Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. OMB No. 1545-0047

Department of the Treasury

Open to Public Inspection Go to www.irs.gov/Form990PF for instructions and the latest information. Internal Revenue Service For calendar year 2020 or tax year beginning . 2020, and ending A Employer identification number Name of foundation 83-1326044 NATIVE AMERICAN AGRICULTURE FUND Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite 534 WEST RESEARCH CENTER BLVD #220 (479) 445-6226City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here. . . FAYETTEVILLE, AR 72701 Initial return of a former public charity G Check all that apply: Initial return 1. Foreign organizations, check here . . Amended return Final return 2. Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization: X | Section 501(c)(3) exempt private foundation E If private foundation status was terminated Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A), check here . Cash X Accrual J Accounting method: Fair market value of all assets at F If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col. (c), line under section 507(b)(1)(B), check here . > 297,001,727. (Part I, column (d), must be on cash basis.) 16) > \$ (d) Disbursements Part | Analysis of Revenue and Expenses (The (a) Revenue and for charitable (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) expenses per income income purposes may not necessarily equal the amounts in books (cash basis only) column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule) ... if the foundation is not required to attach Sch. B. Check ▶ X 2 3 Interest on savings and temporary cash investments. 3,828,387. 3,828,387. 4 Dividends and interest from securities Net rental income or (loss) 307,526. Revenue Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1, 214, 936, 475. assets on line 6a 307,526. Capital gain net income (from Part IV, line 2) . 7 Net short-term capital gain. 8 Income modifications . 10a Gross sales less returns and allowances Less: Cost of goods sold . Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 4,135,913. 4,135,913. 12 Total. Add lines 1 through 11 319,637. 319,637. 13 Compensation of officers, directors, trustees, etc. . . 1,732,397. 2,098,035. 285,180. 14 Other employee salaries and wages 224,708. 26,506. 189,405. 15 Pension plans, employee benefits 360,212. 376,942. Legal fees (attach schedule) ATCH 1 16a 73,157. 76,555. g and Administrative E Accounting fees (attach schedule)ATCH 2 b 327,011. 742,550. 400,351. Other professional fees (attach schedule).[3] 25,000. Taxes (attach schedule) (see instructions)[4]. Depreciation (attach schedule) and depletion. 189,213. 189,213. 320,659. 517,920. Travel, conferences, and meetings Operating 3 491,779. 514,627. Other expenses (attach schedule) ATCH .5. . Total operating and administrative expenses. 4,003,470. 712,037. 5,085,187. Add lines 13 through 23. 11,672,110. 17,998,596. Contributions, gifts, grants paid 15,675,580. 23,083,783. 712,037. 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: -18,947,870. a Excess of revenue over expenses and disbursements 3,423,876. b Net investment income (if negative, enter -0-)

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

P	art II	Balance Sheets Attached schedules and amounts in the	Beginning of year	End of	year	
		description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair M	larket Value
	1	Cash - non-interest-bearing	479,779.	671,160.		671,160
		Savings and temporary cash investments	194,313,303.	16,639,178.	16	639,178
	3	Accounts receivable ► 1,980,933.		X = EXT X = T		
		Less: allowance for doubtful accounts	1,148,572.	1,980,933.	1	,980,933
		Pledges receivable >				
		Less: allowance for doubtful accounts				
		Grants receivable				
		Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
		Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts				
S						
ssets	8	Inventories for sale or use	6,017.	149,628.		149,628
Ass			0,011	117/020.		110,020
		Investments - U.S. and state government obligations (attach schedule). Investments - corporate stock (attach schedule) ATCH 7	83.263.906	277,560,828.	277	,560,828
		Γ	03,203,300.	277,300,020.	2 1 1	,500,020
	11 C	Investments - corporate bonds (attach schedule)				
		(attach schedule)				
		Investments - mortgage loans				
	14	Investments - other (attach schedule)				
		Land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) 9, 361.				
		Other assets (describe ▶)				
		Total assets (to be completed by all filers - see the	070 011 577	207 001 727	205	001 707
_		instructions. Also, see page 1, item I)	70, 600	297,001,727. 27,279,585.	291	,001,727
	17	Accounts payable and accrued expenses		8,347,532.		
	18	Grants payable	10,000,000.	8,347,332.	ELSS:	
es	19	Deferred revenue				
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities		Mortgages and other notes payable (attach schedule)	100 000	166 020		
_	22	Other liabilities (describe ► ATCH 8)	126,206.	166,232.		
		_ / 8.5 %	10 005 005	25 702 240		
_		Total liabilities (add lines 17 through 22)	10,205,895.	35,793,349.		
es		Foundations that follow FASB ASC 958, check here				
nc		and complete lines 24, 25, 29, and 30.	0.00 0.05 0.00	0.61 0.00 0.70		
<u>a</u>	24	Net assets without donor restrictions	269,005,682.	261,208,378.		
m	24 25	Net assets with donor restrictions				
nd		Foundations that do not follow FASB ASC 958, check here				
品		and complete lines 26 through 30.				
or	26	Capital stock, trust principal, or current funds			THE WAR	
ts	27 28 29 30	Paid-in or capital surplus, or land, bldg., and equipment fund				
se	28	Retained earnings, accumulated income, endowment, or other funds				
As	29	Total net assets or fund balances (see instructions)	269,005,682.	261,208,378.		
et	30	Total liabilities and net assets/fund balances (see				
Z		instructions)	279,211,577.	297,001,727.		
P	art III	Analysis of Changes in Net Assets or Fund Balar	nces			
1000		Il net assets or fund balances at beginning of year - Part I		ust agree with		
- 5		of-year figure reported on prior year's return)			269	,005,682
2		er amount from Part I, line 27a				,947,870
		er increases not included in line 2 (itemize) ATCH 9		3		,150,566
		lines 1, 2, and 3				,208,378
		reases not included in line 2 (itemize) ▶		5		
		Il net assets or fund balances at end of year (line 4 minus	line 5) - Part II column (b)		261	,208,378

