Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



AF	or the	e 2023 calendar year, or tax year beginning and	dending		
B c a	heck if oplicabl	c Name of organization		D Employer identifie	cation number
	Addre chang	RUST FOUNDATION			
	Name chang	e Doing business as		85-43769	74
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/su	ite E Telephone number	r
	Final return		11976	302-219-	
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,521,299.
	Amen	DOVER, DE 19901		H(a) Is this a group re	
	Applic tion	F Name and address of principal officer: REBECCA RUMBUL		for subordinates	? Yes X No
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
<u> </u>]	ax-ex	empt status: 501(c)(3) X 501(c)(6) (insert no.) 4947(a)(1)	or 5	527 If "No," attach a	list. See instructions
	Vebsi			H(c) Group exemptio	
		organization: X Corporation Trust Association Other	LY	ear of formation: 2021 N	I State of legal domicile: DE
Pa	rt I	Summary			
ė	1	Briefly describe the organization's mission or most significant activities: THE			
anc		FOUNDATION IS TO: (A) SUPPORT AND PROMOTI			
Activities & Governance		Check this box if the organization discontinued its operations or dispo			
Š					<u> </u>
ن ه		Number of independent voting members of the governing body (Part VI, line 1b)			
ies		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			<u> </u>
tivit		Total number of volunteers (estimate if necessary)			0.
Act					0.
	a	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		Current Year
	•	Contributions and grants (Dart) (III line 1b)	-	1,127,676.	600,257.
ne		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	Г	1,691,167.	1,921,042.
Revenue		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
Be		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,818,843.	2,521,299.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		411,973.	417,568.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		815,559.	2,032,146.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ben		Total fundraising expenses (Part IX, column (D), line 25)	0.	-	
ы		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		704,165.	625,227.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,931,697.	3,074,941.
		Revenue less expenses. Subtract line 18 from line 12		887,146.	-553,642.
or		· · · · · · · · · · · · · · · · · · ·		Beginning of Current Year	End of Year
Assets d Balanc		Total assets (Part X, line 16)	Γ	2,993,908.	3,736,867.
Ass		Total liabilities (Part X, line 26)		657,958.	1,931,559.
[Net		Net assets or fund balances. Subtract line 21 from line 20		2,335,950.	1,805,308.
D					

Part II Signature Block

T

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

Sign	Signature of officer				Date						
Here	REBECCA RUMBUL, EXECUTIVE	DIRECTOR									
	Type or print name and title										
	Print/Type preparer's name	Preparer's signature		Date	Check	PTIN					
Paid	GLENN MILLER, CPA	GLENN MILLER	, CPA	11/12	/24 self-employed	₽00086726					
Preparer	Firm's name WEGNER CPAS LLP				Firm's EIN 39-	0974031					
Use Only	Firm's address 419 N LEE ST										
	ALEXANDRIA, VA 22	314-2301			Phone no. (703) 519-0990					
May the IF	May the IRS discuss this return with the preparer shown above? See instructions										
LHA For	HA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)										

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2023) RUST FOUNDATION 85-4376974 Page 2	2
Par		_
	Check if Schedule O contains a response or note to any line in this Part III]
1	Briefly describe the organization's mission:	
	THE PRIMARY PURPOSE OF THE RUST FOUNDATION IS TO: (A) SUPPORT AND	
	PROMOTE THE RUST PROJECT, WHICH IS THE PRINCIPAL DEVELOPER OF THE RUST	_
	PROGRAMMING LANGUAGE, (B) SUPPORT THE PROMOTION, MAINTENANCE AND	_
	DEVELOPMENT, AND SECURITY OF THE RUST PROGRAMMING LANGUAGE AND OTHER	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?Yes X No	כ
	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?)
_	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	
4.0	revenue, if any, for each program service reported.	_
4a	(Code:) (Expenses \$ including grants of \$) (Revenue \$) THE SECURITY INITIATIVE WAS DEVELOPED TO IMPROVE THE SECURITY OF THE	.)
	RUST ECOSYSTEM, FOR THE BENEFIT OF ALL USERS OF THE RUST PROGRAMMING	—
	LANGUAGE. THE INITIATIVE IS A GLOBAL EFFORT AND HAS ENGAGED	—
	STAKEHOLDERS FROM ACROSS INDUSTRY AND FROM AROUND THE WORLD. ACTIVITIES	—
	UNDERTAKEN INCLUDED INVESTING IN THREAT MODELING, DEVELOPING RISK	—
	ASSESSMENTS AND THE DEVELOPMENT OF TOOLING, FEATURES, AND PROCESSES TO	—
	MITIGATE OR ELIMINATE SECURITY THREATS. THIS INITIATIVE HAS DEVELOPED	_
	FOUR THREAT MODELS, TWO OPEN-SOURCE PROJECTS AIMED AT IMPROVING	_
	SECURITY WITHIN THE ECOSYSTEM AND WORKED WITH PROJECT TEAMS ACROSS THE	_
	ECOSYSTEM TO AGREE AND IMPLEMENT ROBUST APPROACHES TO SECURITY BY	_
	DESIGN.	_
		_
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	THE COMMUNITY GRANTS PROGRAM IS A CORNERSTONE INITIATIVE AT THE RUST	
	FOUNDATION WITH GOALS OF PROVIDING FINANCIAL AND PRACTICAL SUPPORT FOR	
	EXISTING TALENT IN THE RUST ECOSYSTEM, GROWING THE IMPACT OF THE WORK	
	OF MAINTAINERS, AND CREATING WIDER OPPORTUNITIES FOR THOSE PASSIONATE	_
	ABOUT RUST. THE FOUNDATION RECEIVED SIGNIFICANT FUNDING FROM FOUNDING	_
	MEMBERS AND ORGANIZATIONS INTERESTED IN SUPPORTING THE CGP, WHICH	_
	LAUNCHED IN APRIL 2022, AND CONTINUED INTO 2023. THERE WERE OVER 100	_
	APPLICATIONS FOR RUST FOUNDATION FELLOWSHIPS IN 2023, WITH 13 AWARDS	
	BEING MADE. A FURTHER 8 EVENT SUPPORT GRANTS AND 2 HARDSHIP GRANTS WERE	
	ALSO MADE IN THE YEAR. THE CGP HAS ACHIEVED SIGNIFICANT IMPACT AMONGST	_
	INDIVIDUAL GRANTEES THROUGH IMPROVED CAREER PROSPECTS AND NETWORKS, AND	_
4	THE IMPACT UPON THE WIDER ECOSYSTEM HAS BEEN TO ENSURE THAT INNOVATIVE	_
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$) THE FOUNDATION EXISTS TO SUPPORT THE RUST PROJECT AND ECOSYSTEM, TO	,)
	ENSURE THAT THE RUST PROGRAMMING LANGUAGE IS ROBUST AND FIT FOR	—
	PURPOSE. THE FOUNDATION PROVIDED SUPPORT TO THE MAINTENANCE AND	—
	DEVELOPMENT OF THE RUST PROGRAMMING LANGUAGE THROUGH THE PROVISION OF	—
	CLOUD COMPUTING RESOURCES, THE TECHNICAL INFRASTRUCTURE TO SUPPORT THE	—
	LIBRARY AND COMPILER, PROVIDED AN ON-CALL CONTRACT SERVICE FOR THE	—
	CRATES SERVICE, AND MEDIATION SERVICES TO ASSIST IN THE DEVELOPMENT OF	—
	THE RUST PROJECT'S COMMUNITY INTERACTIONS AND GOVERNANCE. IN 2023 THE	—
	FOUNDATION HIRED 2 X SOFTWARE ENGINEERS TO WORK DIRECTLY WITH THE RUST	—
	PROJECT'S VOLUNTEER MAINTAINERS, TO SAFEGUARD AND SECURE THE CRATES AND	-
	LIBRARIES, TO INTEGRATE SECURITY IMPROVEMENTS ACROSS THE ECOSYSTEM, AND	_
	TO DEVELOP AUTOMATED TOOLS AND DEVELOPER FEATURES THAT MEANINGFULLY	-
4d	Other program services (Describe on Schedule O.)	_
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses	_
	Form 990 (202	3)
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	3	

