## Form **990-PF**

**Return of Private Foundation** 

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Fo	or cale	ndar year 2021 or tax year beginning , a	nd ending					
N	ame o	foundation				A Employe	er identification numb	per
Jo	se	Antonio Grifols Lucas Foundation	on Inc.			26-22	96884	
N	umber	and street (or P.O. box number if mail is not delivered to street address	5)	Room			ne number (see instruc	ctions)
24	10	Grifols Way				(323)	405-0563	
		own, state or province, country, and ZIP or foreign postal code					tion application is pend	ling, check here
		Angeles, CA 90032						3,
		eck all that apply: Initial return Initial return of a for	rmer public char	itv		<b>D 1.</b> Forei	gn organizations, chec	k here
		Final return Amended return	·	,			gn organizations meeti	<u> </u>
		X Address change Name change					there and attach comp	
Н	Che	eck type of organization: X Section 501(c)(3) exempt private founda	tion				foundation status was	
Г	-	tion 4947(a)(1) nonexempt charitable trust Other taxable private					507(b)(1)(A), check her	. –
<del>-</del>	-	market value of all assets at J Accounting method: X Cash	Accrual				ndation is in a 60-mon	<u> </u>
•		of year (from Part II, col. (c),					ction 507(b)(1)(B), che	
		16) <b>\$</b> \$ 69,679. (Part I, column (d), must be on cash b	pasis.)			4.140.00	0.00.00.00.00,00,00.00	
P		Analysis of Revenue and Expenses (The total of		and	(h) Notin	waatmant	(a) Adjusted not	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue expenses		` '	nvestment come	(c) Adjusted net income	for charitable
		the amounts in column (a) (see instructions).)	books				301110	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	409,7					(Gasii basis Gilly)
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B	405,7	00.				
	3	Interest on savings and temporary cash investments						
Revenue	4	Dividends and interest from securities						
	-	Gross rents						
		Net rental income or (loss)						
		Net gain or (loss) from sale of assets not on line 10						
	b							
	l _	Capital gain net income (from Part IV, line 2)						
Re Be	7	· · · · · · · · · · · · · · · · · · ·						
_	8	Net short-term capital gain						
	9	, i						
		Gross sales less returns and allowances Less: Cost of goods sold						
		Gross profit or (loss) (attach schedule)						
		Other income (attach schedule)						
	11		409,7	06				
	12 13	Total. Add lines 1 through 11	409,7	06.				
	_	Compensation of officers, directors, trustees, etc						
S	14	Other employee salaries and wages						
Se	15	Pension plans, employee benefits						
be		Legal fees (attach schedule)						
Operating and Administrative Expenses		Accounting fees (attach schedule)						
.i.	47 C	· · · · · · · · · · · · · · · · · · ·						
trai	17 19	Interest						-
nis	18							
Ë	19	Depreciation (attach schedule) and depletion						
¥	20	Occupancy						
anc	21	· · · · · · · · · · · · · · · · · · ·	2	95.				395.
ng	22	Printing and publications	3	95.				393.
rati	23	Other expenses (attach schedule)						<del>                                     </del>
be (	24	Total operating and administrative expenses.	3	0 E				30E
ပ	25	Add lines 13 through 23		<u>95.</u>				395.
	25	Contributions, gifts, grants paid	416,6					416,655.
	26	Total expenses and disbursements. Add lines 24 and 25	417,0	<u> 50.</u>				417,050.
	27	Subtract line 26 from line 12:	7 0	, ,				
		Excess of revenue over expenses and disbursements	-7,3	44.				
		Net investment income (if negative, enter -0-)						
	· r	ennisten net micome (ii nenauve eniër-U-)						