Page 3

-	MANAGEMENT TO THE PARTY OF THE	the contract of the contract o	The state of the s			rage o
Pa	rt IV Capital Gains	and Losses for Tax on Inve	estment Income			
	(a) List and des 2-story bri	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1 a	SEE PART IV SCHED	ULE				
b)					
0						
е						1
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (los ((e) plus (f) minu	
а	ı					10 100 Mrs., 100
b)					
C	;					
- 0						
е						
	Complete only for assets sh	nowing gain in column (h) and owned I	by the foundation on 12/31/69.	(1)	Gains (Col. (h) ga	in minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		(k), but not less the Losses (from col.	an -0-) or
a						
b					<u> </u>	
d						
е						
2		or (not canital local		2		307,526.
				3		0.
Pa	rt V Qualification U	nder Section 4940(e) for Red	uced Tax on Net Investment I	ncome		
- 1	SI	ECTION 4940(e) REPEALED ON D	DECEMBER 20, 2019 - DO NOT C	OMPLETE		
1	Reserved					3
	(a) Reserved	(b) Reserved	(c) Reserved		(d) Reserved	
	Reserved					
	Reserved					
	Reserved					
	Reserved					
	Reserved					
2	_			2		
3	Reserved			3		
4	Reserved			4		
5	Reserved			5		
6	Reserved			6		
7	Reserved			7		
8	Reserved			8		

Form **990-PF** (2020)

JSA 0E1430 1.000

1 Bewinst operating founcations described in section 4940(3/2), sheek here	Pai	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instruction	ns)		aye 🕶
Date of ruling or determination letter. (attach copy of letter if necessary - see instructions) b Reserved. c All other demestic boundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% of Part Line 12 col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) frusts and taxable foundations only; others, enter 0.) 3 Add lines 1 and 2. 3 Add lines 1 and 2. 4 To compare the compare of th			,		
b Reserved c All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% of Part Line 12 col. (b) . 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter 0.) 3 Add lines 1 and 2 . 3 477,592. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter 0.) 5 Tax based on investment incomes. Subtract line 4 from line 3.1 frow or less, enter 0.0. 6 ConditivPayments: 2 2020 estimated tax payments and 2019 overpayment credited to 2020 . 8 Exempt foreign organizations - tax withheld at source . 1 Exempt foreign organizations - tax withheld at source . 2 Exempt foreign organizations - tax withheld at source . 3 A 47,592. 6 ConditivPayments: 2 2 2020 estimated tax payments and 2019 overpayment credited to 2020 . 8 Exempt foreign organizations - tax withheld at source . 9 B ConditivPayments: 1 Enter any penalty for underpayment of estimated tax. Check here in foreign 2020 is attached . 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . 9 Tax text in the 10 to be. Credited to 2021 estimated tax b . 10 Coverayment If fine 7 is more intended to 2021 estimated tax b . 10 Coverayment If fine 7 is more intended to 2021 estimated tax b . 11 Enter the amount of line 10 to be. Credited to 2021 estimated tax b . 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it it participate or intervene in any political campaign? 1 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it it participate or intervene in any political campaign? 1 During the tax year, did the foundation in connection with the activities and copies of any materials political to the definition in the 10 to be. Credited to 2021 estimated tax in the conflict with the state law remains		Supplemental and Automatic Supplemental Supp			
a Ald lines 1 and 2,	b	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		47,5	592.
2 Tax under section 611 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0.) 3 Add lines 1 and 2				Commence of the Commence of th	
3 47,592. Subtille A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0.) Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0. Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0. Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0. Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0. Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0. Tax based with application for extension of time to file (Form 888). Each of the subtract of the subtract line 7. Total credits and payments Add lines 6a through 6d. Total credits and payments. Add lines 6a through 6d. Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached. Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached. Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached. Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached. Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached. Enter the amount of line 50 to be. Credited to 2021 estimated tax. Total credits and payments. Add lines 6a and 8 incer the amount overpaid. Total credits and payments. Add lines 6a and 8 incer the amount overpaid. Total credits and payments. Add lines 6a and 8 incer the amount overpaid. Total credits and payments. Add lines 6a and 8 incer the the amount overpaid. Total credits and payments. Add lines 6a and 8 incer the the amount overpaid. Total credits and payments. Add lines 6a and 8 incer the the amount overpaid. Total credits and payments. Add lines 6a and 8 incer the the amount overpaid. Total credits and payments. Add lines 6a and 8 incer the the amount overpaid. Total credits and payments. Add lines 6a and 8 incer the the the warment overpaid. Total credits and payments. A		Part I, line 12, col. (b)			
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6 Credits/Payments: a 2020 estimated tax payments and 2019 overpayment credited to 2020	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
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b Exempt foreign organizations - tax withheld at source. 1 Tax paid with application for extension of time to file (Form 8868). 2 Backup withholding erroneously withheld 3 Backup withholding erroneously withheld 3 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 3 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 3 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 4 Royapyment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 5 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 6 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owerpaid 6 Part VII-A 1 Enter the amount of line 10 to be. Credited to 2021 estimated tax ▶ 7 Refunded ▶ 11 8 Part VII-A 1 Enter the amount of line 10 to be. Credited to 2021 estimated tax ▶ 9 Refunded ▶ 11 1 Refunded ▶ 12 1	6	06 051			
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d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d	b	Ship to the Control of the Control o			
8 Enter any penalty for underpayment of estimated tax. Check here	С	rax para trial approaches for extension of time to the (farm code).			
8 Enter any penalty for underpayment of estimated tax. Check here				06 0	151
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owerpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11				90,0))1.
49, 459. Part VII-A Statements Regarding Activities 48, 459. Part Part Part VII-A Statements Regarding Activities 48, 459. Part Part Part VII-A Statements Regarding Activities 48, 459. Part Part Part Part VII-A Statements Regarding					
Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ (2) On foundation managers ▶ \$ (2) On foundation managers ▶ \$ (3) On foundation managers ▶ \$ (4) On the foundation of the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ (2) On foundation managers ▶ \$ (3) On foundation managers ▶ \$ (4) On the foundation on the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ (3) On foundation flat Part (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ (3) On the foundation of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "yes," attach a conformed copy of the changes. 3				18 /	150
Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a					
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e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes. 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV AR, ND, b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G?) If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV. 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	-				
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complete Part XIV	9				
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	10	에 보는 사람들이 보면 사람들이 많아 보면 보다면 되었다. 그는 사람들이 되었다면 보다면 보다면 보다면 보다면 보다면 보다면 보다면 보다면 되었다. 그는 사람들이 되었다면 보다면 보다면 보다면 보다면 보다면 보다면 보다면 보다면 보다면 보	10		X

Pai	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address NATIVEAMERICANAGRICULTURE FUND. ORG	600		
14	The books are in care of ► NATIVE AMERICAN AG. FUND Telephone no. ► 479-445-	622	0	
	Located at ► ATTACHMENT 10 ZIP+4 ► 72701			
15			>	· Ш
4.0	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority	16	100	X
	over a bank, securities, or other financial account in a foreign country?	10		21
	the foreign country			
Par	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?		120	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.) Yes X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	1b		
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	10		
_	Organizations relying on a current notice regarding disaster assistance, check here			
·	were not corrected before the first day of the tax year beginning in 2020?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2020?			
	If "Yes," list the years			Baga
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	34		
An	foundation had excess business holdings in 2020.)	3b 4a		X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	74		
n	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4b		X
	in the tax year beginning in 2020.	00	0 0 0	

Pai	rt VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (cont	inued)			
5a	During the year, did the foundation pay or incur any amo						Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe		n 4945(e))?	Yes	X No			
	(2) Influence the outcome of any specific public ele							
	directly or indirectly, any voter registration drive?				X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X								
	(4) Provide a grant to an organization other than a							
	section 4945(d)(4)(A)? See instructions			1 1 20	X No		-	
	(5) Provide for any purpose other than religious, ch							
	purposes, or for the prevention of cruelty to children				X No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the ex	xceptions des	scribed in			
	Regulations section 53.4945 or in a current notice regard	ding disaster assistan	ce? See instructions.			5b		
	Organizations relying on a current notice regarding disas	ter assistance, check	here					
С	If the answer is "Yes" to question 5a(4), does the							
	because it maintained expenditure responsibility for the g				No			
	If "Yes." attach the statement required by Regulations se							
6a	Did the foundation, during the year, receive any fun		ectly, to pay premiur	ns				
	on a personal benefit contract?			. Yes	X No			
b	Did the foundation, during the year, pay premiums, dire	ctly or indirectly, on a	personal benefit contra	ct?		6b		X
	If "Yes" to 6b, file Form 8870.							
7a	At any time during the tax year, was the foundation a pa	arty to a prohibited tax	shelter transaction?.	. Yes				
b	If "Yes," did the foundation receive any proceeds or have	e any net income attr	ibutable to the transacti	on?		7 b		
8	Is the foundation subject to the section 4960 tax on pay							
	remuneration or excess parachute payment(s) during the	year?		. Yes	X No			
Pa	rt VIII Information About Officers, Director	rs, Trustees, Fou	Indation Managers	s, Highly P	aid Emp	loyees,		
1	and Contractors List all officers, directors, trustees, and foundati	on managers and	their compensation	. See instruc	tions.			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contribu employee ben	tions to	(e) Expe		
	(a) Name and address							
		devoted to position	enter -0-)	and deferred co		otner	allowanc	
			enter -0-)	and deferred co	mpensation	other	allowanc	
ATC	Н 11		enter -0-) 319, 637.	and deferred co		other	allowanc	
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		devoted to position	319,637.	and deferred co	mpensation 0.			0.
ATC	Compensation of five highest-paid employees	devoted to position	319,637.	and deferred co	mpensation 0.			0.
2	Compensation of five highest-paid employees "NONE."	(other than those) (b) Title, and average	319,637.	e 1 - see	instruction instruction	ons). If		O.
2	Compensation of five highest-paid employees	devoted to position	319,637.	e 1 - see (d) Contribuen plans and deferred co	instruction to benefit deferred	ons). If	none,	enter
2	Compensation of five highest-paid employees "NONE."	(other than those (b) Title, and average hours per week	319,637.	e 1 - see (d) Contribuemployee	instruction to benefit deferred	ons). If	none,	enter
2 (a	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contribuen plans and deferred co	instruction to benefit deferred	ons). If	none,	enter
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2 (a	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(other than those (b) Title, and average hours per week	se included on lin	e 1 - see (d) Contribuen plans and deferred co	instruction to benefit deferred sation	ons). If	none,	enter
	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(other than those (b) Title, and average hours per week devoted to position	se included on lin (c) Compensation 945, 450.	e 1 - see (d) Contribuemployee plans and compens	instruction instruction utions to benefit deferred sation	ons). If	none,	enter

Form 990-PF (2020)	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c)	Compensation
NOME	
NONE	
Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 THE NATIVE AMERICAN AGRICULTURE FUND IS A PRIVATE	
NON-OPERATING FOUNDATION THAT PROVIDES GRANTS TO	
ELIGIBLE GRANT RECIPIENTS TO FUND THE PROVISION OF BUSINESS	
ASSISTANCE, AGRICULTURAL EDUCATION, TECHNICAL SUPPORT AND ADVOCACY SERVICES TO NATIVE AMERICAN FARMERS AND RANCHERS TO	
SUPPORT AND PROMOTE THEIR CONTINUED ENGAGEMENT IN	
3 AGRICULTURE.	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE	
All other program-related investments. See instructions.	
3	
NONE	
Total Add lines 1 through 3	

P	а	g	е	8

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foundatior	IS,		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:				
а	Average monthly fair market value of securities	1a	180	,412,367.	
	Average of monthly cash balances	1b	104	,940,226.	
	Fair market value of all other assets (see instructions)	1c			
	Total (add lines 1a, b, and c)	1d	285	,352,593.	
e	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)				
2	Acquisition indebtedness applicable to line 1 assets	2			
3	Subtract line 2 from line 1d	3	285	,352,593.	
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see				
7	instructions)	4	4	,280,289	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	281	,072,304.	_
6	Minimum investment return. Enter 5% of line 5	6		,053,615.	
11000000	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations, check here ▶ and do not complete this part.)	foundations			
1	Minimum investment return from Part X, line 6	1	14	,053,615	
	Tax on investment income for 2020 from Part VI, line 5 2a 47,592.				-
∠a ⊾	Income tax for 2020. (This does not include the tax from Part VI.). 2b				
		2c		47,592	
	Add lines 2a and 2b	3	14	,006,023	
3	Recoveries of amounts treated as qualifying distributions	4		, ,	
4	Add lines 3 and 4	5	14	,006,023	_
5		6		, ,	-
6	Deduction from distributable amount (see instructions)		_		-
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	7	14	,006,023	
-	line 1	/		7000,020	-
Par	t XII Qualifying Distributions (see instructions)			73	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:				
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	15	,675,580	
	Program-related investments - total from Part IX-B	1b			
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,				
	purposes	2			
3	Amounts set aside for specific charitable projects that satisfy the:				
а	Suitability test (prior IRS approval required)	3a			
b	Cash distribution test (attach the required schedule) ATCH 13	3b	6	,326,486	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	22	,002,066	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	-		man to the transfer	
100	Enter 1% of Part I, line 27b. See instructions	5		0	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	22	,002,066	-
ñ	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		her th	he foundation	n
	qualifies for the section 4940(e) reduction of tax in those years.	J			

Page 9

Pa	rt XIII Undistributed Income (see instru	ictions)			
	Distributable amount for 2020 from Part XI,	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1	line 7				14,006,023.
2	Undistributed income, if any, as of the end of 2020:				
	Enter amount for 2019 only.			1,259,527.	
	Total for prior years: 20 18 ,20 17 ,20 16				
	Excess distributions carryover, if any, to 2020:				WITTE WEST
	From 2015				
	CLOSS-SCOOLS N. D.				
	From 2018				
	From 2019 L	0.			
	Total of lines 3a through e				
4	Qualifying distributions for 2020 from Part XII, line 4: \$ 22,002,066.			1 250 527	
a	Applied to 2019, but not more than line 2a			1,259,527.	
b	Applied to undistributed income of prior years (Election required - see instructions)				
C	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2020 distributable amount				14,006,023.
е	Remaining amount distributed out of corpus	6,736,516.			
5	Excess distributions carryover applied to 2020				
	(If an amount appears in column (d), the same amount must be shown in column (a).)			Sur-paymout the	
6	Enter the net total of each column as indicated below:				
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	6,736,516.			
b	Prior years' undistributed income. Subtract				
•	Enter the amount of prior years' undistributed				
C	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions Undistributed income for 2019. Subtract line				
е	4a from line 2a. Taxable amount - see				
	instructions				
f	Undistributed income for 2020. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2021				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2015 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2021.	6,736,516.			
	Subtract lines 7 and 8 from line 6a	0,730,010.			
10	Analysis of line 9:				
a	Excess from 2016				
k	Excess from 2017				
(Excess from 2018				
(Excess from 2019				
-	Excess from 2020 6,736,516.				5 000 PE (2020)

Pa	rt XIV Private Op	erating Foundations	(see instructions	and Part VII-A, quest	ion 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter th	at it is a private oper	ating	
	foundation, and the ruling					
b	Check box to indicate v		is a private operating		n section 4942(j	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	T	(e) Total
	justed net income from Part I or the minimum investment	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
	return from Part X for each					
	year listed					
	85% of line 2a					
С	Qualifying distributions from Part XII, line 4, for each year listed .					
d	Amounts included in line 2c not used directly for active conduct					
е	of exempt activities. Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
a	"Assets" alternative test - enter.					
	(1) Value of all assets(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6, for each year listed					
С	"Support" alternative test - enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
	(2) Support from general					
	public and 5 or more exempt organizations as provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization.					
	(4) Gross investment income .					
Pa				rt only if the found	ation had \$5,000 c	or more in assets at
		uring the year - see				
	Information Regardin					d by the formulation
а	List any managers of before the close of any					
	N/A		100/	C 11	1 / 1	
b	List any managers of ownership of a partner					y large portion of the
	ownership of a partner	iship of other entity) o	i willcii the foundatio	of flas a 10 % of greate	i iliterest.	
	N/A					
2	Information Regardin	a Contribution, Grant	Gift, Loan, Scholars	ship, etc., Programs:		
_	Check here ▶ if t unsolicited requests f	the foundation only	makes contributions	to preselected cha	ritable organizations als or organizations u	and does not accepted
	complete items 2a, b,			minorational positions and constitution of	arvina (turk (turk) ♥ restign (TritleTell) (f. (f.	acceptation of the state of the
a	The name, address, a	nd telephone number	or email address of	the person to whom ap	plications should be ad	dressed:
	ATCH 14			1		
b	The form in which app	lications should be su	bmitted and informat	tion and materials they	should include:	
С	Any submission deadli	ines:				
d	Any restrictions or li	mitations on awards	, such as by geog	raphical areas, charit	able fields, kinds of	institutions, or other

Page 11

Part XV Supplementary Information (c	continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or App	roved for	Future Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
ATCH 15				
Total			▶ 3a	11,672,110.
b Approved for future payment				
, ,				
ATCH 16				
	N1			
				V .
Total			▶ 3b	6,326,486.

Page 12

Part XVI-	Analysis of Income-Produ	ucing Acti	vities			
	amounts unless otherwise indicated.	Color Color	ated business income	Excluded by	y section 512, 513, or 514	(e) Related or exempt
90 70	v	(a)	(b)	(c)	(d)	function income
1 Program	service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
5.70						
-						
С		14.				
d						
е						
f	2					
g Fees a	and contracts from government agencies					
2 Members	ship dues and assessments					
3 Interest or	a savings and temporary cash investments -			14	3,828,387.	
4 Dividend	s and interest from securities			14	3,020,307.	
5 Net renta	al income or (loss) from real estate:					
a Debt-	financed property					
b Not d	ebt-financed property					
6 Net rental	income or (loss) from personal property					
7 Other inv	vestment income			18	307,526.	
8 Gain or (lo	oss) from sales of assets other than inventory			10	307,320.	
	me or (loss) from special events					
10 Gross pr	ofit or (loss) from sales of inventory					
11 Other rev	/enue: a			-		
b						
S						
d						
е					4,135,913.	
12 Subtotal	Add columns (b), (d), and (e)					1 105 010
13 Total. Ad	dd line 12, columns (b), (d), and (e)	· · · · · ·				
		e to the A	ccomplishment of F	xempt Pur	noses	
Part XVI-						uted importantly to the
Line No.	Explain below how each activi	ty for whic	h income is reported	in column (e) of Part AVI-A contrib	e) (See instructions)
•	accomplishment of the foundati	on's exemp	ot purposes (other than	by providing	g fullus for such purpose	3). (000 1131 4010110.)
					Tun t	
-						
			Marian Marian			
					The second secon	
				y		
				11.875		
		WILLIAM A MANAGEMENT				
Sec. 1134						
-						
-						
-		1000				
						Form 990-PF (2020

Form 990-	PF (2020)	NATIVE AM	ERICAN	AGRI	CULTURE F	UND		83-	-1326044	Pag	ge 13
Part X	VII Information Re	egarding Trans	fers to	and	Transaction	s and F	elationships	With No	ncharitabl	e Ex	empt
	Organizations					****			-111		
in	the organization direct section 501(c) (other	than section	ngage in 501(c)(3)	organ	the following nizations) or	in section	on 527, relat	ing to pol	itical	Yes	No
	ganizations? ansfers from the reportir	as foundation to	nonchai	ritable	evemnt organ	ization of					
	Cash								1a(1)		X
	Other assets										X
, ,	her transactions:										
(1)	Sales of assets to a no	oncharitable exem	pt organiz	zation.					1b(1		X
(2)	Purchases of assets from	om a noncharitab	le exemp	t organ	ization				1b(2	-	X
(3)	Rental of facilities, equ	ipment, or other a	ssets						1b(3)	X
(4)	Reimbursement arrang	jements							1b(4		X
(5)	Loans or loan guarante	es							1b(5		X
(6)	Performance of service aring of facilities, equipm	es or membership	o or tunal	raising	solicitations.				100		X
c Sh	aring of facilities, equipments answer to any of the	hent, mailing lists	" comple	oto the	following so	hedule (Column (b) sho	ould always	show the	fair n	narket
a II i	lue of the goods, other	assets or service	es aiven	by the	reporting for	undation.	If the foundat	ion receive	d less than	fair n	narket
va	lue in any transaction o	r sharing arrange	ement, sh	now in	column (d) th	ne value	of the goods,	other asset	s, or service	es rec	eived.
(a) Line r		(c) Name of no					cription of transfers				
	N/A					N/A	100 mm 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
			ristanus Adams								
							<u> </u>				
			71111	-1.77							
2a Is	the foundation directly	or indirectly affi	liated wit	th, or	related to, on	e or mor	e tax-exempt	organizatio	ns,	es [7]
	escribed in section 501(c		tion 501(c)(3)) c	or in section 5	27?				res	NO
b If	"Yes," complete the following			/h\ Tuno	of organization		(c)	Description o	f relationship		7
	(a) Name of organization	on		(b) Type	of organization		(0)	Восоприон		50 	
			T								
					Mynull or House French 440						
	Under penalties of perjury, I decorrect, and complete. Declaration	plare that I have examin	ed this retur	n, includi	ing accompanying s information of which	chedules and preparer has	statements, and to any knowledge.	the best of my	knowledge and	bellet,	it is true
Sign	N.							May	the IRS disc	uss this	return
Here	TONI STANGER-N	4CLAUGHLIN			/2021	CEO			the preparer	x Yes	below?
nere	Signature of officer or trustee		Da	ate	14.412024	Title	CEO	See	instructions.	Alles	
	Ivin Stange/	vel	Droper	er's signa	/14/2021		Date	Check	if PTIN		
Paid	Print/Type preperer's n		Sh	awn	M. Loade	er	05/17/20	a company of the comp	"	2513	58
Prepa	ror	KD, LLP							44-0160		
Use O	Tillio Hame	10 N. ELGIN	AVE, S	SUITE	400						
036 0	The same of	TULSA, OK	,			74	120-1490	Phone no.	918.584.		
									Form 9	90-PF	(2020

2020 FORM 990-PF NATIVE AMERICAN AGRICULTURE FUND 83-1326044
FORM 990-PF - PART IV

Kind of P	roperty		Desci	ription		P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis	D	Gain or (loss)	
		BB&T(SEE A	TTACHED SCHEI	DULES)			VAR	12/31/2020
366630396.		366345069.					285,327.	
848306079.		NB (SEE AT) 848283880.	TACHED SCHEDU	JLES)			VAR 22,199.	12/31/2020
TOTAL GAIN(LC	oss)						307,526.	

CHMENT
\vdash

FORM 990PF, PART I -

LEGAL FEES

REVENUE AND EXPENSES PER BOOKS

INVESTMENT INCOME

1ENT

ADJUSTED NET INCOME

CHARITABLE

360,212.

360,212.

TOTALS

LEGAL FEES

DESCRIPTION

376,942.

376,942.

FORM 990PF, PART I - ACCOUNTING FEES

ACCOUNTING FEES DESCRIPTION TOTALS REVENUE AND EXPENSES PER BOOKS 76,555. 76,555. NET INCOME_ ADJUSTED NET INCOME CHARITABLE 73,157. 73,157.

7144RU K931 6/11/2021 11:39:14 AM

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

TOTALS	INVESTMENT MANAGEMENT FEES CONSULTING FEES	DESCRIPTION
742,550.	400,351. 342,199.	REVENUE AND EXPENSES PER BOOKS
400,351.	400,351.	NET INVESTMENT INCOME

	()
T	I
C	D
V	N
T	H
0	\vdash
S	M
I	M
S	H
	II

327,011.

327,011.

FORM 990PF, PART I - TAXES

REVENUE

AND EXPENSES

PER BOOKS

DESCRIPTION

25,000.

EXCISE TAXES

TOTALS

25,000.

FORM 990PF, PART I - OTHER EXPENSES

OTHER EXPENSE	TRAINING AND DEVELOPMENT	INSURANCE EXPENSE	INFORMATION TECHNOLOGY	OFFICE EXPENSES	ADVERTISING AND PROMOTION	DESCRIPTION	
	Н				NO		

TOTALS

514		52	4.9	111	184	114	PER BOC	EXPENSE	U	REVE	
,627		,916	-			,624	-	S		NUE	
•	•		*:		•						

							Р	CH
49		5(4	106	175	109	URPO	ARIT.
-		0	7	9	01	0	S	A
	7	7					L	M
7	1	S	9	W	∞	S	S	\vdash
J	0	0	00	J	U	W	1	III
9	0	1	4	U	0	7		
5 5								

FORM 990PF, PART II - PREPAID EXPENSES AND DEFERRED CHARGES

TOTALS	PREPAID SOFTWARE FEES PREPAID EXPENSE PREPAID INSURANCE PREPAID TAX	DESCRIPTION
149,628.	36,848. 75,000. 34,606. 3,174.	ENDING BOOK VALUE
149,628.	36,848. 75,000. 34,606. 3,174.	ENDING FMV

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

EQUITIES -NEUBERGER BERMAN FIXED INCOME-NEUBERGER BERMAN

TOTALS

ENDING BOOK VALUE

ENDING

59,551,030. 218,009,798.

277,560,828.

59,551,030. 218,009,798.

277,560,828.

83-1326044

166,232.

	ATTACHMENT 8	
FORM 990PF, PART II - OTHER LIABILITIES		
DESCRIPTION	ENDING BOOK VALUE	
PAYROLL LIABILITIES	166,232.	91

TOTALS

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

UNREALIZED GAINS

11,150,566.

TOTAL

11,150,566.

FORM 990PF, PART VII-A, LINE 14 - LOCATION OF BOOKS

534 WEST RESEARCH CENTER BLVD, SUITE 220 FAYETTEVILLE, AR

ATTACHMENT 11	DIRECTORS, AND TRUSTEES	FORM 990PF, PART VIII - LIST OF OFFICERS, I

JOE HILLER 534 WEST RESEARCH CENTER BLVD #220 FAYETTEVILLE, AR 72701	JIM LADUCER 534 WEST RESEARCH CENTER BLVD #220 FAYETTEVILLE, AR 72701	ELSIE MEEKS 534 WEST RESEARCH CENTER BLVD #220 FAYETTEVILLE, AR 72701	DAVE ARCHAMBAULT 534 WEST RESEARCH CENTER BLVD #220 FAYETTEVILLE, AR 72701	CLARYCA MANDAN 534 WEST RESEARCH CENTER BLVD #220 FAYETTEVILLE, AR 72701	CHARLES GRAHAM 534 WEST RESEARCH CENTER BLVD #220 FAYETTEVILLE, AR 72701	NAME AND ADDRESS
COMMITTEE CHAIR 10.00	TRUSTEE 8.00	BOARD CHAIR 10.00	TRUSTEE 8.00	TRUSTEE 8.00	TRUSTEE 8.00	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION
25,737.	27,237.	23,737.	11,117.	23,736.	23,236.	COMPENSATION
						CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS
						EXPENSE ACCT AND OTHER ALLOWANCES

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 11 (CONT'D)

		22,737.	BOARD VICE CHAIR 10.00	RICK WILLIAMS 534 WEST RESEARCH CENTER BLVD #220 FAYETTEVILLE, AR 72701
			8.00	\prec \wedge
		24.237	TRIINTEE	FAYETTEVILLE, AR 72701 H. PORTER HOLDER
		26,737.	BOARD SECRETARY	LUMLEY
		24,737.	TRUSTEE 8.00	PAT GWIN 534 WEST RESEARCH CENTER BLVD #220 FAYFTTEVILLE. AR 72701
		16,678.	COMMITTEE CHAIR 10.00	MONICA NUVAMSA 534 WEST RESEARCH CENTER BLVD #220 FAYETTEVILLE, AR 72701
		20,737.	TRUSTEE 8.00	MIKE ROBERTS 534 WEST RESEARCH CENTER BLVD #220 FAYETTEVILLE, AR 72701
EXPENSE ACCT AND OTHER ALLOWANCES	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	COMPENSATION	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	NAME AND ADDRESS

NATIVE AMERICAN AGRICULTURE FUND	2020 FORM 990-PF			83-1326044
FORM 990PF, PART VIII - LIST OF OFFICERS,	CERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 11 (CONT'D)
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ROSS RACINE 534 WEST RESEARCH CENTER BLVD #220 FAYETTEVILLE, AR 72701	COMMITTEE CHAIR 10.00	19,237.		
SHERRY SALWAY BLACK 534 WEST RESEARCH CENTER BLVD #220 FAYETTEVILLE, AR 72701	COMMITTEE CHAIR 10.00	29,737.		

GRAND TOTALS

319,637.

990PF, PART VIII - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

	TONI STANGER-MCLAUGHLIN 534 WEST RESEARCH CENTER BLVD SUITE #220 FAYETTEVILLE, AR 72701	SANDY MARTINI 534 WEST RESEARCH CENTER BLVD SUITE #220 FAYETTEVILLE, AR 72701	KATHY CALLAHAN 534 WEST RESEARCH CENTER BLVD SUITE #220 FAYETTEVILLE, AR 72701	VINCE LOGAN 534 WEST RESEARCH CENTER BLVD SUITE #220 FAYETTEVILLE, AR 72701	JANIE HIPP 534 WEST RESEARCH CENTER BLVD SUITE #220 FAYETTEVILLE, AR 72701	NAME AND ADDRESS
TOTAL COMPENSATION =	REGIONAL DIRECTOR 40.00	SR DIR. PROGS & OPS 40.00	COO 40.00	CFO/CIO 40.00	CEO 40.00	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION
945,450.	105,821.	122,990.	168,839.	241,867.	305,933.	COMPENSATION

FORM 990PF, PART XII - CASH DISTRIBUTION EXPLANATION

- 1. THE NATURE AND PURPOSES OF THE PROJECT FOR WHICH THE AMOUNTS ARE TO BE SET ASIDE ARE DESCRIBED AS FOLLOWS:
- 2. THE AMOUNTS SET ASIDE DURING THE 2020 REPORT YEAR FOR THE PROJECT DESCRIBED IN ITEM 1 WILL ACTUALLY BE PAID WITHIN THE 48 MONTH PERIOD THAT ENDS NO MORE THAN 60 MONTHS AFTER THE DATE OF THE SET-ASIDE.
- 3. THE PROJECT WILL NOT BE COMPLETED BEFORE THE END OF THE YEAR IN WHICH THE SET-ASIDE WAS MADE.
- 4. SEE ATTACHMENT FOR A LIST OF THE DISTRIBUTABLE AMOUNTS DETERMINED UNDER IRC SEC. 4942(D) FOR ALL PAST TAX YEARS IN THE TAXPAYER'S START-AND FULL PAYMENT PERIODS.
- 5. SEE ATTACHMENT FOR A LIST OF ACTUAL PAYMENTS MADE IN CASH OR ITS EQUIVALENT FOR EXEMPT PURPOSES DURING EACH TAX YEAR IN THE TAXPAYER'S START-UP AND FULL PAYMENT PERIODS.

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

THE ORGANIZATION (VIA ONLINE APPL.) 534 WEST RESEARCH CENTER BLVD FAYETTEVILLE, AR 72701 479.445.6226

FORM IN WHICH APPLICATION SHOULD BE SUBMITTED AND INFORMATION THEY SHOULD INCLUDE:

APPLICATIONS SHOULD BE COMPLETED ONLINE THROUGH HTTPS://NATIVEAMERICANAGRICULTUREFUND.ORG/GRANTS

QUESTIONS CAN BE DIRECTED TO THE PHONE NUMBER ABOVE OR BY E-MAILING GRANTS@NATIVEAMERICANAGRICULTUREFUND.ORG

SUBMISSION DEADLINES:

2020 SUBMISSIONS WERE DUE BY JUNE 1, 2020

2021 SUBMISSIONS ARE DUE BY JUNE 1,2021

RESTRICTIONS OR LIMITATIONS ON AWARDS:

THE FOUR (4) TYPES OF ELIGIBLE ENTITIES ARE, GENERALLY: 501(C)(3) ORGANIZATIONS OR THEIR FISCAL AGENTS WITH 501(C)(3) STATUS, INCLUDING EDUCATIONAL ORGANIZATIONS, CDFIS OR NATIVE CDFIS, AND TRIBAL GOVERNMENTS (STATE OR FEDERALLY-RECOGNIZED) OR INSTRUMENTALITIES OF THOSE GOVERNMENTS. YOUR FIRST STEP IN AN APPLICATION SUBMITTAL IS TO DETERMINE YOUR ORGANIZATION'S ELIGIBILITY. THE RFA AND FAQ LINKS PROVIDED ON THIS PAGE GIVE GREATER DETAIL CONCERNING ELIGIBLE ENTITY REQUIREMENTS.

83-1326044

FORM 990PF, FART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT

NONE

RECIPIENT NAME AND ADDRESS

FAYETTEVILLE, AR 72701 534 WEST RESEARCH CENTER BLVD SEE ATTACHED SCHEDULES

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

SEE ATTACHED SCHEDULES

11,672,110.

TOTAL CONTRIBUTIONS PAID

11,672,110.

11:39:14 AM

83-1326044

FORM 990PF, FART XV - CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

FC

FAYETTEVILLE, AR 72701 534 WEST RESEARCH CENTER BLVD

SEE ATTACHMENT

RECIPIENT NAME AND ADDRESS

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

SEE ATTACHED SCHEDULES

6,326,486.

TOTAL CONTRIBUTIONS APPROVED

6,326,486.

11:39:14 AM

7144RU K931 6/11/2021

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10. ▶ Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No. 1545-0092

2020

	e of estate of trust			Employer identificat	on nambor	
3	NATIVE AMERICAN AGRICULTURE FUND			83-1326044		
Did	you dispose of any investment(s) in a qualified opportun	ity fund during the ta	x year?		Yes	X No
If "Y	es," attach Form 8949 and see its instructions for additi	onal requirements for	or reporting your gain	n or loss.		
Not	e: Form 5227 filers need to complete only Parts I and II.					
Pa	art I Short-Term Capital Gains and Losses - Gen	erally Assets Held	d One Year or Les	s (see instruction	ns)	
See	instructions for how to figure the amounts to enter on			(g)		Gain or (loss)
the	lines below.	(d) Proceeds	(e) Cost	Adjustments to gain or loss from		ract column (e) column (d) and
This	form may be easier to complete if you round off cents	(sales price)	(or other basis)	Form(s) 8949, Part	l, combir	ne the result with
to w	hole dollars.		-	line 2, column (g)		column (g)
1a	Totals for all short-term transactions reported on Form					
	1099-B for which basis was reported to the IRS and for					
	which you have no adjustments (see instructions).					
	However, if you choose to report all these transactions					
	on Form 8949, leave this line blank and go to line 1b.			al Marchines		
1b	Totals for all transactions reported on Form(s) 8949					
	with Box A checked					
2	Totals for all transactions reported on Form(s) 8949					
	with Box B checked					
3	Totals for all transactions reported on Form(s) 8949					
	with Box C checked					
4	Short-term capital gain or (loss) from Forms 4684, 62	52, 6781, and 8824			1	
					_	
5	Net short-term gain or (loss) from partnerships, S corp				5	
6	Short-term capital loss carryover. Enter the amount					,
	Carriovar Markabaat			For 17th Ad 1980 10 1641 07 18 18	5 (
-	Carryover Worksheet				1	
7	Net short-term capital gain or (loss). Combine line	s 1a through 6 in	column (h). Enter	here and on		,
and the same of	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	s 1a through 6 in	column (h). Enter	here and on	7	,
Pa	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	s 1a through 6 in	column (h). Enter	here and on	ctions)	,
Pa See	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	s 1a through 6 in erally Assets Held	d More Than One	here and on	ctions)	Gain or (loss)
Pa See the	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	s 1a through 6 in erally Assets Held (d) Proceeds	d More Than One	Year (see instru	ctions) (h) (ract column (e) column (d) and
Pa See the This	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	s 1a through 6 in erally Assets Held (d)	d More Than One	here and on Year (see instru	ctions) (h) (Subtifrom combined	ract column (e)
Pa See the This to w	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	s 1a through 6 in erally Assets Held (d) Proceeds	d More Than One	Year (see instru	ctions) (h) (Subtifrom combined	ract column (e) column (d) and ne the result with
Pa See the This to w	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	s 1a through 6 in erally Assets Held (d) Proceeds	d More Than One	Year (see instru	ctions) (h) (Subtifrom combined	ract column (e) column (d) and ne the result with
Pa See the This to w	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	s 1a through 6 in erally Assets Held (d) Proceeds	d More Than One	Year (see instru	ctions) (h) (Subtifrom combined	ract column (e) column (d) and ne the result with
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Pa See the This to w	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	s 1a through 6 in erally Assets Held (d) Proceeds	d More Than One (e) Cost (or other basis)	Year (see instru	ctions) (h) (Subtifrom combined	ract column (e) column (d) and ne the result with column (g)
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Pa See the This to w 8a	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back. It II Long-Term Capital Gains and Losses - Gen instructions for how to figure the amounts to enter on lines below. Form may be easier to complete if you round off cents whole dollars. Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b. Totals for all transactions reported on Form(s) 8949 with Box D checked. Totals for all transactions reported on Form(s) 8949 with Box E checked.	s 1a through 6 in erally Assets Held (d) Proceeds (sales price)	d More Than One (e) Cost (or other basis)	Year (see instru	ctions) (h) (Subtifrom combined	ract column (e) column (d) and ne the result with column (g)
Pa See the This to w 8a 8b	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back. It II Long-Term Capital Gains and Losses - Gen instructions for how to figure the amounts to enter on lines below. Form may be easier to complete if you round off cents whole dollars. Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b. Totals for all transactions reported on Form(s) 8949 with Box D checked. Totals for all transactions reported on Form(s) 8949 with Box E checked. Totals for all transactions reported on Form(s) 8949 with Box F checked.	s 1a through 6 in erally Assets Held (d) Proceeds (sales price)	column (h). Enter d More Than One (e) Cost (or other basis)	Year (see instru (g) Adjustments to gain or loss from Form(s) 8949, Part line 2, column (g)	ctions) (h) C Subt	ract column (e) column (d) and ne the result with column (g)