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 RUST
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 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		<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-	х	
6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			- 21
0	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
5	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes, " complete			
	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13	x	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u>^</u>	<u> </u>
α	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	14b	х	
15	or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		43	
10	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	х	
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		х
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? <i>If</i> "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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		Х
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 RUST
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 Part IV
 Checklist of Required Schedules (continued)

			Vee	
22	Did the examination report more than \$5,000 of grants or other exciptance to or for demostic individuals on		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22	х	
23	Part IX, column (A), line 2? <i>If</i> "Yes," <i>complete Schedule I, Parts I and III</i> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	22		<u> </u>
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
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
27	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	26		
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
~~	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	0		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34		34		x
35a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
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?			
De	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 5 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
U	(gambling) winnings to prize winners?	1c		
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	990 (2023) RUST FOUNDATION		85-4376	974	P	_{age} 5	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				Yes		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		I		res	No	
Lu	filed for the calendar year ending with or within the year covered by this return	2a	3				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	Х		
				3a		X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b			
	At any time during the calendar year, did the organization have an interest in, or a signature or other a		ty over, a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccour	nt)?	4a		X	
b	If "Yes," enter the name of the foreign country						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad	ccoun	ts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u>		X	
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact			5b		X	
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			<u>5c</u>		<u> </u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	nization solicit		37		
	any contributions that were not tax deductible as charitable contributions?			<u>6a</u>	X	<u> </u>	
b	If "Yes," did the organization include with every solicitation an express statement that such contribution				v		
_	were not tax deductible?			6b	X		
7	Organizations that may receive deductible contributions under section 170(c).		non violand to the manuar O				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser			7a		<u> </u>	
			uirad	7b		<u> </u>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa to file Form 8282?	is requ	ured	70			
А		7d		7c			
	If "Yes," indicate the number of Forms 8282 filed during the year		 +2	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, or a personal benefit contra		t?	76 7f			
	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g			
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			79 7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained						
-	sponsoring organization have excess business holdings at any time during the year?						
9	Sponsoring organizations maintaining donor advised funds.						
				9a			
				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.)	11b					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	?	12a			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?			13a			
	Note: See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the	405	I				
-	organization is licensed to issue qualified health plans	13b					
	Enter the amount of reserves on hand	13c	I	14a		x	
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14a 14b		<u> </u>	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner						
.0	excess parachute payment(s) during the year?			15		x	
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incor	ne?	16		х	
	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 ac	tivities	5				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17			
	If "Yes," complete Form 6069.						
332005	12-21-23			Form	990	(2023)	

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-	990 (2023) RUST FOUNDATION 85-4376		F	'ag
Pa	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a	a "No" i	respor	ise
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			
Sec	tion A. Governing Body and Management			Т
1-	Enter the number of voting members of the governing body at the end of the tax year 11		Yes	┝
Id		-		
	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 0. Enter the number of voting members included on line 1a, above, who are independent 1b 11			
b	5	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			Ľ
~	officer, director, trustee, or key employee?	2		╀
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	3	х	L
4	of officers, directors, trustees, or key employees to a management company or other person?	4	X	┢
4		4	л	╀
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6	Х	╞
6 7-	Did the organization have members or stockholders?	6	~	╀
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		х	
	more members of the governing body?	7a	~	┝
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
~	persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	•	x	ſ
a	The governing body?	8a	X	╀
b	Each committee with authority to act on behalf of the governing body?	8b	~	╀
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			L
800	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		
500	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Vee	Т
10-	Did the organization have local chapters, branches, or affiliates?	10a	Yes	╀
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		╉
b		10b		
112	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	t
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			t
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	Г
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	t
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes." <i>describe</i>			t
Ū		12c	х	L
13	on Schedule O how this was done Did the organization have a written whistleblower policy?	13		t
14	Did the organization have a written document retention and destruction policy?	14		t
15	Did the process for determining compensation of the following persons include a review and approval by independent	17		t
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	Г
	Other officers or key employees of the organization	15a	X	t
D.	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			t
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
104	taxable entity during the year?	16a		Г
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		t
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		Г
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availa	h
	for public inspection. Indicate how you made these available. Check all that apply.	o oniy)	avana	
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
_0	ABI BROOM - 302-219-7361			
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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	X								
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.									

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."

RUST FOUNDATION

• 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.

Form 990 (2023)

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

Name and title Average hours per week used metaboling biology and an analysis of the biology and an analysis of the organization biology and an analysis of the organization (V2/1098-NEC) Reportable compension train organization (V2/1098-NEC) Estimated and and of the organization (V2/1098-NEC) Estimated and and of the organization (V2/1098-NEC) Estimated and and of the organization (V2/1098-NEC) Estimated and and of the organization (1) MALTER PEARCE 40.000 X X 261,741. 0. 16,191. (3) SARCHE DEBORGY 40.000 X X 243,628. 0. 14,139. (3) GRACHE DEBORGY 40.000 X X 0. 0. 0. (3) GRACHE DEBORGY 40.000 X X 0. 0. 0. (4) LARS PERGETROM 5.00 X X 0. 0. 0. (5) NELL SHIMPELL-HARRINGTON 2.50 X X 0. 0. 0. (6) ANDW NAFAA 2.50 X X 0. 0. 0. (7) MARE ROUSSEROV 2.50	(A)	(B)	(C)					(D)	(E)	(F)	
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(16) JOSH STONE 2.50 X 0. 0. 0. 0. DIRECTOR (THRU 9/2023) X 0. 0. 0. 0. 0. (17) TYLER MANDRY 2.50 X 0. 0. 0. 0. DIRECTOR (THRU 9/2023) X 0. 0. 0. 0.		2.50									
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(17) TYLER MANDRY 2.50 X 0. 0. 0.		2.50									
DIRECTOR (THRU 9/2023) X 0. 0.			Х						0.	0.	0.
	(17) TYLER MANDRY	2.50									_
	DIRECTOR (THRU 9/2023)		Х						0.	0.	