Pa	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Valu	ie	(c) Fair Market Value
	1	Cash – non-interest-bearing	77,023.	69,6		
	2	Savings and temporary cash investments	, 0201	00,0		05,0.51
	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				
တ္	8	Inventories for sale or use				
ssets	9	Prepaid expenses and deferred charges				
Ass		· · · · ·				
	10a	Investments – U.S. and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule)				
	l	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	<b>Total assets</b> (to be completed by all filers – see the instructions. Also,				40 4-0
		see page 1, item I)	77,023.	69,6	79.	69,679.
	17	Accounts payable and accrued expenses				
	18	Grants payable				
≟	19	Deferred revenue				
abilities	20	Loans from officers, directors, trustees, and other disqualified persons				
<u></u>	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe )				
40	23	Total liabilities (add lines 17 through 22).				
ances		Foundations that follow FASB ASC 958, check here				
ĭ		and complete lines 24, 25, 29, and 30.				
	24	Net assets without donor restrictions	55.000			
<u>m</u>	25	Net assets with donor restrictions	77,023.	69,6	79.	
ב		Foundations that do not follow FASB ASC 958, check here				
ī		and complete lines 26 through 30.				
Fund Ba	26	Capital stock, trust principal, or current funds				
ţ	27	Paid-in or capital surplus, or land, bldg., and equipment fund				
Se	28	Retained earnings, accumulated income, endowment, or other funds				
Ą	29	Total net assets or fund balances (see instructions)	77,023.	69,6	<u>79.</u>	
et	30	Total liabilities and net assets/fund balances				
_		(see instructions)	77,023.	69,6	<u>79.</u>	
	art I					<u> </u>
1		al net assets or fund balances at beginning of year – Part II, column (a), line 29		-	_	
_	_	re reported on prior year's return)			1	77,023.
2		er amount from Part I, line 27a			2	-7,344.
3		ner increases not included in line 2 (itemize)			3	60 656
4		d lines 1, 2, and 3			4	69,679.
5			(1) 11 00		5	60 670
6	l'ot	al net assets or fund balances at end of year (line 4 minus line 5) – Part II, colur	mn (b), line 29		6	69,679.

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Part	IV Capital Gains an	d Losses for Tax on Investi	ment Income			
	(a) List and describe the	kind(s) of property sold (for example, real or common stock, 200 shs. MLC Co.)	estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				D Demandi		
b						
c						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis nse of sale		in or (loss) (f) minus (g))
а						
b						
С						
d						
e						
Con	nplete only for assets showing g	ain in column (h) and owned by the fou	undation on 12/31/6		(I) Coine (C	ol (b) goin minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess		col. (k), but r	ol. (h) gain minus ot less than -0-) <b>or</b> (from col. (h))
a						
b						
С						
d						
e						
	Capital gain net income or (net o		n, also enter in Par s), enter -0- in Par		2	
3	If gain, also enter in Part I, line 8	oss) as defined in sections 1222(5) and 3, column (c). See instructions. If (loss	), enter -0- in	}	3	
Par		d on Investment Income (Se			948—see inst	ructions)
		escribed in section 4940(d)(2), check h			1	1
	· · · · · · ·	etter:(attach copy			ons)	1
h	_	enter 1.39% (0.0139) of line 27b. Exem		-	············	
~		, col. (b) · · · · · · · · · · · · · · · · · · ·			<i>)</i>	
2	, ,	ic section 4947(a)(1) trusts and taxable				2
3	Add lines 1 and 2 · · · · ·		o roundations only,	othors, officer or j		3
1	· · · · · · · · - · · - · · · · · · ·	ic section 4947(a)(1) trusts and taxable	e foundations only:	others enter $-\Omega$		4
5		ome. Subtract line 4 from line 3. If zero	-	·		5
_	Credits/Payments:	one. Subtract line 4 from line 5. If Zero	o or less, eriter -o-			3
6		nd 2020 overpayment credited to 2021		6a		
		tax withheld at source				
		ension of time to file (Form 8868)				
		withheld				-
7		d lines 6a through 6d				7
8		ment of estimated tax. Check here				8
9		nd 8 is more than line 7, enter <b>amount</b>				9 0
10		than the total of lines 5 and 8, enter th		I <b>a</b>		10 0
11	Enter the amount of line 10 to be	e: Credited to 2022 estimated tax 🕨			Refunded ▶	11 0

