Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Go to www.lrs.gov/Form990 for instructions and the latest information. Open to Public Inspection

Α	For the	he 2023 calen	dar year, or tax	year beginning	9/01	, 2023, and	ending	8/3			2024	
В	Check i	if applicable:	C						D Employe	r identifica	tion number	
	Па	ddress change	Urban Yout	h Impact, I	nc			- 1	91-1	90110	3	
	HN	ame change	P.O. Box 2						E Telephon	e number		
	\vdash	itial return		Beach, FL 3	3422			İ	561-	832-9	220	
	\vdash							ŀ	301	032 3	240	
	⊢ Fic	nal return/terminaled							_		4 505	0.45
	∐ ^	mended return					- 1		G Gross red		4,685,	
	∐ A _i	pplication pending	F Name and addre	ess of principal officer: (Christophe	r Tress			group return			\vdash
			Same As C	Above				: Are all (ال) ".lf "No	subordinates i attach a list.	ncluded? See instruc	tions. Yes	No
I	Tax-	exempt status:	X 501(c)(3)	501(c) ()	(insert no.)	4947(a)(1) or	527					
J	We	bsite: ww	w.urbanyou	thimpact.com	1		H	(c) Group e	exemplion nur	nber		
K	Form	n of organization:	X Corporation	Trust Associati		L Year o	of formation	: 1998	3 Mist	ate of legal	domicile: FL	
Pa	rtl	Summar	V									
Bailba	1	Briefly descri	be the organiza	tion's mission or m	ost significant :	activities:We ex	ist to	o love	e. equi	p, an	d empowe	er
				o fulfill th								
일		after-sc	hool liter	acy interve	ition, soc	ial and emo	otiona	l lea	rning,	colli	ege and	
ä		career r	eadiness.	spiritual e	richment	and explora	ation	of sc	ience.	math	, and ar	ts.
ē	2	Check this bo	ox if the	organization discon	tinued its opera	ations or disposed	of mor	than 2	5% of its n	et asset	s.	
& Governance	3	Number of vo	otina members o	of the governing bo	dy (Part VI, line	a la)		,		3		10
9	4	Number of in	dependent votin	g members of the	governing body	(Part VI, line 1b))			4		10
8	5			mployed in calend						5		52
Activities	6			estimate if necessa						6		30
잘	7a	Total unrelate	ed business revo	enue from Part VIII	, column (C), li	ne 12				7a		0.
-	ь	Net unrelated	d business taxab	ole income from Fo	rm 990-T, Part	I, line 11			, [7b		0.
								Р	rior Year		Current Ye	ear
	8	Contributions	s and grants (Pa	rt VIII, line 1h)				2	,953,9	67.	4,284	659.
	9	Program sen	vice revenue (Pa	art VIII, line 2g)								
Revenue				, column (A), lines				-	-7	95.	4	081.
2	11			umn (A), lines 5, 6					230,9			060.
	12			through 11 (must e				3	,184,0		4,598	
_	13			paid (Part IX, colur					·			
	14											
	15								1,805,042.		1,760	784
60			· ·		_				, 003, 0	12.	1,100	704.
Š	16a			(Part IX, column (
Expenses	Ь			Part IX, column (D)			<u>463.</u>					
ű	17	Other expens	ses (Part IX, col	umn (A), lines 11a	-11d, 11f-24e).			1	,618,9	93.	1,530	,792.
	18			3-17 (must equal Pa				3	,424,0	35.	3,291	,576.
	19	-		tract line 18 from I				=	-239,9		1,307	
-	+	1101011001100							ng of Current		End of Ye	
ō	20	Total assets	(Part X line 16))					,054,8		8,527	
	-			26)					377,7			,663.
No.											7,984	
	_			Subtract line 21 fr	om line Zu			1 6	6,677,1	IU.I	1,984	, 334.
Beattite	art II	Signatu										
Und	ler pena	alties of perjury, I d	lectare that I have exa	mined this return, including is based on all informations.	ng accompanying so	hedules and statement or has any knowledge.	s, and to th	e best of m	y knowledge :	and belief,	it is true, correct	, and
	ibiete: r	Jecial audit of prep	arer (date) disar onico	Ty is bested on an interprine	adii di madi prepo.				Salat			
								Dale	9171	2085		
Sign		Signature o	romcer				_					
He	ere		topher Tre	SS			Pı	eside	ent			
			nt name and title							T 1		
		Print/Type	preparer's name	Properti	S Signature	Da CAA Da	ite		Check _] if F31	IN	
p,	aid	Dusta	n Brown, C	PA (1/11/4	CTUPA	1/31/	75	self-employe	d P(1520825	- 1
	epar				MARTIN &	SELLARI, LL	C					
Us	se Oı	nly Firm's add		LLAGE BLVD,	SUITE 110				Firm's EIN	59-1	498723	
					FL 33409				Phone no.		86-1110	
Ma	v the	IRS discuss #		ne preparer shown		structions					X Yes	No
	.,			5. ab a. a. a.								