8

332007 12-21-23

Form **990** (2023)

85-4376974

Page 7

Form 990 (2023) RUST FOUL	IDATION								85-43	<u>8769</u>	974	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	ees, a	and	Hig	phest	: C	ompensated Employee	s (continued)			
(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			than or both	an	(D) Reportable compensation from	(E) Reportable compensation from related	Estir amo ot	F) mated unt of ther		
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)	I	fror organ and r	ensation n the nization related izations
(18) JANE LOSARE-LUSBY DIRECTOR (THRU 9/2023)	2.50	x						0.		0.		0.
(19) REBECCA RUMBUL	37.50											
EXECUTIVE DIRECTOR				X				0.		0.		0.
(20) PAUL LENZ DIRECTOR OF FINANCE & FUNDING	30.00			x				0.		0.		0.
(21) ADAM HARVEY	40.00											
SOFTWARE ENGINEER (FROM 2/2023)						х		0.		0.		0.
(22) ABI BROOM DIRECTOR OF OPERATIONS	38.00					x		0.		0.		0.
1b Subtotal								641,468.		0.	44	,574.
c Total from continuation sheets to Part VI	I, Section A							0.641,468.		0.	11	0.
 <u>d</u> Total (add lines 1b and 1c) 2 Total number of individuals (including but n 							o re		000 of reportable		44	, 574.
compensation from the organization					,			. ,	•			9
3 Did the organization list any former officer,	director trust	e k	ev er	molo	over	e or l	hia	hest compensated empl	ovee on	ſ	Y	'es No
line 1a? If "Yes," complete Schedule J for s	uch individual								•		3	X
4 For any individual listed on line 1a, is the su and related organizations greater than \$150											4	x
5 Did any person listed on line 1a receive or a												
rendered to the organization? <i>If "Yes," com</i> Section B. Independent Contractors	plete Schedule	e J fo	or suc	ch p	berso	on					5	X
1 Complete this table for your five highest co	mpensated ind	lepei	nden	t co	ontra	ictors	s th	nat received more than \$	100,000 of comp	ensat	ion from	 ו
the organization. Report compensation for	the calendar ye	ear e	nding	g wi	ith o	r witl	hin T		ear.		(0)	
(A) Name and business	address							(B) Description of s	ervices	C	(C) ompens	ation
SAGE ROSLEY GRIFFIN		Ţ	NTN	л (07'	100					100	100
333 MONTCLAIRE DR NE, ALE	OQUERQU	<u>c,</u>	INI	4 0	07.	109	<u>,</u>	COMMUNITIES 2	ADVOCATE		100	<u>,100.</u>
2 Total number of independent contraction "		~+ 1:	aita -	+~ '	-bo-	olict			vro thos			
 Total number of independent contractors (ii \$100,000 of compensation from the organi; 		JUIN	med	io t	1	e list	ea	above) who received mo			- O	20 (2022)

332008 12-21-23

		(2023) RUST FOUNDA	TION			85-4376	974 Page 9
Pa	rt VI	II Statement of Revenue					
		Check if Schedule O contains a respo	nse or note to a	ny line in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ស ស	1 a	a Federated campaigns 1a					
ran	k	Membership dues 1b					
N G	c	Fundraising events					
ar A	c	d Related organizations 11					
s, C	e	e Government grants (contributions) 1e					
tion sr S	f	All other contributions, gifts, grants, and					
Contributions, Gifts, Grants and Other Similar Amounts		similar amounts not included above 1f	600,25	57.			
onti od C	ç	D Noncash contributions included in lines 1a-1f		COO 057			
<u> </u>	ł	n Total. Add lines 1a-1f		600,257.			
	•	MEMBERSHIP DUES	Business 0		1 021 042		
Program Service Revenue	28			<u>99 I,92I,042.</u>	1,921,042.		
Serv	k c						
m Ser		c					
Be	e						
Pro	f	All other program service revenue					
	ç	g Total. Add lines 2a-2f		1,921,042.			
	3	Investment income (including dividends, in					
		other similar amounts)					
	4	Income from investment of tax-exempt bor	nd proceeds				
	5	Royalties					
		(i) Real	(ii) Perso	onal			
	6 a						
		b Less: rental expenses 6b					
		c Rental income or (loss)					
		A Net rental income or (loss) Gross amount from sales of (i) Securiti	es (ii) Oth	 er			
	1 6	a closs amount norm sales of a close and a					
	ł	b Less: cost or other basis					
e	~	and sales expenses					
evenue	c	c Gain or (loss)					
		d Net gain or (loss)	•				
Other R		a Gross income from fundraising events (not					
Ð		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18	8a				
		b Less: direct expenses	8b				
		Net income or (loss) from fundraising even					
	9 8	a Gross income from gaming activities. See					
	L	Part IV, line 19	9a 9b				
		 Less: direct expenses Net income or (loss) from gaming activities 	·				
		a Gross sales of inventory, less returns	,				
			10a				
	k	Less: cost of goods sold	10b				
		Net income or (loss) from sales of inventor	·				
6			Business (
Miscellaneous Revenue	11 a	a					
scellaneo Revenue	t	D					ļ
cell Seve	-	e					
Mis		d All other revenue					
		Total. Add lines 11a-11d			1 021 042	0.	0.
00011	12	Total revenue. See instructions		<u>6,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,921,042.		Form 990 (2023
332009	y 12-2	1-23					FULLI 330 (202

RUST FOUNDATION Part IX Statement of Functional Expenses

Check if Schedule O contains a respons			(C)	(D)
not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21				
Grants and other assistance to domestic				
individuals. See Part IV, line 22	156,115.			
Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16	261,453.			
Benefits paid to or for members				
Compensation of current officers, directors,				
trustees, and key employees	490,727.			
Compensation not included above to disqualified				
persons (as defined under section $4958(f)(1)$) and				
persons described in section 4958(c)(3)(B)				
Other salaries and wages	1,315,231.			
Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)				
Other employee benefits	59,192.			
Payroll taxes	166,996.			
Fees for services (nonemployees):				
a Management				
D Legal	44,859.			
Accounting	4,320.			
d Lobbying				
Professional fundraising services. See Part IV, line 17				
Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25,				
column (A), amount, list line 11g expenses on Sch 0.)	43,942.			
Advertising and promotion	36,141.			
Office expenses	2,583.			
Information technology	11,642.			
Royalties				
Occupancy				
Travel	130,584.			
Payments of travel or entertainment expenses				
for any federal, state, or local public officials \dots				
Conferences, conventions, and meetings	84,944.			
Interest				
Payments to affiliates				
Depreciation, depletion, and amortization	4,995.			
Insurance	11,102.			
Other expenses. Itemize expenses not covered				
above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
amount, list line 24e expenses on Schedule O.)				
RUST PROJECT	235,187.			
BAD DEBT EXPENSE	5,000.			
[
All other expenses	9,928.			
Total functional expenses. Add lines 1 through 24e	3,074,941.			
Joint costs. Complete this line only if the organization	-			
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.				
Check here if following SOP 98-2 (ASC 958-720)				