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Pa See the This to w 8a 8b 9	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back. It II Long-Term Capital Gains and Losses - Gen instructions for how to figure the amounts to enter on lines below. If form may be easier to complete if you round off cents whole dollars. Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b. Totals for all transactions reported on Form(s) 8949 with Box D checked. Totals for all transactions reported on Form(s) 8949 with Box E checked. Totals for all transactions reported on Form(s) 8949 with Box F checked. Long-term capital gain or (loss) from Forms 2439, 46 Net long-term gain or (loss) from partnerships, S corp	s 1a through 6 in erally Assets Held (d) Proceeds (sales price) 1214936475.	column (h). Enter d More Than One (e) Cost (or other basis) 1214628949.	here and on Year (see instru (g) Adjustments to gain or loss from Form(s) 8949, Part line 2, column (g)	ctions) (h) C Subt	ract column (e) column (d) and ne the result with column (g)
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Par	t III Summary of Parts I and II		(1) Panafisiarias	(0) F		Page
A-11	Caution: Read the instructions before completing this part	rt	(1) Beneficiaries' (see instr.)	(2) Es		(3) Total
17	Net short-term gain or (loss)	17	(See Histr.)	or tr	usts	(-)
18	Net long-term gain or (loss):	17				
a	Total for year	18a				207 506
b	Inrecentured section 1250 asia /aca ties 10 - 10	18b				307,526
С	28% rate gain	18c				
19	Total net gain or (loss), Combine lines 17 and 18a	10				207 506
Note	If line 19 column (3) is a not only outer the sain a		edule A (Form 990-T)	Part I line	10) If lines	307,526
Works	re net gains, go to Part V, and don't complete Part IV. If line 19, column sheet, as necessary.	(3),	is a net loss, comple	te Part IV	and the C	apital Loss Carryov
Pari						
Designation of the last of the	Enter here and enter as a (loss) on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, I					
CI	THE 1035 OF THE 19. COMMIN (3) OF IN \$3 OF IN				00 (
Note:	If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, p	age 1	, line 23 (or Form 990	T. Part I	20 (a loss complete th
Part	Jan o your ouplied 1000 carryove			., ,		a loss, complete tr
			2			
there	1041 filers. Complete this part only if both lines 18a and 19 in colur is an entry on Form 1041 line 2b(2) and Form 1041 line 23 is more	nn (2) are gains, or an ar	nount is e	ntered in I	Part I or Part II ar
	is an entry on Form 1041, line 2b(2), and Form 1041, line 23, is more on: Skip this part and complete the Schedule D Tax Worksheet in the installation.					
• Eith	her line 18b, col. (2) or line 18c, col. (2) is more than zero, or	struct	ions if:			
• Bot	th Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.					
Form	990-T trusts. Complete this part only if both lines 182 and 19 are gain	e or	avalified dividends			_
		com	nlete the Schedule	Tox Ma	ed in incom	ie in Part I of For
either	line 18b, col. (2) or line 18c, col. (2) is more than zero.	00111	piete the ochedule	J IAX WVO	rksneet	the instructions
	Enter taxable income from Form 1041, line 23 (or Form 990-T, Part I, I	ino11	\ 04			
22	Enter the smaller of line 18a or 19 in column (2)	IIIE I I) 21			
ł	out not less than zero					
23	Enter the estate's or trust's qualified dividends					
f	from Form 1041, line 2b(2) (or enter the qualified					
C	lividondo includad la laccación de la constante de la constant					
24 /	Add lines 22 and 23					
25	f the estate or trust is filing Form 4952, enter the				H SAL	
6	mount from line As all .					
26 5	Subtract line 25 from line 24. If zero or less, enter -0		-			
27 5	Subtract line 26 from line 21. If zero or less, enter -0-		26			
28 E	Enter the smaller of the amount on line 21 or \$2,650		27			
29 E	enter the smaller of the amount on line 27 or \$2,050		28			
80 S	inter the smaller of the amount on line 27 or line 28	× ×	29			
11 E	Subtract line 29 from line 28. If zero or less, enter -0 This amount is tax inter the smaller of line 21 or line 26	red at		▶	30	
2002		٠.	31			
3 E	subtract line 30 from line 26	٠.	32		7/16	
4 A	inter the smaller of line 21 or \$13,150		33			
5 S	dd lines 27 and 30		34			
6 E	nter the smaller of line 32 or line 35	× ×	35			
7 N	nter the smaller of line 32 or line 35	* *	36			
8 E	lultiply line 36 by 15% (0.15)		1	▶	37	
9 A	nter the amount from line 31		38			
0 S	dd lines 30 and 36		39			
4 14	ubtract line 39 from line 38. If zero or less, enter -0-		40			
1 M 2 Fi	ultiply line 40 by 20% (0.20)				41	
<u>-</u> FI	gure the tax on the amount on line 27. Use the 2020 Tax Rate Schedule for Esta	ites				
ar	nd Trusts (see the Schedule G instructions in the instructions for Form 1041)		42			
3 A	dd lines 37, 41, and 42		43			
4 Fi	gure the tax on the amount on line 21. Use the 2020 Tax Rate Schedule for Esta	tes				
ar	nd Trusts (see the Schedule G instructions in the instructions for Form 1041)		44			
5 Ta	ax on all taxable income. Enter the smaller of line 43 or line 44 here	and	on Form 1041, Sch	nedule		
G,	Part I, line 1a (or Form 990-T, Part II, line 2)				15	

Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side NATIVE AMERICAN AGRICULTURE FUND

Social security number or taxpayer identification number $83\!-\!1326044$

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X	(D)	Long-term	transactions	reported or	Form(s)	1099-B	showing b	basis was	reported to the	e IRS	(see Note	above
												,

(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

1 (a)	(b)	(c)	(d)	(e) Cost or other basis.	See the separate instructions. (f) (g) Code(s) from Amount of		(e) If you enter an amount in co	(h) Gain or (loss).
Description of property (Example: 100 sh. XYZ Co.)	Date acquired (Mo., day, yr.)	Date sold or disposed of (Mo., day, yr.)	Proceeds (sales price) (see instructions)	See the Note below and see <i>Column</i> (e) in the separate			Subtract column (e from column (d) and combine the result	
				instructions			with column (g)	
BB&T(SEE ATTACHED SCHEDULES)	VAR	12/31/2020	366630396.	366345069.			285,327	
NB (SEE ATTACHED SCHEDULES)	7/AR	12/31/2020	848306079.				22,199	
							22/133	
	<u> </u>							
-								
2 Totals. Add the amounts in columns (in negative amounts). Enter each total Schedule D, line 8b (if Box D above is above is checked), or line 10 (if Box	here and include checked), line	de on your 9 (if Box E	1214936475.	214628949			307,526.	

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.