ı Gıt	Otatomento Regularing Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or		Yes	No
	intervene in any political campaign?	1a		X
b	Did it spend more than \$100 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.			
С	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. ▶ \$			
е	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		х
	If "Yes," attach a detailed description of the activities.			
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		X
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> 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 <i>General Instruction T</i> .	j		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
Ū	By language in the governing instrument, or			
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict</li> </ul>			
	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	X	
7		-	Λ	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
<b>L</b>	If the angular is "IVes" to line 7, here the formulation from inherit a convert Forms 000 DF to the Attempts Consent (or decimalty) of			
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	01-	v	
•	each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b	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 year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
10	Did any persons become substantial contributors during the tax year?			
	If "Yes," attach a schedule listing their 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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ▶ <a href="https://www.joseantoniogrifolsfoundation.org">https://www.joseantoniogrifolsfoundation.org</a>			
14	The books are in care of ▶ <u>Jesus Hernandez</u> Telephone no. ▶ <u>(323) 2</u>	<u> 27-</u>	<u> 763</u>	3
	Located at ▶ 2410 Grifols Way Los Angeles, CA ZIP+4 ▶ 90032			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here			. ▶□
	and enter the amount of tax-exempt interest received or accrued during the year			ı
16	At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, 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 foreign country ▶			

Form 990-PF (2021) Jose Antonio Grifols Lucas Foundation Inc.

Par	t 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)		X
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified			
	person	1a(2)		X
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		X
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		X
	(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)		X
	(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)		X
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 2021?	1d		X
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 2021, did the foundation have any undistributed income (Part XII, lines			
	6d and 6e) for tax year(s) beginning before 2021?	2a		X
	If "Yes," list the years ▶			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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		X
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	<b>)</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	3a		X
b	If "Yes," did it have excess business holdings in 2021 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 2021.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	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 in 2021?	4b		X

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Гаі	Statements Regarding Activitie	S TOT WITHCIT FOITE	i 4/20 May be i	<b>Tequireu</b> (continueu)			
5a	During the year, did the foundation pay or incur any amo	ount to:				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influen	nce legislation (section 4	945(e))?		. 5a(1)		X
	(2) Influence the outcome of any specific public election	n (see section 4955); or t	o carry on,				
	directly or indirectly, any voter registration drive?				. 5a(2)		X
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes?.			. 5a(3)		X
	(4) Provide a grant to an organization other than a chari	table, etc., organization o	described in				
	section 4945(d)(4)(A)? See instructions				. 5a(4)		X
	(5) Provide for any purpose other than religious, charita	ble, scientific, literary, or	educational				
	purposes, or for the prevention of cruelty to children	or animals?			. 5a(5)		X
b	If any answer is "Yes" to 5a(1)-(5), did any of the transa	actions fail to qualify und	er the exceptions des	cribed in			
	Regulations section 53.4945 or in a current notice regard	ding disaster assistance	? See instructions .		. 5b		
С	Organizations relying on a current notice regarding disas	ster assistance, check h	ere				
d	If the answer is "Yes" to question 5a(4), does the foundation	ation claim exemption fro	m the tax				
	because it maintained expenditure responsibility for the	grant?			. <b>5</b> d		
	If "Yes," attach the statement required by Regulations se	ection 53.4945-5(d).					
6a	Did the foundation, during the year, receive any funds, d	lirectly or indirectly, to pa	y premiums				
	on a personal benefit contract?				. <b>6a</b>		X
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a per	sonal benefit contrac	1?	. 6b		X
	If "Yes" to 6b, file Form 8870.						
7a	At any time during the tax year, was the foundation a par	rty to a prohibited tax she	elter transaction?		. 7a		X
b	If "Yes," did the foundation receive any proceeds or have	e any net income attribut	able to the transaction	n?	. 7b		
8	Is the foundation subject to the section 4960 tax on payr	ment(s) of more than \$1,	000,000 in				
	remuneration or excess parachute payment(s) during the	e year?			. 8		X
Pa	rt VII Information About Officers, Dir	ectors, Trustees,	Foundation Ma	anagers, Highly Paid	i Empi	oyee	es,
	and Contractors						
_1_	List all officers, directors, trustees, and foundation				1		
	(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) Expe	nse ac allowar	
Chr	is Healey	Board Member					
1775 P	ennsylvania Ave NW Ste. 200 Washington, DC 20006		0.				
Vic	toria Picone	Board Member					
<u>1315</u>	Heritage Road Normal, IL 61761		0.				
Cor	bin Whittington	Board Member					
39 Ro	ock Ledge Drive Chapel Hill, NC 27516		0.				
Meg	an Ryan	Board Member					
<u>6922</u>	Van Etten Street Houston, TX 77021		0.				
2	Compensation of five highest-paid employees (other "NONE."	er than those included	on line 1 - see instr	ructions). If none, enter			
(a) N	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) Expe	nse ac allowar	
NON	E						
NON	E						
NON	F:						
NON	<u>E</u>						
NON	E						
Total	number of other employees paid over \$50,000			<u> </u>			