RUST FOUNDATION

85-4376974 Page 11

	Λ	Check if Schedule O contains a response or note to any lin	e in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		2,025,404.	1	921,617.
	2	Savings and temporary cash investments		0.	2	2,700,000.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		950,000.	4	90,000
	5	Loans and other receivables from any current or former offi				
		trustee, key employee, creator or founder, substantial cont				
		controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified person				
		under section 4958(f)(1)), and persons described in section			6	
s	7	Notes and loans receivable, net	Г		7	
Assets	8	Inventories for sale or use			8	
As	9	–		8,037.	9	15,937
- I ·	10a	Land, buildings, and equipment: cost or other	Γ			
		basis. Complete Part VI of Schedule D 10a	16,585.			
	b	Less: accumulated depreciation 10b	7,272.	10,467.	10c	9,313
.	11	Investments - publicly traded securities		-	11	
	12	Investments - other securities. See Part IV, line 11			12	
.	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		2,993,908.	16	3,736,867
	17	Accounts payable and accrued expenses		25,791.	17	17,184
	18	Grants payable		126,000.	18	82,000
	19	Deferred revenue		506,167.	19	1,832,375
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of S			21	
	22	Loans and other payables to any current or former officer, o				
Liabilities		trustee, key employee, creator or founder, substantial contra				
pili		controlled entity or family member of any of these persons			22	
Lia	23	Secured mortgages and notes payable to unrelated third pa	F		23	
	24	Unsecured notes and loans payable to unrelated third parti			24	
	25	Other liabilities (including federal income tax, payables to re				
1	20	parties, and other liabilities not included on lines 17-24). Co				
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		657,958.	26	1,931,559
	20	Organizations that follow FASB ASC 958, check here	X		20	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
es		and complete lines 27, 28, 32, and 33.				
ů l	27			2,335,950.	27	938,014
3ale	28	Net assets with donor restrictions	Г	0.	28	867,294
<u>6</u> ,	20	Organizations that do not follow FASB ASC 958, check			20	
Net Assets or Fund Balances		and complete lines 29 through 33.				
۶ d	29	Capital stock or trust principal, or current funds			29	
ts t	29 30	Paid-in or capital surplus, or land, building, or equipment fu			30	
lss []	30 31		F		31	
; et/	31 32	Retained earnings, endowment, accumulated income, or of		2,335,950.	31	1,805,308
_	32 33	Total net assets or fund balances		2,993,908.	 33	3,736,867
	00			2,555,500.	აა	Form 990 (202)

Form **990** (2023)

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Form 990 (2023)
Part X Balance Sheet

Form	1990 (2023) RUST FOUNDATION	85-43	76974	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,521		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,074		
3	Revenue less expenses. Subtract line 2 from line 1	3	-553		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,335	,95	50.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	23	,00	00.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	1,805	, 30)8.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
2a			2 a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2 b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis 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				
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				37
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. <u>3a</u>		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				

Form **990** (2023)

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

Schedule of Contributors

OMB No. 1545-0047

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. 2023

Employer identification number

85-4376974

RUST FOUNDATI	ЛC
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Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(6) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

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

General Rule

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

Г

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under
sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one
contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h;
or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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).

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

Schedule B	(Form	990)	(2023)
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Name of organization

Employer identification number

RUST FOUNDATION

85-4376974

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	<u>N/A</u>	\$55,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	N/A	\$460,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3	<u>N/A</u>	\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
4	<u>N/A</u>	\$22,174.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
5	<u>N/A</u>	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
323452 12-26		\$	Person Payroll Complete Part II for noncash contributions.)			

Schedule B (Form 990) (2023)

	FOUNDATION	I	85-4376974
Part II	Noncash Property (see instructions). Use duplicate copies of Part I	I if additional space is needed.	1
(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) (2023)

16 2023.05000 RUST FOUNDATION

Employer identification number

Schedule B (Form 990) (2023)

Name of organization

Name of o	organization				Employer identification number			
RUST	FOUNDATION				85-4376974			
Part III	from any one contributor. Complete columns (a) through (e) and the followin	a line entry. For or	anizations				
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$	1,000 or less for th	e year. (Enter this info. o	nce.) \$			
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	ift	(d) Description of how gift is held				
		e) Transf	er of gift					
	Transferee's name, address, a			elationship of tra	nsferor to transferee			
(a) No.								
(a) No. from Part I	(b) Purpose of gift	ift	(d) Desc	ription of how gift is held				
		e) Transf	er of gift					
	Transformed a new second							
	Iransferee's name, address, a	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	ift (d) Des		scription of how gift is held			
		(a) Transf						
	(e) Transfer of gift							
	Transferee's name, address, a	Ind ZIP + 4	R	elationship of tra	nsferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	ift	(d) Desc	cription of how gift is held			
		e) Transf	er of gift					
	Transferee's name, address, a	Ind ZIP + 4	R	elationship of tra	nsferor to transferee			
				•				
000454 10 5					Cabadula D /Farra 000) (0000)			
323454 12-26	0-20				Schedule B (Form 990) (2023)			

SCHEDULE	С
(Form 990)	

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

• Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.

• Section 527 organizations: Complete Part I A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nan	ne of organization				Emplo	over identification number
	RUST FOUNDATION					85-4376974
Pa	rt I-A Complete if the org	anization is exempt und	er section 501(c) o	or is a section 52	27 org	anization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures				
Pa	rt I-B Complete if the org	anization is exempt unde	er section 501(c)(3	3).		
	Enter the amount of any excise tax					
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955		\$	
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?			Yes No
4a	Was a correction made?					Yes No
	If "Yes," describe in Part IV.					
Pa	art I-C Complete if the org	anization is exempt und	er section 501(c),	except section 5	501(c)	(3).
1	Enter the amount directly expended	l by the filing organization for see	ction 527 exempt funct	ion activities	\$	
2	Enter the amount of the filing organ	ization's funds contributed to oth	her organizations for se	ection 527		
	exempt function activities				\$	
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here a	nd on Form 1120-POL,			
	line 17b				\$	
4	Did the filing organization file Form	1120-POL for this year?				Yes No
5	Enter the names, addresses, and er	nployer identification number (El	N) of all section 527 pc	olitical organizations to	o which	the filing organization
	made payments. For each organization	tion listed, enter the amount paid	d from the filing organiz	ation's funds. Also en	iter the	amount of political
	contributions received that were pro-		· · ·		eparate	segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	ide information in Part	IV.		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid f filing organizatio funds. If none, ente	n's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2023

OMB No. 1545-0047

Open to Public

Inspection

23

LHA 332041 11-06-23

		FOUNDA			85-4	376974 Page 2	
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under							
section 501(h)).	section 501(h)).						
A Check if the filing organizat	ion belon	gs to an affi	liated group (and list ir	n Part IV each affiliated	group member's nam	e, address, EIN,	
expenses, and share	e of exces	s lobbying e	expenditures).				
B Check if the filing organizat	ion checł	ed box A ar	nd "limited control" pro	ovisions apply.			
	Limits on Lobbying Expenditures(a) Filing organization's totals(b) Affiliated group totals(The term "expenditures" means amounts paid or incurred.)totalstotals						
1a Total lobbying expenditures to influ	ence nub	lic opinion (arassroots lobbying)				
 b Total lobbying expenditures to influ 	•						
T		-	• • • •				
 c Total lobbying expenditures (add ling d Other exempt purpose expenditure 							
e Total exempt purpose expenditures							
f Lobbying nontaxable amount. Ente	•			h oolumpo			
			•				
If the amount on line 1e, column (a) or	(D) IS:		bying nontaxable am				
not over \$500,000,	000		the amount on line 1e.				
over \$500,000 but not over \$1,000,			00 plus 15% of the exc				
over \$1,000,000 but not over \$1,50			00 plus 10% of the exc				
over \$1,500,000 but not over \$17,0	00,000,		00 plus 5% of the exce	ss over \$1,500,000.			
over \$17,000,000,		\$1,000,	000.				
g Grassroots nontaxable amount (ent		,					
h Subtract line 1g from line 1a. If zero							
i Subtract line 1f from line 1c. If zero							
j If there is an amount other than zer		er line 1h or	line 1i, did the organiza	ation file Form 4720	ſ	—	
reporting section 4911 tax for this y	/ear?				[Yes No	
(Some organizations th		a section 5	eraging Period Under 01(h) election do not ate instructions for lin	have to complete all o	of the five columns be	elow.	
	Lob	bying Expe	nditures During 4-Yea	ar Averaging Period		_	
Calendar year (or fiscal year beginning in)	(a)	2020	(b) 2021	(c) 2022	(d) 2023	(e) Total	
2a Lobbying nontaxable amount							
b Lobbying ceiling amount							
(150% of line 2a, column(e))							
c Total lobbying expenditures							
d Grassroots nontaxable amount							
e Grassroots ceiling amount (150% of line 2d, column (e))							
f Grassroots lobbying expenditures							

