023

US 990	Mai	n Informat	ion Sheet		202
For calend	ar year 2023 or tax year beginning		2023 and endin	g <u>Dec 31</u> ,	2023
Name: Name line 2: Address: City, State, and Zip Code:	DIVINE MERCY FOUND 2604 HALLSEY DR VENUS TX 76084-	DATION		EIN Telephone No	: <u>88-3638463</u> : <u>810-399-9861</u>
Web site address Fiduciary name, if applicab Name of officer signing retu Title of officer/trustee/fiduci Group exemption number . Check if exemption applica Accounting method	le . .rn	NA HERVE POI SAME AS C	rgesbidzog JA DFFICER crual: X Other		
(Form 990) Organization exempt un with gross receipts less	tion: nder section 501(c), 527 or 4947(a)(nder section 501(c), 527 or 4947(a)(than \$200,000 and total assets less ection 4947(a)(1) nonexempt charital	1) of the Internal Re than \$500,000 at t	evenue Code (exce he end of the year	pt black lung ben (Form 990-EZ)	
Preparer ID: $FRPE$ Preparer name: BIP Firm's name: BIP Address: 140 City, State, ZIP Code: IRV	CONO COENTERTAINMENT LLO 04 W WALNUT HILL LI		Tin	ne in this return: Date: PTIN: Self-employed: Firm's EIN: Phone:	$ \frac{147}{04/01/2025} $ P02015362 $\overline{646-606-7675}$

Form **990-PF**

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.

2023

OMB No. 1545-0047

Dep	artment of	the Treasury Do not	enter social security numbe	ers on this form	n as it may l	oe made pub	lic.	ZUZJ
			www.irs.gov/Form990PF fo					Open to Public Inspection
Fo								
	me of fou		- Jan		,	<u> </u>	r identification n	
пΤ	VINE	MERCY FOUNDATION				1		
		d street (or P.O. box number if mail is	not delivered to street address)	[Room/suite	88-3638	463	
		ALLSEY DR	· · · · · · · · · · · · · · · · · · ·				e number (see ins	tructions)
		a, state or province, country, and ZIP of	r foreign postal code			1		,
	NUS		TX	76084	-	810-399	-9861	
		Intry name Fore	eign province/state/county		n postal code			pending, check here
	o.g.: 000		ign province, etate, eeanty	i ereigi	r poota. oodo	C il exemp	ion application is	
G	Check	all that apply: 🔣 Initial retu		of a farmar au	hlia charitu	D 1 Foreig	n organizations o	heck here
Ū	011001	X Final retu		of a former pu	iblic chanty	0	0,	
		Address				-	-	eeting the 85% test,
н	Chack	x type of organization: \overline{x} S			on			was terminated under
							07(b)(1)(A), check	
<u> </u>		on 4947(a)(1) nonexempt char				-		
I		narket value of all assets at	J Accounting method:	Cash	x Accrual	F If the four	ndation is in a 60-	month termination
		f year (from Part II, col. (c),	Other (specify)			under see	ction 507(b)(1)(B),	, check here
	line 16	/ +	(Part I, column (d), must be	e on cash basis	5.)		1	
Ρ	art I	Analysis of Revenue and E		(a) Revenue a	and (b) N	et investment	(c) Adjusted	(d) Disbursements net for charitable
		amounts in columns (b), (c), and		expenses pe	er vi	income	income	purposes
	1	equal the amounts in column (a)		books				(cash basis only)
	1	Contributions, gifts, grants, etc., re	ceived (attach schedule)	39,4	197			
	2	Check X if the foundation is	not required to attach Sch. B					
	3	Interest on savings and temp	orary cash investments					
	4	Dividends and interest from	securities					
	5a	Gross rents						
	b	Net rental income or (loss)						
Pe	6a	Net gain or (loss) from sale of	of assets not on line 10					
j ne	b	Gross sales price for all assets on	line 6a					
Revenue	7	Capital gain net income (fror	n Part IV, line 2)					
Ř	8	Net short-term capital gain						
	9	Income modifications	· · · · · · · · · ·					
	10a	Gross sales less returns and allow	ances					
	b	Less: Cost of goods sold .						
	С	Gross profit or (loss) (attach	schedule)					
	11	Other income (attach schedu	ıle)			9,855		
	12	Total. Add lines 1 through 1	<u>1</u>	39,4	197	9,855		
ŝ	13	Compensation of officers, dir						
Operating and Administrative Expense	14	Other employee salaries and						
Del	15	Pension plans, employee be						
X	16a	Legal fees (attach schedule)						
ē	b	Accounting fees (attach sche						
Ę	С	Other professional fees (atta						
tra	17	Interest						
is	18	Taxes (attach schedule) (see						
<u>n</u> ir	19	Depreciation (attach schedu						
dr	20	Occupancy						
Ā	21	Travel, conferences, and me						
JUE	22	Printing and publications .					ļ	
ő	23	Other expenses (attach sche						
tin	24	Total operating and admin						
ra		Add lines 13 through 23 .						
be	25	Contributions, gifts, grants pa						
0	26	Total expenses and disburseme						
	27	Subtract line 26 from line 12						
	а	Excess of revenue over expense		39,4	197			
	b	Net investment income (if	negative, enter -0-)			9.855		