Part VIII-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	

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UYA

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part IX see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1 а 1a 73,351. 1b b 1c С 73,351. 1d Reduction claimed for blockage or other factors reported on lines 1a and 2 2 73,351. 3 3 4 Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) . . . . . 4 110. 5 73,241. 5 <u>3,</u>662. Minimum investment return. Enter 5% (0.05) of line 5 . . . . . . . . . . . . 6 6 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part X and certain foreign organizations, check here ▶ ☐ and do not complete this part.) 3,662. 1 0. 2a 0. h 2c 3 3 0. 4 4 3,662. 5 5 6 6 0. 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1. . . . . . . . . . . 7 3,662. Part XI Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 417,050. 1a а 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: 3a 3b 417,050. 4

Form 990-PF (2021) Jose Antonio Grifols Lucas Foundation Inc. 26-2296884 Page 9 Part XII Undistributed Income (see instructions) (b) (c) (d) (a) Corpus Years prior to 2020 2020 2021 3,662. 1 Distributable amount for 2021 from Part X, line 7 . . . 2 Undistributed income, if any, as of the end of 2021: **b** Total for prior years: Excess distributions carryover, if any, to 2021: 3 From 2016 . . . . . . . . . . . . . . 95,192. а From 2017 . . . . . . . . . . . . **c** From 2018 . . . . . . . . . . **d** From 2019 . . . . . . . . . . . 362,209. **e** From 2020 . . . . . . . . . . 457,401 Qualifying distributions for 2021 from Part XI, 417,050. line 4: ▶ \$ **a** Applied to 2020, but not more than line 2a. . . . . . **b** Applied to undistributed income of prior years c Treated as distributions out of corpus (Election **d** Applied to 2021 distributable amount . . . . . . . . . 417,050. e Remaining amount distributed out of corpus . . . . . 5 Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).) . . . . . . . Enter the net total of each column as indicated below: Corpus. Add lines 3f, 4c, and 4e. Subtract line 5. . . . 874,451. **b** Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) d Subtract line 6c from line 6b. Taxable amount - see instructions . . . . . . . e Undistributed income for 2020. Subtract line 4a from line 2a. Taxable amount - see Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be 3,662. distributed in 2022. . . . . . . . . . . . Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be Excess distributions carryover from 2016 not 95,192. applied on line 5 or line 7 (see instructions) . . . . . .

779,259.

9

10

Analysis of line 9:

**a** Excess from 2017 . . . . . . . . **b** Excess from 2018 . . . . . . . . Excess from 2019 . . . . . . . .

d Excess from 2020 . . . . . . . . Excess from 2021 . . . . . . . .

Excess distributions carryover to 2022.

Subtract lines 7 and 8 from line 6a . . . . . . . . . . . . . . . .

362,209.