Schedule C (Form 990) 2023

332042 11-06-23

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
	e lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
-	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	- E01(-)(E)		1	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 50 1(0)(5)	, or sec	lion	
	561(6)(6).			Yes	No
				165	X
1	Were substantially all (90% or more) dues received nondeductible by members?			x	Δ
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			A	x
3 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section		3 Or sec	tion	Δ
i ui	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."				3, is
1	Dues, assessments and similar amounts from members		. 1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
	Total				
3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		. 5		
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A,	lines 1 a	nd 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990) 2023

332043 11-06-23

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



Internal Revenue Service

Department of the Treasury

Nam	e of the organization RUST FOUNDATION		Employer identification number 85-4376974		
Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or A	ccounts. Complete if the		
	organization answered "Yes" on Form 990, Part IV, lir		e emprete in and		
	.	(a) Donor advised funds	(b) Funds and other accounts		
1	Total number at end of year		· · ·		
2	Aggregate value of contributions to (during year)				
3	Aggregate value of contributions to (during year)				
4	Aggregate value of grants norm (during year)				
- - 5	Did the organization inform all donors and donor advisors in		ode		
5	-	-			
6	are the organization's property, subject to the organization's		······································		
6	Did the organization inform all grantees, donors, and donor a for charitable purposes and not for the benefit of the donor of				
Pa	impermissible private benefit? t II Conservation Easements. Complete if the or				
1	Purpose(s) of conservation easements held by the organizati		,		
•	Preservation of land for public use (for example, recrea	-	orically important land area		
	Protection of natural habitat		tified historic structure		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a co	onservation easement on the last		
-	day of the tax year.		Held at the End of the Tax Year		
а			2a		
b			2b		
c	Number of conservation easements on a certified historic str		20		
d	Number of conservation easements included on line 2c acqu		20		
ŭ	on a historic structure listed in the National Register				
3	Number of conservation easements modified, transferred, rel				
-	year				
4	Number of states where property subject to conservation eas	sement is located			
5	Does the organization have a written policy regarding the per				
	violations, and enforcement of the conservation easements in		Yes No		
6	Staff and volunteer hours devoted to monitoring, inspecting,				
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation ea	asements during the year		
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(h)(4)(B)	(i)		
	and section 170(h)(4)(B)(ii)?				
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense stater	nent and		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statements th	nat describes the		
Da	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	f Art Historical Treasures or Other 9	Similar Assots		
Ta	Complete if the organization answered "Yes" on Form		Similar Assets.		
10	If the organization elected, as permitted under FASB ASC 95		lance aboat works		
Id	of art, historical treasures, or other similar assets held for pul				
	service, provide in Part XIII the text of the footnote to its final				
h			a abaat warka of		
b	If the organization elected, as permitted under FASB ASC 95				
	art, historical treasures, or other similar assets held for public	Semiption, education, or research in jurnierance			
	provide the following amounts relating to these items.		¢		
	(i) Revenue included on Form 990, Part VIII, line 1				
0		agurage or other similar accepts for financial gain			
2	If the organization received or held works of art, historical tree the following amounts required to be reported under EASP.		provide		
~	the following amounts required to be reported under FASB A Revenue included on Form 990, Part VIII, line 1	-	\$		
a h	Assets included in Form 990, Part X				
U			Ψ		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-28-23 21

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Sche		UNDATION							76974		age 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	rical Tre	easures, or	Other	Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check a	any of the t	following that	make sig	nificant us	se of its			
	collection items (check all that apply).										
а	Public exhibition	c	I 🗌 L	oan or exc	hange progra	m					
b	Scholarly research	e	, 🗌 c	Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explair	n how the	y further th	ne organizatio	n's exem	pt purpose	e in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations of	of art, hist	orical trea	sures, or othei	r similar a	assets				
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		te if the o	rganizatior	n answered "Y	′es" on F	orm 990, I	Part IV, li	ne 9, or		
1a	Is the organization an agent, trustee, custod	ian, or other intermed	diary for c	ontributior	ns or other ass	ets not i	ncluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
		·	0						Amount		
с	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F						y?		Yes		No
	If "Yes," explain the arrangement in Part XIII.]
Par	t V Endowment Funds Complete if	the organization and			1						
		(a) Current year	(b) Pri	ior year	(c) Two years	s back 🛛 🕻	d) Three ye	ars back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
с	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	•	e (line 1g,	column (a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
с		%									
	The percentages on lines 2a, 2b, and 2c sho										
3a	Are there endowment funds not in the posse	ession of the organiza	ation that	are held ar	nd administere	ed for the	9		Г	V	N
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)		
									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4 Par	Describe in Part XIII the intended uses of the t VI Land, Buildings, and Equipm		wment fu	nas.							
1 41	Complete if the organization answere) Part IV	line 11a S	See Form 990	Part X li	ine 10				
					,						
	Description of property	(a) Cost or c basis (investr		.,	t or other (other)	• •	cumulated reciation		(d) Book		•
1a	Land										
b	Buildings										
с	Leasehold improvements										
d	Equipment			1	.6,585.		7,27	2.	9),31	L3.
	Other								-		
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	<u>X, line 10</u>	c <u>, column</u>	<u>(B))</u>),31	
								مار بام مطمع	D) / E	000	~~~~

Schedule D (Form 990) 2023

332052 09-28-23

Schedule D (Form 9	90) 2023	RUST	FOUNDATION

Part VII Investments - Other Securities			
Complete if the organization answered "Yes" of	(b) Book value	(c) Method of valuation: Cost or end	l of your market yolyo
(a) Description of security or category (including name of security)	(b) BOOK value	(c) Method of Valuation. Cost of end	-or-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) The second se			
Total. (Column (b) must equal Form 990, Part X, line 25, col.	· <i>"</i>		

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

Schedule D (Form 990) 2023

332053 09-28-23

Sche	dule D (Form 990) 2023 RUST FOUNDATION		85-4376974 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Staten	nents With Reven	ue per Return
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	t XII Reconciliation of Expenses per Audited Financial State	ments With Exper	nses per Return
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2 a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		
Pa	t XIII Supplemental Information		

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

332054 09-28-23

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Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