c Adjusted net income (if negative, enter -0-)

Form 990-PF (2023) DIVINE MERCY FOUNDATION

		(2023) DIVINE MERCY FOUNDATION		00-3	638463 Page Z
Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	· ·
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
-	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis			
	••	Less: accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
	10	instructions. Also, see page 1, item I)			
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19				
Ξ	19 20				
abi	20 21	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule)			
Ë	21 22				
	22 23	Other liabilities (describe) Total liabilities (add lines 17 through 22)			
	23				
lances		Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30			
aŭ	24				
Bal	24	Net assets without donor restrictions		200	
	25	Net assets with donor restrictions		200	
ğ		Foundations that do not follow FASB ASC 958, check here			
Net Assets or Fund	20	and complete lines 26 through 30			
S	26	Capital stock, trust principal, or current funds			
ŝts	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
ŝŝ	28	Retained earnings, accumulated income, endowment, or other funds			
Š	29	Total net assets or fund balances (see instructions)		200	
let	30	Total liabilities and net assets/fund balances (see			
		instructions)		200	
-	rt III	Analysis of Changes in Net Assets or Fund Balances) II 00 (
1		net assets or fund balances at beginning of year-Part II, column (
		of-year figure reported on prior year's return)			
2		r amount from Part I, line 27a			39,497
3		r increases not included in line 2 (itemize)			
4		ines 1, 2, and 3			39,497
5	Decre	eases not included in line 2 (itemize) net assets or fund balances at end of year (line 4 minus line 5)—P		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)-P	art II, column (b), line	29 6	39,497

		MERCY FOUNDATION			88-36	38463 Pa	ge 3
Part	 Capital Gains and a) List and describe the k 2-story brick wareho 	(c) Date acquired	(d) Date sold				
10	2-Story blick waterio	(mo., day, yr.)	(mo., day, yr.)				
<u>1a</u> b							
C							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale		ain or (loss) s (f) minus (g))	
а							
b							
C							
d							
e	Complete only for exects of		hutha foundation	an 12/21/60			
	Complete only for assets si	nowing gain in column (h) and owned				ol. (h) gain minus ot less than -0-) or	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col. (i) I. (j), if any		(from col. (h))	
а							
b							
С							
d							
е							
2	Capital gain net income o	or (net capital loss) 1 -	also enter in Pa	}			
		L IT (IOSS)), enter -0- in Pa		2		
3		n or (loss) as defined in sections					
		I, line 8, column (c). See instructi		>			
Part		on Investment Income (Section			3		
-		on Investment Income (Section					
1a		cribed in section 4940(d)(2), check here		N/A" on line 1.			2.5
h	Date of ruling or determination letter				s) } <u>1</u>	1	.37
	4% (0.04) of Part I, line 12, c	ns enter 1.39% (0.0139) of line 27b. E col. (b)					
	•	estic section 4947(a)(1) trusts and tag			,		25
3					··· 3	1	.37
4 5		estic section 4947(a)(1) trusts and ta nt income. Subtract line 4 from li		•	· ·	1	.37
6	Credits/Payments:	in medine. Subtract line 4 norm		1855, enter -0	5	1	
a	•	ents and 2022 overpayment crec	lited to 2023	6a			
b		ions—tax withheld at source .					
C		for extension of time to file (Form		6c			
d		eously withheld	,	6d			
7	Total credits and paymen	ts. Add lines 6a through 6d	<u></u>		7		
8		derpayment of estimated tax. Che					
9		es 5 and 8 is more than line 7, er				1	.37
10		more than the total of lines 5 and					
11	Enter the amount of line 10	to be: Credited to 2024 estimated	tax	Refur	nded 11	- 000 DE /	