417,050

OPERATES & ALIGNED WITH ITS POLICY

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3 Grants and Contributions Paid During the Year or Recipient	If recipient is an individual,	<u>-</u>		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial continuitor	<del>                                     </del>		
FAMILES FIRST OF PALM BEACH COUNTY				
3333 FOREST HILL BLVD Ste. 2ND FLOOR				
WEST PALM BEACH, FL 33406			HELPING FAMAILIES	6,949
FLORENCE FULLER CHILD DEVELOPMENT CENTER 200 NE 14TH STREET BOCA RATON, FL 33432			AFFORDABLE CHILDCARE	25,000
CHRISTIANS REACHING OUT TO SOCIETY INC				
3677 23RD AVENUE SOUTH Ste. B-101 LAKE WORTH, FL 33461			SERVE THE HUNGRY	10,000
EL PASOANS FIGHTING HUNGER FOOD BANK 9541 PLAZA CIRCLE				
EL PASO, TX 79927			FIGHTING HUNGER	50,000
SECOND HARVEST FOOD BANK OF SOUTHERN WISCONSIN 2802 DAIRY DRIVE MADISON, WI 53718			FIGHTING HUNGER	20,000
HUNGER TASK FORCE INC 5000 W ELECTRIC AVENUE MILWAUKEE, WI 53219			FIGHTING HUNGER	50,000
FEEDING AMERICA 161 NORTH CLARK STREET Ste. 700 CHICAGO, IL 60601			FIGHTING HUNGER	26,506
FAYETTEVILLE URBAN MINISTRY INC. 701 WHITFIELD STREET FAYETTEVILLE, NC 28306			COMMUNITY ASSISTANCE	30,000
Total				416,655
<b>b</b> Approved for future payment				110,000

**Analysis of Income-Producing Activities** Part XV-A Enter gross amounts unless otherwise indicated. Unrelated business income Excluded by section 512, 513, or 514 (e) Related or exempt (d) (a) (c) function income Business code Amount Exclusion code Amount (See instructions.) 1 Program service revenue: С d е f Fees and contracts from government agencies g Interest on savings and temporary cash investments . . . . Net rental income or (loss) from real estate: Net rental income or (loss) from personal property . . . . . Gain or (loss) from sales of assets other than inventory Gross profit or (loss) from sales of inventory. . . . . . . . . Other revenue: a b 12 Subtotal. Add columns (b), (d), and (e) . . . . . . . . . (See worksheet in line 13 instructions to verify calculations.) Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment ▼ of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

## Form 990-PF (2021) Jose Antonio Grifols Lucas Foundation Inc. 26-2296884 Page 13 Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

1		•	, , , ,	ge in any of the following in section 527, relating	, ,		in section 501(c)		Yes	No
а	Trar	sfers from the reporti	ing foundation to a n	oncharitable exempt orga	anization of					
•			=					1a(1)		х
										X
b		er transactions:						. (2)		
			oncharitable evemnt	organization				1b(1)		х
			•	exempt organization						X
				sets						X
		•	•							X
			=							X
		•		r fundraising solicitation				_ ` `		X
_				=						X
c C		-	=	other assets, or paid emp replete the following sche	=					
d				-				-		
				g foundation. If the found			alue in any transaction	or snan	ing	
(a) I	ine no.	(b) Amount involved		the goods, other assets, ncharitable exempt organiz			ers, transactions, and sha	oring orr	angom	
(a) L	ille 110.	(b) Amount involved	(C) Name of no	nchantable exempt organiz	auon (u)	Description of transfe	ers, transactions, and sin	anny am	angeme	31118
2 a	Is th	e foundation directly of	or indirectly affiliated	with, or related to, one o	r more tax-exempt	organizations desc	ribed in section 501(c)			
	(oth	er than section 501(c)	)(3)) or in section 527	7?			[	Yes		No
b	If "Y	es," complete the follo	owing schedule.							
		(a) Name of orga	anization	(b) Type o	f organization	(c)	Description of relation	ship		
				ned this return, including accor than taxpayer) is based on all i						
Sigr	1   K	oonoot, and oomplote. Book	naranen er proparer (enrer	anan anpayon, to bacca on an i	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	and mad any midmidag	May the IR the prepare			
Here	₽				Board	Member	instructions			
	"	Signature of officer or tr	rustee	Date	Title			Y	es 🗌	No
Paid	1	Print/Type preparer's	s name	Preparer's signature		Date	Check if	PTIN		
	oarer						self-employed			
-	Only	Firm's name		·			Firm's EIN			
	y	Firm's address ▶					Phone no.			