3 Activities per Region. (TI			n be duplicated if additional space is n		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	 (d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region) 	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EUROPE (INCLUDING				CORE FINANCE,	
ICELAND & GREENLAND)				ADMINISTRATION AND	
- ALBANIA, ANDORRA,				EXECUTIVE TEAM MEMBERS,	
AUSTRIA, BELGIUM	1	5	PROGRAM SERVICES	PLUS TWO SOFTWARE	2,043,124.
EAST ASIA AND THE					
PACIFIC - AUSTRALIA,					
BRUNEI, BURMA,				VARIOUS GRANTS TO	
CAMBODIA,	0	0	PROGRAM SERVICES	RECIPIENTS	57,500.
EUROPE (INCLUDING					
ICELAND & GREENLAND)					
- ALBANIA, ANDORRA,				VARIOUS GRANTS TO	
AUSTRIA, BELGIUM	1	5	PROGRAM SERVICES	RECIPIENTS	153,705.
RUSSIA AND					
NEIGHBORING STATES -					
ARMENIA, AZERBIJAN,				VARIOUS GRANTS TO	
BELARUS,	0	0	PROGRAM SERVICES	RECIPIENTS	13,347.
SOUTH ASIA -					
AFGHANISTAN,					
BANGLADESH, BHUTAN,				VARIOUS GRANTS TO	
INDIA, MALDIVES,	0	0	PROGRAM SERVICES	RECIPIENTS	13,998.
SUB-SAHARAN AFRICA -					
ANGOLA, BENIN,					
BOTSWANA, BURKINA				VARIOUS GRANTS TO	
FASO,	0	0	PROGRAM SERVICES	RECIPIENTS	435.
NORTH AMERICA -					
CANADA AND MEXICO,					
BUT NOT THE UNITED				SOFTWARE ENGINEER BASED	
STATES	1	1	PROGRAM SERVICES	IN CANADA	171,051.
					, -
MIDDLE EAST AND				VARIOUS GRANTS TO	
NORTH AFRICA	0	0	PROGRAM SERVICES	RECIPIENTS	500.
	3	11			2,453,660.
3 a Subtotal					2,100,000.
b Total from continuation	1	1			21 969
sheets to Part I	<u> </u>				21,968.
c Totals (add lines 3a		12			2 475 629
and 3b)	4				2,475,628. (Form 990) 2023

SEE PART V FOR COLUMN (E) DESCRIPTIONS

For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the 2 I Inited States

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance,

the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Name of the organization

Form 990, Part IV, line 14b.

SCHEDULE F (Form 990)

Department of the Treasury

RUST FOUNDATION

Internal Revenue Service

Part I

Open to Public Inspection

OMB No. 1545-0047

Employer identification number

X Yes

No

85-4376974

Schedule F (Form 990) Part I Continuatio	RUST FOU	NDATION	• (Schedule F (Form 990), Part I, line 3	85-437697	74 Page
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
OUTH AMERICA	0	0	PROGRAM SERVICES	VARIOUS GRANTS TO RECIPIENTS	11,500
NORTH AMERICA	1	1	PROGRAM SERVICES	VARIOUS GRANTS TO RECIPIENTS	10,468
Totals	• 1	1			21,968

332181 04-01-23

Schedule F	(Form 990)	2023
oonoaano i		

27

Schedule F (Form 990) 2023	
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RUST FOUNDATION

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities .

85-4376974

Schedule F (Form 990) 2023

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	EAST ASIA AND THE						
	PACIFIC -						
	AUSTRALIA,						
FELLOWSHIP GRANTS	BRUNEI, BURMA,	3	38,000.	BANK TRANSFER	0.		
	EUROPE (INCLUDING						
	ICELAND &						
	GREENLAND) -						
FELLOWSHIP GRANTS	ALBANIA, ANDORRA,	9	52,805.	BANK TRANSFER	0.		
	RUSSIA AND		,				
	NEIGHBORING						
	STATES - ARMENIA,						
FELLOWSHIP GRANTS	, AZERBIJAN,	1	13,347.	BANK TRANSFER	0.		
	SOUTH ASIA -		,				
	AFGHANISTAN,						
	, BANGLADESH,						
FELLOWSHIP GRANTS	, BHUTAN, INDIA,	1	13,998.	BANK TRANSFER	0.		
	EUROPE (INCLUDING ICELAND &						
EVENT SUPPORT GRANT	GREENLAND)	3	1,400.	BANK TRANSFER	0.		
EVENT SUPPORT GRANT	MIDDLE EAST AND NORTH AFRICA	1	500.	BANK TRANSFER	0.		
EVENT SUPPORT GRANT	NORTH AMERICA	1	468.	BANK TRANSFER	0.		
	SUB-SAHARAN		435	BANK TRANSFER			
EVENT SUPPORT GRANT	AFRICA	2	435.	DANK TRANSFER	0.		
	EUROPE (INCLUDING ICELAND &						
HARDSHIP GRANT	GREENLAND)	1	1,500.	BANK TRANSFER	0.		1

Schedule F (Form 990) 2023

	RUST FOUNDATI		do the United C	totoo (Sobodulo E /Forme 000	85-4376974		Page
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	tates. (Schedule F (Form 990 (e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other
			1 500				
ARDSHIP GRANT	SOUTH AMERICA	1	1,500.	BANK TRANSFER	0.		
PROJECT GRANT	EAST ASIA AND THE PACIFIC	3	19,500.	BANK TRANSFER	0.		
	EUROPE (INCLUDING ICELAND &						
PROJECT GRANT	GREENLAND)	11	98,000.	BANK TRANSFER	0.		
PROJECT GRANT	NORTH AMERICA	2	10,000.	BANK TRANSFER	0.		
PROJECT GRANT	SOUTH AMERICA	1	10,000.	BANK TRANSFER	0.		

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)</i>	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)</i>	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023 RUST FOUNDATION

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

ALL OF OUR GRANT RECIPIENTS SIGN GRANT AGREEMENTS REQUIRING TO REPORT

UPON THEIR GRANT PROGRESS - AND ONGOING GRANT PAYMENTS ARE DEPENDENT UPON

THE SUCCESSFUL COMPLETION OF THE REPORTING REQUIREMENTS. ADDITIONALLY

REGULAR ARE HELD WITH GRANTEES TO CHECK UPON THEIR PROGRESS. AS OUR WORK

IS FOCUSED UPON THE OPEN-SOURCE PROGRAMMING LANGUAGE RUST, IT IS ALSO

POSSIBLE FOR US TO INDEPENDENTLY CHECK UPON THE WORK OF GRANTEES THROUGH

THEIR PUBLIC, OPEN-SOURCE, CONTRIBUTIONS, PUBLIC RECORDS OF EVENTS,

PUBLICATIONS ETCETERA.

PART I, LINE 3:

EXPENDITURES ARE ACCOUNTED FOR ON THE ACCRUAL BASIS.

PART I, LINE 3, COLUMN (E):

(A) REGION:

EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIU

(E) SPECIFIC TYPES OF SERVICES IN REGION: CORE FINANCE, ADMINISTRATION

AND EXECUTIVE TEAM MEMBERS, PLUS TWO SOFTWARE ENGINEERS, ARE BASED IN

EUROPE.

