -	at 15	nite -	1+~ -	ther		tod	abovo) who roccived	oro than			
2 Total number of independent contractors (in \$100,000, of compensation from the organic	•	JU 11(1	me	0	(105	-	ieu	above, who received m				

Form	1 99(0 (2	2022) MAYA EDUCATIC	NAL FOUNI	DATION		03-0335	159 Page 9
Pa	rt V	/	Statement of Revenue					
			Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
			·		(A) Total revenue	(B) Related or exempt function revenue		(D) Revenue excluded from tax under sections 512 - 514
s s	1	2	Federated campaigns 1a					
ants	'							
ы С С								
Contributions, Gifts, Grants and Other Similar Amounts				406,311.				
ilar İlar			3	400,511.				
ns, Sim			Government grants (contributions) 1e					
er		f	All other contributions, gifts, grants, and	555 021				
di Di Di Di Di Di Di Di Di Di Di Di Di Di			similar amounts not included above 1f	<u>555,031.</u> 13,745.				
ont		-	Noncash contributions included in lines 1a-1f		061 242			
<u>ų č</u>		h	Total. Add lines 1a-1f		961,342.			
				Business Code				
e	2	а						
ervi		b						
Sepue		С						
Program Service Revenue		d				4		
Вo		е						
۲ ۲		f	All other program service revenue					
		g	Total. Add lines 2a-2f					
	3		Investment income (including dividends, intere-	est, and				
			other similar amounts)		77,597.			77,597.
	4		Income from investment of tax-exempt bond p	proceeds				
	5		Royalties		35.			35.
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
		b	Less: rental expenses 6b					
		с	Rental income or (loss) 6c					
		d	Net rental income or (loss)					
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 6 , 403 .					
		b	Less: cost or other basis					
e			and sales expenses 7b 6 , 636 .					
evenue		с	Gain or (loss)					
Rev			Net gain or (loss)		-233.			-233.
Other			Gross income from fundraising events (not					
đ			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18	ı				
		b	Less: direct expenses)				
		с	Net income or (loss) from fundraising events	_ <u></u>				
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9a	1				
		b	Less: direct expenses 9b					
			Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10	a				
		b	Less: cost of goods sold 10					
		с	Net income or (loss) from sales of inventory .					
<u> </u>				Business Code				
sno a	11	а						
ane		b						
scellaneo <u>Revenue</u>		с						
Miscellaneous Revenue		d	All other revenue					
~			Total, Add lines 11a-11d					
	12		Total revenue. See instructions		1,038,741.	0.	0.	77,399.

MAYA EDUCATIONAL FOUNDATION

MAYA EDUCATIONAL FOUNDATION Part IX Statement of Functional Expenses

Do	not include amounts reported on lines 6b.	(A) Total expenses	(B) Program service	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	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	645 106	645 106		
	individuals. See Part IV, lines 15 and 16	645,196.	645,196.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
~	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
-	persons described in section 4958(c)(3)(B)		4		
7 0	Other salaries and wages				
8	Pension plan accruals and contributions (include				
9	section 401(k) and 403(b) employer contributions)				
	Other employee benefits				
10 11	Payroll taxes				
	Management				
a b	Legal				
	Accounting	53,457.	43,726.	9,731.	
d		55715	1077200		
e	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch 0.)	9,419.	7,704.	1,715.	
12	Advertising and promotion	.,	.,		
13	Office expenses	7,996.		7,049.	947
14	Information technology	.,		.,	
15	Royalties				
16	Occupancy	341.		341.	
17	Travel	11,130.		11,130.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	4,452.		4,452.	
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 0.)				
а	PRINTING & PUBLICATIONS	8,821.			8,821.
b	BANK & CREDIT CARD FEES	2,835.	114.	62.	2,659.
с	POSTAGE & DELIVERY	2,806.	55.	1,201.	1,550.
d	MEALS AND ENTERTAINMENT	2,230.		2,230.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	748,683.	696,795.	37,911.	13,977
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 hereif following SOP 98-2 (ASC 958-720)				

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MAYA EDUCAT	ONAL FOUN	IDATION
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Total liabilities and net assets/fund balances

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i ui					
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	11,780.	1	22,410.
	2	Savings and temporary cash investments		2	1,429,285.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	95,037.
	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	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	1,800.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities	3,054,189.	11	78,751. 3,531,202.
	12	Investments - other securities. See Part IV, line 11		12	3,531,202.
	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)	4,404,873.	16	5,158,485.
	17	Accounts payable and accrued expenses	15,005.	17	34,630.
	18	Grants payable	56,450.	18	0.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iab		controlled entity or family member of any of these persons		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	71 / 55	25	24 620
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X	71,455.	26	34,630.
ŝ		· · · · · · · · · · · · · · · · · · ·			
nce	07	and complete lines 27, 28, 32, and 33.	4,122,510.	07	5,013,978.
alaı	27	Net assets without donor restrictions	210,908.	27	109,877.
d B	28	Net assets with donor restrictions	210,900.	28	109,077.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here			
orF	20	and complete lines 29 through 33.		20	
ŝts	29	Capital stock or trust principal, or current funds		29 30	
SS	30	Paid-in or capital surplus, or land, building, or equipment fund		<u>30</u> 31	
et⊿	31 32	Retained earnings, endowment, accumulated income, or other funds	4,333,418.	31 32	5,123,855.
ž	32	Total net assets or fund balances	<u>+,555,410</u>	32	5,125,055

5,158,485. Form **990** (2022)

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4,404,873.

Form 990 (2022)
Part X Balance Sheet

Form	n 990 (2022) MAYA EDUCATIONAL FOUNDATION	03-033	5159	Pag	e 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
				/	
1	Total revenue (must equal Part VIII, column (A), line 12)		1,038		
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,68	
3	Revenue less expenses. Subtract line 2 from line 1	3),05	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		4,333		
5	Net unrealized gains (losses) on investments	5	500),37	<u>9.</u>
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		E 10'		
Da	column (B)) rt XII Financial Statements and Reporting	10	5,123	5,03)
1 a					V
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			100	110
•	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0			
29		0.	2a		Х
20	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		20		
	separate basis, consolidated basis, or both:	on a			
	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				
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	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 Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 (2	2022)