#### Schedule B (Form 990)

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

**Employer identification number** 

26-2296884

Department of the Treasury Internal Revenue Service Name of the organization

Jose Antonio Grifols Lucas Foundation Inc.

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 

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

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

Employer identification number

### Jose Antonio Grifols Lucas Foundation Inc.

26-2296884

Part I	Contributors (see instructions). Use duplicate co	pies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Grifols USA LLC  2410 Lillyvale Avenue  Los Angeles, CA 90032	\$\$	Person X Payroll 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
		<b>\$</b>	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person

#### Name of organization Employer identification number Jose Antonio Grifols Lucas Foundation Inc. 26-2296884

Part II	Noncash (see instructions). Use duplicate copies	of Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Schedule B (Form 990) (2021) Name of organization **Employer identification number** Jose Antonio Grifols Lucas Foundation Inc. 26-2296884 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift from (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift from (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

# Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, founda	ation managers	and their compe	ensation (see ins	structions).
(a) Name and address of each employee paid more than \$50,000		(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allow ances
5 Vlasta Hakes	Board Member	\$		
1775 Pennsylvania Ave NW Ste. 20	0.000000	0.	0.	0.
6	0.000000	0.	0.	0.
	0.000000	0.	0.	0.
7	0.000000	0.	0.	0.
8				
	0.000000	0.	0.	0.
9	0.000000	0.	0.	0.
10				_
	0.000000	0.	0.	0.
11	0.000000	0.	0.	0.
12				
	0.000000	0.	0.	0.
13	0.000000	0.	0.	0.
14				
	0.000000	0.	0.	0.
15	0.000000	0.	0.	0.
16				
	10/03/22 01:5	4PM		

	0.00000	0.	0.	0.
17				
	0.00000	0.	0.	0.
	0.00000			
18				
	0.00000	0.	0.	0.
19				
	0.00000	0.	0.	0.
20				
	0.000000	0.	0.	0.
21				
	0.00000	0.	0.	0.
22				
22		_	_	_
	0.000000	0.	0.	0.
23				
	0.00000	0.	0.	0.
24				
23		•	•	•
	0.000000	0.	0.	0.
25				
	0.00000	0.	0.	0.
26				
	0.00000	0	0	0
	0.00000	0.	0.	0.
27				
	0.00000	0.	0.	0.
28				
-	0.00000	0.	0.	0
	0.00000	<b>J.</b>	<b>U.</b>	0.
29				
	0.000000	0.	0.	0.

3 Grants and Contributions Paid During the Year of Recipient	1			
·	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	- roo.p.o		
a Paid during the year				
THREE SQUARE 4190 N PECOS ROAD				
LAS VEGAS, NV 89115			FIGHTING HUNGER	25,000
IAS VEGAS, NV 09113			FIGHTING HONGER	23,000
THE SHADE TREE INCORPORATED				
1 W OWENS AVENUE				
NORTH LAS VEGAS, NV 89030			PROVIDE SAFE SHELTER TO HOMELESS AND A	50,000
·				,
DOWNTOWN HAMPTON CHILD DEVELOPMENT CENTER				
1306 THOMAS STREET				
HAMPTON, VA 23669			CHILD DEVELOPMENT	25,000
SCHOOL FUEL				
448 IGNACIO BLVD				
NOVATO, CA 94949			SUPPORT STUDENT EDUCATION	23,200
CLEAD DAME HOD LIMMEDING NIGHT INCLAND				
CLEAR PATH FOR VETERNS NEW ENGLAND 84 ANTIETAM STREET				
DEVENS, MA 01434			SUPPORT WELLNESS OF VETERANS	25,000
Divino, in 01434			SOFFORI WELLINESS OF VETERANS	23,000
COMPREHENSIVE COMMUNITY ACTION INC				
301 DORIC AVENUE				
CRANSTON, RI 02910			FIGHTING WAR ON POVERTY	25,000
,				,
SOUTHERN MASSACHUSETTS SER JOBS				
164 BEDFORD STREET				
FALL RIVER, MA 02720			SOCIAL SERVICES	25,000
Total				
b Approved for future payment				
Total	I	1	▶ 3b	1