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Schedule F (Form 990) 2023

SCHEDULE I		G	rants and Oth	er Assistan	ce to Organ	izations,		OMB No.	1545-0047	
(Form 990)		Go	vernments, an ete if the organizatio	nd Individual	ls in the Ŭni	ted States		20	23	
Department of the Treasury		Compr		Attach to Forn				Open t	o Public	
Internal Revenue Service										
Name of the organizat	ion							Employer identificati	on number	
	RUST FOUN	DATION						85-43	76974	
Part I General I	nformation on Grants a	nd Assistance								
1 Does the organiz	zation maintain records t	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selecti			
	award the grants or assis							X Yes	No	
	IV the organization's pro									
	d Other Assistance to I hat received more than \$					anization answered "Y	es" on Form 990, Par	t IV, line 21, for any		
1 (a) Name and ad	ddress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash	(f) Method of valuation (book, FMV, appraisal,	(g) Description of noncash assistance	(h) Purpose of or assistant		
					assistance	other)				

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table ...

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2023

Schedule I (Form 990) 2023

RUST FOUNDATION

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance			
FELLOWSHIP GRANTS	5	49,215.	0.					
PROJECT GRANTS	9	106,750.	0.					
EVENT SUPPORT GRANT	1	150.	0.					
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	ditional information.				
PART I, LINE 2:								
ALL OF OUR GRANT RECIPIENTS SIGN GR	RANT AGRE	EMENTS REQ	UIRING TO	REPORT UPON				
THEIR GRANT PROGRESS - AND ONGOING	GRANT PA	YMENTS ARE	DEPENDENT	UPON THE				
SUCCESSFUL COMPLETION OF THE REPORT	TING REQU	IREMENTS.	ADDITIONA	LLY REGULAR				
ARE HELD WITH GRANTEES TO CHECK UPO	ON THEIR	PROGRESS.	AS OUR WO	RK IS				
FOCUSED UPON THE OPEN-SOURCE PROGRAMMING LANGUAGE RUST IT IS ALSO POSSIBLE								

FOR US TO INDEPENDENTLY CHECK UPON THE WORK OF GRANTEES THROUGH THEIR

PUBLIC, OPEN-SOURCE, CONTRIBUTIONS, PUBLIC RECORDS OF EVENTS, PUBLICATIONS

ETCETERA.

sc	HEDULE J	Compensation Info	rmation	1	OMB No. 1	545-004	47		
	rm 990)	For certain Officers, Directors, Trustees, Key I			00	00			
•	•	Compensated Employe	es		20	Ľ٦	j i		
		Complete if the organization answered "Yes" on Attach to Form 990.	Form 990, Part IV, line 23.		Open to	Publ	ic		
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions ar	d the latest information.			Inspection			
Nam	ne of the organization			Employer id			mber		
		RUST FOUNDATION		85-4	37697	4			
Pa	rt I Question	Regarding Compensation							
						Yes	No		
1a	Check the appropri	ate box(es) if the organization provided any of the following to o	r for a person listed on Form	990,					
	Part VII, Section A,	ine 1a. Complete Part III to provide any relevant information reg	garding these items.						
	First-class or c		wance or residence for perso	nal use					
	Travel for com		r business use of personal re						
			cial club dues or initiation fee						
	Discretionary s	pending account Personal ser	vices (such as maid, chauffel	ır, chef)					
b	•	In line 1a are checked, did the organization follow a written pol							
•		rovision of all of the expenses described above? If "No," compl			1b				
2		require substantiation prior to reimbursing or allowing expense							
	trustees, and office	s, including the CEO/Executive Director, regarding the items cl	necked on line 1a?		2				
2	la dia ata udai ala lifar								
3		y, of the following the organization used to establish the compo	-						
		ctor. Check all that apply. Do not check any boxes for methods	s used by a related organizati						
	X Compensation	tion of the CEO/Executive Director, but explain in Part III.	ovmant contract						
			oyment contract						
	·		the board or compensation c	ommittoo					
			the board of compensation c	ommittee					
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with	n respect to the filing						
	organization or a re	•							
а	Receive a severanc	e payment or change-of-control payment?			4a		х		
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan					X		
с	Participate in or rec	eive payment from an equity-based compensation arrangement			10		X		
	If "Yes" to any of lir	es 4a-c, list the persons and provide the applicable amounts fo	r each item in Part III.						
	Only section 501(c	(3), 501(c)(4), and 501(c)(29) organizations must complete li	nes 5-9.						
5	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pa	y or accrue any compensatio	n					
	contingent on the re	evenues of:							
а	The organization?				5 a				
b	Any related organiz	ation?			5 b				
		r 5b, describe in Part III.							
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pa	y or accrue any compensation	n					
	contingent on the n	et earnings of:							
b	Any related organiz	ation?			6b				
	If "Yes" on line 6a c	r 6b, describe in Part III.							
7		n Form 990, Part VII, Section A, line 1a, did the organization pr							
		es 5 and 6? If "Yes," describe in Part III			7				
8	Were any amounts	eported on Form 990, Part VII, paid or accrued pursuant to a c	ontract that was subject to the	ne					
		otion described in Regulations section 53.4958-4(a)(3)? If "Yes,			8				
9		d the organization also follow the rebuttable presumption proce							
		53.4958-6(c)?			9				
For	Paperwork Reducti	on Act Notice, see the Instructions for Form 990.		Sched	ule J (Forn	n 990)	2023		

LHA 332111 11-06-23

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85-4376974

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) WALTER PEARCE (i		234,241.	27,500.	0.	8,388.	7,803.	277,932.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)	222,065.	21,563.	0.	7,699.	6,440.	257,767.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)	119,499.	16,600.	0.	5,544.	8,700.	150,343.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)	0.	0.	0.	0.	0.	0.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)	0.	0.	0.	0.	0.	0.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
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	(i)								
	(ii)								
	(i)								
	(ii)								

Schedule J (Form 990) 2023

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

THE ORGANIZATION'S EXECUTIVE DIRECTOR AND HEAD OF FINANCE AND FUNDING ARE

PAID THROUGH A COMPENSATION ARRANGEMENT WITH RUST INC LIMITED, A FOREIGN

SUBSIDIARY OF RUST FOUNDATION.

UNDER THIS ARRANGEMENT, THE ORGANIZATION'S EXECUTIVE DIRECTOR RECEIVED

261,151 BRITISH POUND STERLINGS (332,445 US DOLLARS) OF REPORTABLE

COMPENSATION IN 2023. THE ORGANIZATION'S HEAD OF FINANCE AND FUNDING

RECEIVED 113,977 BRITISH POUND STERLINGS (145,092 US DOLLARS) OF REPORTABLE

COMPENSATION AND 10,362 BRITISH POUND STERLINGS (13,190 US DOLLARS) IN

RETIREMENT BENEFITS IN 2023.