Form 990 (2023) Urban Youth Impact, Inc
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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	3		Х
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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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? If "Yes," complete Schedule D, Part I.	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, 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 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 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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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		Х
c	: 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		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		·X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		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	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Form 990 (2023) Urban Youth Impact, Inc

Part IV | Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	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		Х
Ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	1
c	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		
c	I 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		Х
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		Х
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% controlled entity or family member of any of these persons? <i>If</i> "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled 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, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	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		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	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		Х
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		X
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	140
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
3 / /			agn (2022

Form 990 (2023) Urban Youth Impact, Inc

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х				
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 Accounts (FBAR).							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?							
	Organizations that may receive deductible contributions under section 170(c).							
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х				
d	If "Yes," indicate the number of Forms 8282 filed during the year	, ,	100					
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X				
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a							
8								
_	organization have excess business holdings at any time during the year?	8		910 T 11				
	Sponsoring organizations maintaining donor advised funds.							
	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b						
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	ЭD						
	Initiation fees and capital contributions included on Part VIII, line 12			111				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		100					
	Section 501(c)(12) organizations. Enter:							
	Gross income from members or shareholders							
	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b							
	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	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.							
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
	Enter the amount of reserves on hand			v				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	14b						
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		X				
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X				
	If "Yes," complete Form 4720, Schedule O.							
	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would	17						
	result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17						

Form 990 (2023) Urban Youth Impact, Inc 91-1901103 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI...... Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 10 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent 10 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee?... See Schedule O... 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Х Did the organization make any significant changes to its governing documents Х since the prior Form 990 was filed?..... 4 5 6 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 more members of the governing body?..... 7a Χ b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... X X b Each committee with authority to act on behalf of the governing body?..... 8h Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O...... X 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No 10a Did the organization have local chapters, branches, or affiliates?..... Х 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... X 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ to conflicts?..... 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Χ 12c Schedule O how this was done...... X 13 Did the organization have a written whistleblower policy?..... 13 X 14 Did the organization have a written document retention and destruction policy?..... 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official. See. Schedule. Q............... 15a X X 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year?..... b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?..... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed FLSection 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) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records.

See Schedule O

Form 990 (2	023) Ur	ban Y	outh I	Impact,	Inc

91-1901103

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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.....

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Position (E)
Reportable
compensation from
related organizations
(W-2/1099MISC/1099-NEC) (A) Name and title (F) (B) (do not check more than one Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) Estimated amount of other compensation from the organization and related box, unless person is both an officer and a director/trustee) Average hours per week (list any hours for Individual trustee Key employee employee Institutional trustee Highest compensated Former organizations related organiza-tions below dotted 40 (1) Christopher Tress President 0 X Χ 55,000 0 0. (2) Rev. Dr. Bob Norris 2 Board Member 0 Χ 0. 0 0. (3) Berry Williams 2 Treasurer 0 Χ 0 0. 0 (4) Aimee Nelson___ 2 Board Member 0 Χ 0 0 0. (5) Rob Morris 2 Board Member 0 X Χ 0. 0 0 (6) Brian McPherson 2 0. Board Member 0 Χ X 0 0 (7) Joe Morrison 2 Х Co-Chairman 0 0 0 0. (8) Rob Rabenecker 2 Secretary 0 X Х 0 0 0. 2 (9) Andrew Cornell Co-Chairman 0 Х 0 0 0. (10) Williams Hobbs 10 Founder 30 Х 0 0. 0 (11)(12)(13) (14)

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A) Name and title	(B) Average hours	box,	unle: er an	Pos heck ss pe d a d	rson irecto	than o is both or/truste	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	the organization and related organizations
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal								55,000.		
c Total from continuation sheets to Part VII, Section									0	
d Total (add lines 1b and 1c)									0 of reportable com	
from the organization 0										Yes No
3 Did the organization list any former officer, direct on line 1a? <i>If "Yes,"complete Schedule J for sucl</i>	n individua	al								3 Х
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	r than \$1	50,00	00?	lf "ነ	'es, '	' com	ıple	er compensation t ete Schedule J for	rom	4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	compens ," comple	satio te S	n fro	om a dule	any <i>J fo</i>	unrel <i>r suc</i>	ate ch p	d organization or person	individual	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compens	ated inde	neno	dent	cor	itrac	tors	that	t received more th	an \$100 000 of	
compensation from the organization. Report compens	sation for t	he ca	alend	lar y	ear	endin	ig w	with or within the org	ganization's tax yea	
(A) Name and business addr	ess							(B) Description o	f services	(C) Compensation
Total number of independent contractors (including be \$100,000 of compensation from the organization	ut not limit 0	ed to	thos	se li:	sted	abov	e) v	vho received more	than	

	,	0 - 2 4 4 4	T O G C 11	-mpacc.	, -
Part VIII	State	ment of	Revenu	ue	

	Check if Schedule O contains a response or note to any 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		
Ř, Ř	1a	Federated campaigns	1a						
ran	b	Membership dues	1b						
Contributions, Gifts, Grants,	С	Fundraising events	1c						
	d	Related organizations	1d	100					
S, E	е	Government grants (contributions)	1e		-11		100		
bution ther S	f	All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in	1f 4,284,659.						
Ę	Y	lines 1a-1f	1g 191,231.						
ů k	h	Total. Add lines 1a-1f		4,284,659.					
ne			Business Code						
Program Service Revenue	2a b								
Χįς	C								
Ser	d								
E	е								
g	f	All other program service revenue							
<u>P</u>	g					100000000000000000000000000000000000000			
	3	Investment income (including dividen other similar amounts)	ds, interest, and	4 001			4 001		
	4	Income from investment of tax-exe		4,081.			4,081.		
	5								
	3	Royalties							
	6a		(ii) r Gradital	-					
		Less: rental expenses 6b		100		10.5			
		Rental income or (loss) 6c					Section 1		
	1	Net rental income or (loss)			(49)				
	Į	(i) Securit							
	/a	sales of assets					(1) and (1)		
		other than inventory 7a							
	מ	Less: cost or other basis and sales expenses 7b							
	С	Gain or (loss) 7c							
	1	Net gain or (loss)							
nue		Gross income from fundraising events (not including \$							
, Ve		of contributions reported on line 1c).							
Æ		See Part IV, line 18	8a 396,959.	100	36				
Other Revenu		Less: direct expenses	8b 87,047.			100			
₹	С	Net income or (loss) from fundraisi		309,912.			309,912.		
	9a	Gross income from gaming activities. See Part IV, line 19	9a						
	b	Less: direct expenses	9b						
	С	Net income or (loss) from gaming a	activities						
	10a	Gross sales of inventory, less							
		Gross sales of inventory, less returns and allowances	10a		100		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		Less: cost of goods sold	10b						
	С	Net income or (loss) from sales of							
9			Business Code						
ianeous Penue	11a b c d	Other_Revenues	812900	148.	148.				
	b								
פַּ נַי	C	All II	-						
		All other revenue							
		Total. Add lines 11a-11d		148.					
	12	Total revenue. See instructions		4,598,800.	148.	0.	313,993.		

Form 990 (2023) Urban Youth Impact, Inc Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

-	Check if Schedule O contains a response or note to any line in this Part IX								
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.								
2	Grants and other assistance to domestic individuals. See Part IV, line 22								
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16								
4 5	Benefits paid to or for members	55,000.	48,400.	4,400.	2,200.				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.				
7	Other salaries and wages	1,487,895.	1,309,347.	119,032.	59,516.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)								
9	Other employee benefits	88,703.	78,059.	7,096.	3,548.				
10	Payroll taxes	129,186.	113,684.	10,335.	5,167.				
11	Fees for services (nonemployees):								
а	Management								
b	Legal								
	Accounting								
d	Lobbying.								
е	Professional fundraising services. See Part IV, line 17			10 march 1 mm 1 mm					
f	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25, column								
10	(A), amount, list line 11g expenses on Schedule Ó.) Advertising and promotion	17 265	10 677	1 010	2 770				
13	Office expenses	17,365. 3,978.	12,677.	1,910. 438.	2,778. 636.				
14	Information technology.	3,918.	2,904.	438.	030.				
15	Royalties								
16	Occupancy		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						
17	Travel	1,467.	1 071	161.	235.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	1,407.	1,071.	161.	233.				
19	Conferences, conventions, and meetings								
20 21	Interest	14,055.	10,260.	1,546.	2,249.				
22	Depreciation, depletion, and amortization	236,849.	198,953.	37,896.					
23	Insurance	169,466.	123,710.	18,641.	27,115.				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)								
а	Donations & Benevolence	303,227.	221,356.	33,355.	48,516.				
	Facilities	241,635.	176,394.	26,580.	38,661.				
	In Kind Donation	107,122.	78,199.	11,783.	17,140.				
	Professional Services	97,655.	71,288.	10,742.	15,625.				
е	All other expensesSee.SchO	337,973.	246,719.	37,177.	54,077.				
25	Total functional expenses. Add lines 1 through 24e	3,291,576.	2,693,021.	321,092.	277,463.				
	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).								

		Check if Schedule O contains a response or note to	o any li	ine in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			224,609.	1	560,043.
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net		· · · · · · · · · · · · · · · · · · ·		3	
	4	Accounts receivable, net		· · · · · · · · · · · · · · · · · · ·	5,036.	4	
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pe	ner offic I contri rsons.	cer, director, butor, or 35%		5	
	6	Loans and other receivables from other disqualified posection 4958(f)(1)), and persons described in section		·		6	
	7	Notes and loans receivable, net			7		
ψ	8	Inventories for sale or use		L L		8	
Assets	9	Prepaid expenses and deferred charges		<u>L</u>	66,001.	9	62,393.
AS			j j	Language Control of the Control of t	00,001.		02,393.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	10,216,780.			
	b	Less: accumulated depreciation		2,311,219.	6,759,241.	10c	7,905,561.
	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		7,054,887.	16	8,527,997.	
	17	Accounts payable and accrued expenses			39,719.	17	227,963.
	18	Grants payable				18	
	19	Deferred revenue		19			
İ	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability. Complete Part I'		<u></u>		21	
Liabilities	22	Loans and other payables to any current or former off key employee, creator or founder, substantial contribu- controlled entity or family member of any of these per	itor, or	35%		22	
7	23	Secured mortgages and notes payable to unrelated th		L	151,230.	23	173,264.
	24	Unsecured notes and loans payable to unrelated third		ļ		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Comp	•		186,828.	25	142,436.
_	26	Total liabilities. Add lines 17 through 25	<u>.</u>	<u>.</u>	377,777.	26	543,663.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.		X			
ā	27	Net assets without donor restrictions			6,112,903.	27	7,469,190.
ä	28	Net assets with donor restrictions			564,207.	28	515,144.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, check and complete lines 29 through 33.	ck here			1	
5	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equipment		<u> </u>		30	,
88	31	Retained earnings, endowment, accumulated income,	or othe	er funds		31	
7	32	Total net assets or fund balances			6,677,110.	32	7,984,334.
ž	33	Total liabilities and net assets/fund balances			7,054,887.	33	8,527,997.
D A /	1		TEE AO11	11 08/23/23			F 000 (0000)

	JI		
Pa	rt XI Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,598,800.
2	Total expenses (must equal Part IX, column (A), line 25).	2	3,291,576.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,307,224.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,677,110.
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	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		
	column (B))	10	7,984,334.
Pai	t 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 O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis		
D	Were the organization's financial statements audited by an independent accountant?		2b X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both.	ate	
	Separate basis X Consolidated basis Both consolidated and separate basis		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?	,	2c X
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R. Part 200, Subpart F?		3a X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b
BAA	TEEA0112L 08/23/23		Form 990 (2023)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization Employer identification number										
Urban Youth Impact, Inc	;				91-190110	13				
Part I Reason for Public Ch						ctions.				
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)										
1 A church, convention of church	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2 A school described in section	on 1 70(b)(1)(A)(ii). (At	tach Schedule E (Form	990).)							
3 A hospital or a cooperative	hospital service organ	nization described in se	ction 170	0(b)(1)(A)(iii).					
4 A medical research organiz	ation operated in conj	unction with a hospital	describe	d in se	ction 170(b)(1)(A)(iii). E	Inter the hospital's				
name, city, and state:										
5 An organization operated for section 170(b)(1)(A)(iv). (C	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)									
6 A federal, state, or local go	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v) .									
7 X An organization that normally in section 170(b)(1)(A)(vi).	receives a substantial (Complete Part II.)	part of its support from a	governm	ental un	it or from the general pul	blic described				
8 A community trust describe	d in section 170(b)(1)	(A)(vi). (Complete Part	II.)							
9 An agricultural research organ or university or a non-land-gra university:	ant college of agriculture	e (see instructions). Ente	r the nam							
from activities related to its investment income and unre	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)									
11 An organization organized a										
An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) . See section 509(a)(3) . Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.										
a Type I. A supporting organizat organization(s) the power to recomplete Part IV, Sections	ion operated, supervise egularly appoint or elec									
b Type II. A supporting organi management of the supporting must complete Part IV, Sec	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), by the supported organizati	having control or ion(s). You				
c Type III functionally integrated organization(s) (see instruct	I. A supporting organizations). You must com	tion operated in connectio	n with, an A, D, and	nd function	onally integrated with, its	supported				
d Type III non-functionally integrated. The instructions). You must com	grated. A supporting orgorganization generally uplete Part IV, Section	panization operated in cor must satisfy a distribuns A and D, and Part V.	nection v tion requ	with its s uiremen	supported organization(s) t and an attentiveness	that is not requirement (see				
e Check this box if the organize integrated, or Type III non-fi	zation received a writt	en determination from	the IRS t							
f Enter the number of supported	•									
g Provide the following information	on about the supported	d organization(s).								
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is organizati in your go docum	on listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
			Yes	No						
(A)						Account of the second of the s				
<u> </u>										
(B)										
(C)										
(D)										
(E)										
Total			1							

Schedule A (Form 990) 2023

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support									
Cale beg	endar year (or fiscal year inning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,014,038.	2,753,462.	3,028,491.	2,953,206.	4,284,659.	16,033,856.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.		
4	Total. Add lines 1 through 3	3,014,038.	2,753,462.	3,028,491.	2,953,206.	4,284,659.	16,033,856.		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.		
6	Public support. Subtract line 5 from line 4						16,033,856.		
Sec	tion B. Total Support	-							
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
7	Amounts from line 4	3,014,038.	2,753,462.	3,028,491.	2,953,206.	4,284,659.	16,033,856.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	409.	140.	157.	78.	3,534.	4,318.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on	103.		107.	, ,	3,331.	0.		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). See Part VI.	182,709.	216,669.	268,651.	230,808.	309,912.	1,208,749.		
11	Total support. Add lines 7 through 10					100	17,246,923.		
12	Gross receipts from related activ	ities, etc. (see ins	structions)				0.		
13	First 5 years. If the Form 990 is to organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or fi	fth tax year as a	section 501(c)(3)			
Sec	tion C. Computation of Pub	olic Support P	ercentage						
	Public support percentage for 20						92.97%		
	Public support percentage from 2					L	91.06%		
16a	ia 33-1/3% support test—2023. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization								
	33-1/3% support test—2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization								
17a	a 10%-facts-and-circumstances test—2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization								
b	10%-facts-and-circumstances teror more, and if the organization rorganization meets the facts-and	neets the facts-ar	nd-circumstances	test, check this b	ox and stop here.	. Explain in Part \	/I how the		
18	Private foundation. If the organiz	ation did not ched	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see ins	tructions		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b					-	
	Public support. (Subtract line 7c from line 6.)		Depth State Control				
	tion B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
	Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is organization, check this box and	stop here		third, fourth, or fi	tth tax year as a s	section 501(c)(3)	
	tion C. Computation of Pul Public support percentage for 20			no 13 column (4)		1161	 %
	Public support percentage for 20 Public support percentage from 2						
	tion D. Computation of Inv						7
	Investment income percentage for				mn (fl)	17	%
	Investment income percentage fr					ļ <u>-</u>	
19a	33-1/3% support tests—2023. If t is not more than 33-1/3%, check	he organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33-1/3%, and	I line 17
b	33-1/3% support tests—2022. If the line 18 is not more than 33-1/3% Private foundation. If the organize	he organization di , check this box a	d not check a box nd stop here. The	on line 14 or line organization qua	e 19a, and line 16 alifies as a publicly	is more than 33-1 y supported organ	1/3%, and ization
_,,	i iivate iounuation, ii the organiz	anon dia not chet	A A DOX OIL IIIIE I	-, , 13a, 01 130, C1	iccy ii iio nox ai ii	366 HI2HI4CHOH2	

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI,** including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Ye. answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1	163	NO
	2		
	3a		
n	3b		F
	3c		
	4a		
	4b		
at	4c		
	5a		
!	5b		
;	5c 6		
	7		
s,"	8		
	9a 9b		
	9с		
s, "	10a		
	10b		

	Cit Capporting Organizations (Continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?	Y	es	No
	a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
	b A family member of a person described on line 11a above?	11b		
	C A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		
Se	ction B. Type I Supporting Organizations			
		Y	es	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
		Ye	es	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	Y (es	No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
;	The organization satisfied the Activities Test. Complete line 2 below.			
į	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
(The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instructio	ons)	
2	Activities Test. Answer lines 2a and 2b below.	Ye	s	No
i	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ŀ	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
ā	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
t	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

	Check here if the avanishing actional the lateral Dest Test as a multi-line two			D-11/1/2 Con
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	st on i	st complete Sections A	through E.
Sec	ction A — Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		· · · · · · · · · · · · · · · · · · ·
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		Part 11, 11, 11, 11, 11, 11, 11, 11, 11, 11
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6 	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		Patracovo
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	grated	Type III supporting orga	anization
BAA			Sched	dule A (Form 990) 2023

Pai	t V Type III Non-Functionally Integrated 509(a)(3) So	upporting Organiza	tions (continue	<u>d)</u>	
Sec	tion D — Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu		1		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	·,	2		
3	Administrative expenses paid to accomplish exempt purposes of s		3		
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - provide		5		
6	Other distributions (describe in Part VI). See instructions.		6		
7	Total annual distributions. Add lines 1 through 6.		7		
8	Distributions to attentive supported organizations to which the organizati in Part VI). See instructions.	details	8		
9	Distributable amount for 2023 from Section C, line 6		9		
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2023	ns	(iii) Distributable Amount for 2023

Section E $-$ Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6		Charles (Honores	
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020	100 mg/s		
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			According to
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:	Jan 1		
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			13177
d Excess from 2022	Section 1997		
e Excess from 2023			

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Schedule A (Form 990) 2023

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Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II, Line 10 - Other Income

Nature and Source	 2023	 2022	 2021	 2020	 2019
				216,669. 216,669.	182,709. 182,709.