Form 9	90-PF (2023) DIVINE MERCY FOUNDATION	88-3638	463	F	Page 4
Part	VI-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	it		Yes	No
	participate or intervene in any political campaign?	L	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	instructions for the definition		1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materia	als			
	published or distributed by the foundation in connection with the activities.				
C.	Did the foundation file Form 1120-POL for this year?	· ·	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. \$ (2) On foundation managers. \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impo				
е	on foundation managers. \$	seu			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		х
2	If "Yes," attach a detailed description of the activities.	· ·	-		11
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
•	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		Х
	If "Yes," attach the statement required by General Instruction T.				
6	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 the				
_	conflict with the state law remain in the governing instrument?		6	Х	
7	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	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				
b	TX If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene				
b	(or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation		8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(0.0	21	
•	4942(j)(5) for calendar year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If	()			
	"Yes," complete Part XIII		9		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing t	heir			
	names and addresses		10		х
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the				
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualifie				
	person had advisory privileges? If "Yes," attach statement. See instructions		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .	· · [13		Х
	Website address				
14		517-31		644	
		76084-			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here .		•		
		15		Y.	
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other	Г	1.6	Yes	No
	authority over a bank, securities, or other financial account in a foreign country?	· ·	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the				
	name of the foreign country				

Part	VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
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?	1a(1)		Х
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified			
	person?	1a(2)		Х
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		Х
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		Х
	(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)?	1a(5)		Х
	(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 terminating within 90 days.)	1a(6)		Х
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
С	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 2023?	1d		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for			
	tax year(s) beginning before 2023? If "Yes," list the years	2a		Х
	20, 20, 20, 20			
b	Are there any 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 the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	3a		Х
b	If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse			
	of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2023.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable			
		4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize			
	its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning	46		37
	in 2023?	4b		Х

Form 9	90-PF (2023) DIVINE MERCY FOUNDATION 88-	3638463	F	Page 6
Par	t VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)			
5a	During the year, did the foundation pay or incur any amount to:		Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	5a(1)		Х
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,			
	directly or indirectly, any voter registration drive?	5a(2)		Х
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	5a(3)		Х
	(4) Provide a grant to an organization other than a charitable, etc., organization described in			
	section 4945(d)(4)(A)? See instructions	5a(4)		Х
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational			
	purposes, or for the prevention of cruelty to children or animals?	5a(5)		Х
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in	n		
	Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	5b		
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax			
	because it maintained expenditure responsibility for the grant?	5d		
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	6a		Х
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	6b		Х
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	7a		Х
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	8		Х

Part VII	Information About Officers,	Directors, Truste	ees, Foundation Mar	nagers, Highly Paid Employees,
	and Contractors			

	1	List all officers,	directors,	trustees,	and founda	ation manag	gers and	l their com	pensa	ation. S	See instructions	•
--	---	--------------------	------------	-----------	------------	-------------	----------	-------------	-------	----------	------------------	---

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ROGER BIDZOGO	DIRECTOR			
2604 HALSEY DR	40			
HERVE POLA	DIRECTOR			
2604 HALSEY DR	40			

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account,
NONE				
Total number of other employees paid over \$50,000				
				- 000 DE (0000)

	formation About Officers, Directors, Trustees, Foundand Contractors (continued)	ation Managers, Highly Paid En	nployees,
3 Five highe	est-paid independent contractors for professional services.	See instructions. If none, enter "N	ONE."
	a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of c	thers receiving over \$50,000 for professional services		
	Summary of Direct Charitable Activities		
	four largest direct charitable activities during the tax year. Include relevant statistic ner beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
1			
2			
3			
4			
	Comments of Decements Deleted Investments (see instance	tion =)	
	Summary of Program-Related Investments (see instruc		Amount
	gest program-related investments made by the foundation during the tax year on I	mes 1 and 2.	Amount
1			
2			
2			
All other program-re	elated investments. See instructions.		
3			
-			
Total. Add lines 1	through 3		
			orm 990-PF (2023)

Form 990-PF (2023)	DIVINE	MERCY	FOUNDATION

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreig	n founda	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	
6	Minimum investment return. Enter 5% (0.05) of line 5	6	
Part		ons	
	and certain foreign organizations, check here 🛛 and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	
2a	Tax on investment income for 2023 from Part V, line 5	7	
b	Income tax for 2023. (This does not include the tax from Part V.) 2b		
С	Add lines 2a and 2b	2c	137
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII,		
	line 1	7	
Part	XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etctotal from Part I, column (d), line 26	1a	
b	Program-related investments—total from Part VIII-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	

DIVINE MERCY FOUNDATION

Part	XII Undistributed Income (see instructions)			
		(a)	(b)	(c)	(d)
		Corpus	Years prior to 2022	2022	2023
1	Distributable amount for 2023 from Part X, line 7				
2	Undistributed income, if any, as of the end of 2023:				
а	Enter amount for 2022 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2023:				
a	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through e				
4	Qualifying distributions for 2023 from Part XI,				
	line 4: \$				
а	Applied to 2022, but not more than line 2a.				
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
с	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2023 distributable amount .				
е	Remaining amount distributed out of corpus .				
5	Excess distributions carryover applied to 2023				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' 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				
	amount—see instructions				
е	Undistributed income for 2022. Subtract line				
	4a from line 2a. Taxable amount—see				
	instructions				
f	Undistributed income for 2023. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2024				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
-	required—see instructions)				
8	Excess distributions carryover from 2018 not				
-	applied on line 5 or line 7 (see instructions) .				
9	Excess distributions carryover to 2024.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
a	Excess from 2019				
b	Excess from 2020				
C	Excess from 2021				
d	Excess from 2022				
е					

Form 9	990-PF (2023) DIVINE MERCY FO	UNDATION			88-36	38463 Page 10
Part	XIII Private Operating Foundation	ons (see instruct	ions and Part V	I-A, question 9)		
1a	If the foundation has received a ruling of	or determination le	etter that it is a priv	vate operating		
	foundation, and the ruling is effective for	or 2023, enter the	date of the ruling			
	Check box to indicate whether the foundation	on is a private operat	ing foundation desc	ribed in section	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	1	(e) Total
	investment return from Part IX for	(a) 2023	(b) 2022	(c) 2021	(d) 2020	(0) 10141
	each year listed					
b	85% (0.85) of line 2a					
С	Qualifying distributions from Part XI, line 4, for each year listed					
d	Amounts included in line 2c not used directly	_				
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
	Part IX, line 6, for each year listed					
С	"Support" alternative test—enter:					
	 Total support other than gross investment income (interest, dividends, rents, payments on 					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XIV Supplementary Information	(Complete this	s part only if th	e foundation ha	ad \$5.000 or mo	re in assets at
i ai i	any time during the year-					
1	Information Regarding Foundation M	lanagers:	•			
а	List any managers of the foundation wh					he foundation
	before the close of any tax year (but or	nly if they have cor	ntributed more that	an \$5,000). (See se	ection 507(d)(2).)	
b	List any managers of the foundation wh	no own 10% or mo	ore of the stock of	a corporation (or a	an equally large po	rtion of the

- ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.
- 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

HERVE POLA 517-316-6644 2604 HALSEY DR VENUS TX 76084-

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

3	XIV Supplementary Information (continu Grants and Contributions Paid During t	he Year or Approve	d for Fut	ure Payment	
	Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
	Name and address (home or business)	any foundation manager	status of recipient	contribution	Amount
а	Paid during the year	or substantial contributor			
a	r ald during the year				
	Total				3
b	Approved for future payment				
		1			

	rt XV-A Analysis of Income-Producing Ac	tivities				
	er gross amounts unless otherwise indicated.		usiness income	Excluded by sect	ion 512, 513, or 514	(0)
1	Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
•						
	a b					
	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					
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					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory .					
11	Other revenue: a					
	b					
	c					
	d					
	е					
12						
13	Total. Add line 12, columns (b), (d), and (e)				13	
	e worksheet in line 13 instructions to verify calculation	is.)				
Pa	e worksheet in line 13 instructions to verify calculation rt XV-B Relationship of Activities to the A	is.) I ccomplishm				
Pa	e worksheet in line 13 instructions to verify calculation	is.) .ccomplishm e is reported in c	olumn (e) of Part)	KV-A contributed	importantly to the es). (See instruction	ons.)
Pa	e worksheet in line 13 instructions to verify calculation rt XV-B Relationship of Activities to the A e No. Explain below how each activity for which incom	is.) .ccomplishm e is reported in c	olumn (e) of Part)	KV-A contributed	importantly to the ses). (See instruction	ons.)
Pa	e worksheet in line 13 instructions to verify calculation rt XV-B Relationship of Activities to the A e No. Explain below how each activity for which incom	is.) .ccomplishm e is reported in c	olumn (e) of Part)	KV-A contributed	importantly to the ses). (See instruction	ons.)
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Pa	e worksheet in line 13 instructions to verify calculation rt XV-B Relationship of Activities to the A e No. Explain below how each activity for which incom	is.) .ccomplishm e is reported in c	olumn (e) of Part)	KV-A contributed	importantly to the ses). (See instruction	ons.)
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Pa	e worksheet in line 13 instructions to verify calculation rt XV-B Relationship of Activities to the A e No. Explain below how each activity for which incom	is.) .ccomplishm e is reported in c	olumn (e) of Part)	KV-A contributed	importantly to the es). (See instruction	ons.)
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Pa	e worksheet in line 13 instructions to verify calculation rt XV-B Relationship of Activities to the A e No. Explain below how each activity for which incom	is.) .ccomplishm e is reported in c	olumn (e) of Part)	KV-A contributed	importantly to the ses). (See instruction	ons.)
Pa	e worksheet in line 13 instructions to verify calculation rt XV-B Relationship of Activities to the A e No. Explain below how each activity for which incom	is.) .ccomplishm e is reported in c	olumn (e) of Part)	KV-A contributed	importantly to the es). (See instruction	ons.)

Part	XVI	Exempt Org	Regarding Trans	fers to and Trans	actions	and Re	elationship	s with I	Nonchar	Itable		
1	Did th		directly or indirectly er	ngage in any of the fo	ollowing	with any	other organi	zation de	scribed		Yes	No
			er than section 501(c)									
	orgar	nizations?										
а			porting foundation to a									
										1a(1)		Х
	• •									1a(2)		Х
b		transactions:										
			a noncharitable exen							1b(1)		X
			ets from a noncharitat							1b(2)		X
			, equipment, or other							1b(3)		X
			rrangements							1b(4) 1b(5)		X X
		-	ervices or membershi							1b(3)		X
C			quipment, mailing list	-						1c		X
			the above is "Yes," com									
			er assets, or services gi									
			n or sharing arrangemer									
(a) Line	no. ((b) Amount involved	(c) Name of nonch	aritable exempt organizati	ion	(d) Desc	cription of transf	iers, transa	ctions, and sl	haring arra	angeme	ents
2a	Is the	foundation dire	ctly or indirectly affilia	ted with, or related to	o, one or	more tax	k-exempt org	ganizatior	าร	٦. <i>.</i>	—	
_			501(c) (other than sec	tion 501(c)(3)) or in s	section 5	27?		· · ·	L	Yes	XN	0
b	It "Ye		following schedule.									
		(a) Name of organ	nization	(b) Type of org	ganization			(c) Descri	ption of relati	ionship		
			clare that I have examined this ret					knowledge ar	nd belief, it is tru	Je,		
Sign	correc	t, and complete. Declarat	ion of preparer (other than taxpay	er) is based on all information of	f which prepa	rer has any kr	owledge.		May the IF	RS discuss	this retu	rn
Here				04/01/20	25 SAM	E AS C	FFICER		with the p	reparer sho	wn belov	w?
	Sign	ature of officer or tru	stee	Date	Title				See instru	ICUONS.	X Yes	No
Paid		Print/Type preparer	's name	Preparer's signature			Date	Ch	neck if	PTIN		
Prepa		BIKONO		BIKONO			04/01/2		lf-employed	P0201	.536	2
-		Firm's name	BIKOENTERTAINM	IENT LLC				Firm's EIN	l			
Use O	шу	Firm's address	1404 W WALNUT	HILL LN				Phone no.	646-	-606-7	675	

IRVING TX 75038

Form 8879-TE

IRS E-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

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Department of the Treasury			S. Keep for your records.	· · · · · · · · · · · · · · · · · · ·	2023
Internal Revenue Service Name of filer		Go to www.irs.gov/Form88	79TE for the latest informati	ION. EIN or SSN	
DIVINE MERCY FOU	INDATION			88-3638463	
Name and title of officer or per				30-3030403	
NA				SAME AS OFF	ICER
	Return and Retur	n Information			-
CP and Form 5330 filers m 5a, 6a, 7a, 8a, 9a, or 10a l 5b, 6b, 7b, 8b, 9b, or 10b applicable line below. Do n 1a Form 990 check here 2a Form 990-EZ check 3a Form 1120-POL chec 4a Form 990-PF check 5a Form 8868 check her 6a Form 990-T check her 7a Form 4720 check here 8a Form 5227 check here	hay enter dollars and conservations and the amount, whichever is applicated application of complete more that the eta and the amount of the eta and th	 bents. For all other forms, entities on that line for the return being, blank (do not enter -0-). If an one line in Part I. b Total revenue, if any (F b Total revenue, if any (F b Total revenue, if any (F b Total tax (Form 1120-Part) b Total tax (Form 1120-Part) b Balance due (Form 886) b Total tax (Form 990-T, I b Total tax (Form 4720, Part) b FMV of assets at end of the set of t	enter the applicable amount, if er whole dollars only. If you ch sing filed with this form was bla But, if you entered -0- on the re- orm 990, Part VIII, column (A), orm 990-EZ, line 9) DL, line 22) ent income (Form 990-PF, Pa 8, line 3c) Part III, line 4) art III, line 1) f tax year (Form 5227, Item D	neck the box on line 1 ank, then leave line 1 eturn, then enter -0- or , line 12) 1 2 3 nt V, line 5) 4 5	a, 2a, 3a, 4a, b, 2b, 3b, 4b, h the bb bb bb bbb
9a Form 5330 check he	ere	•	art II, line 19)		b
10a Form 8038-CP chec			requested (Form 8038-CP, Part III,		0b
Part II Declarati	on and Signature	e Authorization of Off	icer or Person Subject	to Tax	
intermediate service provid acknowledgement of recei the date of any refund. If a (direct debit) entry to the fi return, and the financial in 1-888-353-4537 no later th processing of the electroni	der, transmitter, or elect pt or reason for rejection pplicable, I authorize to nancial institution acco stitution to debit the en than 2 business days pro- c payment of taxes to ed a personal identific	ctronic return originator (ERC on of the transmission, (b) th he U.S. Treasury and its des ount indicated in the tax prep try to this account. To revok rior to the payment (settleme receive confidential informat	vn on the copy of the electroni b) to send the return to the IRS ne reason for any delay in proc ignated Financial Agent to initi aration software for payment of e a payment, I must contact the nt) date. I also authorize the fin ion necessary to answer inquir gnature for the electronic return	and to receive from the cessing the return or re- iate an electronic fund of the federal taxes ow e U.S. Treasury Finan nancial institutions inv- ries and resolve issues	he IRS (a) an efund, and (c) s withdrawal ed on this cial Agent at blved in the s related to
PIN: check one box o	nly				
X I authorize AL	L STATES TAX	SERVICES ERO firm name	to enter my PIN	N 7608 Enter five numbers, do not enter all zero	but
a state agence enter my PIN	y(ies) regulating cha on the return's discle or person subject to	rities as part of the IRS F osure consent screen. tax with respect to the en	cated within this return tha ed/State program, I also au tity, I will enter my PIN as r	uthorize the aforements	entioned ERO to tax year 2023
			n that a copy of the return will enter my PIN on the re		
Signature of officer or person s	subject to tax			Date <u>04/01/2</u>	025
Part III Certificat	ion and Authenti	cation			
ERO's EFIN/PIN. Enter number (EFIN) followed			71159376084 Do not	enter all zeros	
	return in accordance		e on the 2023 electronicall Pub. 4163, Modernized e-F		
ERO's signature			Date	04/01/2025	

ERO Must Retain This Form—See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

Name: DIVINE MERCY FOUNDATION

ID: 88-3638463

Description: DIVINE EXPENSES

Туре	Amount
ARTHWORKS	Amount 2,24
POGRAFIC	620 3,792 3,000
NSTRUCTION SITE	3,79
GNING AGREEMENT FEES	3,000
ANSPORTATION	200
Total	