Schedule J (Form 990) 2023

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



RUST FOUNDATION

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE PRINCIPAL DEVELOPER OF THE RUST PROGRAMMING LANGUAGE, (B) SUPPORT

THE PROMOTION, MAINTENANCE AND DEVELOPMENT, AND SECURITY OF THE RUST

PROGRAMMING LANGUAGE AND OTHER PROJECTS SUPPORTING THE RUST LANGUAGE

AND THE BROADER RUST ECOSYSTEM; (C) CULTIVATE THE RUST PROJECT TEAM

MEMBERS AND USER COMMUNITIES, INCLUDING BY PRODUCING EVENTS; (D) MANAGE

THE TECHNICAL INFRASTRUCTURE UNDERLYING THE DEVELOPMENT OF RUST; (E)

MANAGE AND STEWARD THE RUST TRADEMARK AND OTHER ASSETS OF THE

FOUNDATION; AND (F) UNDERTAKE SUCH OTHER ACTIVITIES AS MAY FROM TIME TO

TIME BE APPROPRIATE TO FURTHER THE PURPOSES AND ACHIEVE THE GOALS SET

FORTH ABOVE.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PROJECTS SUPPORTING THE RUST LANGUAGE AND THE BROADER RUST ECOSYSTEM;

(C) CULTIVATE THE RUST PROJECT TEAM MEMBERS AND USER COMMUNITIES,

INCLUDING BY PRODUCING EVENTS; (D) MANAGE THE TECHNICAL INFRASTRUCTURE

UNDERLYING THE DEVELOPMENT OF RUST; (E) MANAGE AND STEWARD THE RUST

TRADEMARK AND OTHER ASSETS OF THE FOUNDATION; AND (F) UNDERTAKE SUCH

OTHER ACTIVITIES AS MAY FROM TIME TO TIME BE APPROPRIATE TO FURTHER THE

PURPOSES AND ACHIEVE THE GOALS SET FORTH ABOVE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

TOOLING AND PROGRAMS ARE AVAILABLE TO ALL USERS OF THE RUST OPEN-SOURCE

ECOSYSTEM.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023	Page 2
Name of the organization	Employer identification number
RUST FOUNDATION	85-4376974

IMPACT THE EFFICIENCY AND SECURITY OF DEVELOPMENT IN RUST IN A POSITIVE WAY.

FORM 990, PART VI, SECTION A, LINE 3:

THE ORGANIZATION'S EXECUTIVE DIRECTOR AND HEAD OF FINANCE AND FUNDING ARE PAID THROUGH A COMPENSATION ARRANGEMENT WITH RUST INC LIMITED, A FOREIGN SUBSIDIARY OF RUST FOUNDATION.

UNDER THIS ARRANGEMENT, THE ORGANIZATION'S EXECUTIVE DIRECTOR RECEIVED 261,151 BRITISH POUND STERLINGS (332,445 US DOLLARS) OF REPORTABLE COMPENSATION IN 2023. THE ORGANIZATION'S HEAD OF FINANCE AND FUNDING RECEIVED 113,977 BRITISH POUND STERLINGS (145,092 US DOLLARS) OF REPORTABLE COMPENSATION AND 10,362 BRITISH POUND STERLINGS (13,190 US DOLLARS) IN RETIREMENT BENEFITS IN 2023.

THE REPORTABLE COMPENSATION AND BENEFITS PAID TO THESE OFFICERS ARE REPORTED ON PART IX, LINE 5 (IN US DOLLARS).

FORM 990, PART VI, SECTION A, LINE 4:

THE ORGANIZATION AMENDED ITS BYLAWS IN JUNE 2023 TO REFLECT LANGUAGE MORE CLOSELY IN LINE WITH DELAWARE LAW, CAPTURE RECENT CHANGES IN RUST PROJECT GOVERNANCE, REMOVE OUTDATED REFERENCES TO THE RUST CORE TEAM, AND MORE CLEARLY DESCRIBE THE AUTHORITY AND DECISION-MAKING PROCESSES WITHIN THE FOUNDATION.

FORM 990, PART VI, SECTION A, LINE 6:

THE FOUNDATION SHALL HAVE FIVE CLASSES OF MEMBERSHIP: PLATINUM MEMBERS,

GOLD MEMBERS, SILVER MEMBERS, ASSOCIATE MEMBERS, AND INDIVIDUAL MEMBERS. 332212 11-14-23 Schedule O (Form 990) 2023 38 Name of the organization

FORM 990, PART VI, SECTION A, LINE 7A:

EACH PLATINUM MEMBER IS ALLOCATED ONE BOARD SEAT. ONCE THERE ARE 4 GOLD MEMBERS THEY GET TO VOTE FOR ONE DIRECTOR FROM AMONG THEIR NUMBER; ONCE THERE ARE 8 THEY GET TO VOTE FOR TWO DIRECTORS, WHICH IS THE MAXIMUM THEY GET TO VOTE FOR. ONCE THERE ARE 10 SILVER MEMBERS THEY GET TO VOTE FOR ONE DIRECTOR, WHICH IS THE MAXIMUM THEY ARE ABLE TO VOTE FOR.

FORM 990, PART VI, SECTION B, LINE 11B:

A COPY OF THE FORM 990 WILL BE REVIEWED BY THE ORGANIZATION'S GOVERNING

BODY PRIOR TO BEING FILED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY BY THE BOARD, AND EACH BOARD MEMBER (AND KEY EMPLOYEES) IS REQUIRED TO COMPLETE AN UPDATED DECLARATION ON AN ANNUAL BASIS. COPIES OF POLICY AND DECLARATIONS AVAILABLE

ON REQUEST.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION LEVELS ARE SET BY A DEDICATED COMPENSATION COMMITTEE WHICH IS

A SUBSET OF THE FOUNDATION'S BOARD. INDUSTRY BENCHMARKING IS USED TO SET

COMPENSATION LEVELS.

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FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST

POLICY AVAILABLE TO THE PUBLIC ON ITS WEBSITE. THE ORGANIZATION MAKES ITS

FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

332212 11-14-23

Schedule O (Form 990) 2023	Page 2
Name of the organization	Employer identification number
RUST FOUNDATION	85-4376974

FORM 990, PART VII:

THE ORGANIZATION'S DIRECTOR OF OPERATIONS IS PAID THROUGH A

COMPENSATION ARRANGEMENT WITH RUST INC LIMITED, A FOREIGN SUBSIDIARY OF

RUST FOUNDATION. UNDER THIS ARRANGEMENT, THE ORGANIZATION'S DIRECTOR OF

OPERATIONS RECEIVED 96,300 BRITISH POUND STERLINGS (122,590 US DOLLARS)

OF REPORTABLE COMPENSATION AND 7,130 BRITISH POUND STERLINGS (9,077 US

DOLLARS) IN RETIREMENT BENEFITS IN 2023.

THE ORGANIZATION'S SOFTWARE ENGINEER IS PAID THROUGH AN EMPLOYER OF

RECORD, CANADA REMOTE TECHNOLOGY INC. UNDER THIS ARRANGEMENT, THE

ORGANIZATION'S SOFTWARE ENGINEER RECEIVED 167,310 CANADIAN DOLLARS

(126,269 US DOLLARS) OF REPORTABLE COMPENSATION AND 3,754 CANADIAN

DOLLARS (2,833 US DOLLARS) IN RETIREMENT BENEFITS IN 2023.

BOTH ARE HIGHEST COMPENSATED EMPLOYEES OF RUST FOUNDATION.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

RETURN OF UNUSED GRANTS

23,000.

332212 11-14-23

2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 000 0300 10

ORM 99	ORM 990 PAGE 10 990														
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	MACHINERY & EQUIPMENT														
1	EQUIPMENT	VARIOUS		.000	НУ	16	16,585.				16,585.	2,277.		4,995.	7,272.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						16,585.				16,585.	2,277.		4,995.	7,272.
	* GRAND TOTAL 990 PAGE 10														
	DEPR						16,585.				16,585.	2,277.		4,995.	7,272.

328111 04-01-23

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone