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Form	93	<i>9</i> 0			U	•					2022	
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.					2022				
-					rs.gov/Form990 for			, .			Open to Publi	ic
		f the Treasury nue Service	-		101	mstructions	and the		nation.		Inspection	
A F	or th	ne 2022 ca	alendar year,	or tax year b	eginning 05-01-20	22 , and endi	ing 04-3	0-2023				_
B Che	eck if a	applicable:	C Name of organ	nization HBORHOOD NET	TWORK				D Employe	er identi	ification number	
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	ime ci itial re	hange eturn	Doing busines	s as					-			
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			ST PAUL, MN		e, country, and ZIP or fore	eign postal code			G Gross red	eipts \$	1,438,763	
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I Ta:	x-exe	mpt status:	5 01(c)(3)	501(c) () 🖣 (insert no.) 🛛 🗌	4947(a)(1) or	527		lo," attach a li	st. See	instructions.	
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Revenue Activities &	23 45 67 89 10 11 12 13 14 15 16 6 5 17 18 19 20 21	MEDIA AN TECHNIQU LITERACY Check thi Number of Number of Total num Total num Total num Total num Total num Total num Total num Other rev Total reve Grants an Benefits p Salaries, Other rev Total fundra Other exp Total fundra Other exp Total asse Total asse Total liabi	D LEADERSHIP IES; PROVIDIN COURSES TO N s box P of voting memb of independent aber of individu aber of volunte elated business ated business (Part VIII, enses. Add line less expenses. ates (Part X, line lities (Part X, line	SKILLS TO YG G FOUR CABL (OUTH, ADULT Deers of the gov voting membe als employed ers (estimate ers (estimate ers (estimate ers (estimate als employed ers (estimate ers (estimate arevenue from axable income s (Part VIII, lin t VIII, column , column (A), I s 8 through 11 unts paid (Part ation, employ fees (Part IX, Part IX, column , column (A), I s 13–17 (mus Subtract line 16) ne 26)	VOICE, AND BUILD C DUTH; TRAINING ADU E CHANNELS PROGRA S, AND NEW IMMIGR rerning body (Part VI, ers of the governing b in calendar year 2022 if necessary) n Part VIII, column (C), e from Form 990-T, Pa e 1h) e 2g) (A), lines 3, 4, and 7c lines 5, 6d, 8c, 9c, 10 (must equal Part VIII, IX, column (A), lines IX, column (A), lines IX, column (A), line 4 ee benefits (Part IX, c column (A), line 11e) (D), line 25) ► <u>111,745</u> lines 11a–11d, 11f–24 t equal Part IX, column 18 from line 12	OMMON UNDER UTS IN BASIC / MMED WITH LC ANTS FROM AC int 1a) 	AND ADV/ DCALLY PI ROSS TH 		MPLISH THIS RA, EDITING, INTENT; AND ES.	LIGHT. TEACHI TEACHI 3 4 5 6 7a 7b 7b 7b 7b 7b 7b 7b 7b 7b 7b	ING, AND SOUND ING DIGITAL Current Year 1,252,5 180,8 2,0 3,3 1,438,7 25,3 1,003,1 	10 49 5 0 0 0 5 7 6 313 0 6 313 0 6 308 7 6 313 0 6 308 7 6 313 0 6 313 352 0 149 149 149 149 149 149 149 149

 Signature DIOCK

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

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						2024-01-30	
Sign	Sig	nature of officer				Date	
Here							
		VIER VAZQUEZ EXECUTIVE DIRECT be or print name and title	UR				
	/ //	· Print/Type preparer's name	Preparer's s	ianature	Date		PTIN
D - ! -!		Find type preparer's name	Freparer s s	ignature	2024-01-30	Check 🗌 if	P00965922
Paid		Firm's name FREDPATH AND				self-employed Firm's EIN > 9	02-0370318
	barer		COMPANY LLC			FILLIN F 9	2-03/0318
Use	Only	Firm's address 🕨 4810 WHITE B	EAR PARKWAY			Phone no. (651) 426-7000
		WHITE BEAR L	AKE, MN 55110			_	
		uss this return with the prepar					. 🗹 Yes 🗌 No
For Pa	aperwork	Reduction Act Notice, see t	he separate instru	ictions.	Cat. N	No. 11282Y	Form 990 (2022)
				— Page 2 ———			
-							
Form	990 (2022)						Page 2
Par	t III Sta	atement of Program Ser	vice Accomplish	ments			
	Che	eck if Schedule O contains a re	sponse or note to a	ny line in this Part III			🗹
1	Briefly des	cribe the organization's missio	n:				
		VOICES AND STORIES FROM					
		HENTIC VOICE, AND BUILD CO H; TRAINING ADULTS IN BASI					
							TO YOUTH, ADULTS, AND NEW
IMMIG	GRANTS FR	OM ACROSS THE TWIN CITIES					
2	Did the or	ganization undertake any signi	ficant program servi	ces during the year w	hich were not lis	ted on	
	the prior F	orm 990 or 990-EZ?					🗌 Yes 🗹 No
	If "Yes," de	escribe these new services on	Schedule O.				
3	Did the or	ganization cease conducting, o	r make significant cl	hanges in how it cond	ucts, any progra	m	
	services?						. 🗌 Yes 🔽 No
	If "Yes," de	escribe these changes on Sche	dule O.				
4	Describe t	he organization's program serv	vice accomplishment	s for each of its three	largest program	services, as n	neasured by expenses.
		1(c)(3) and 501(c)(4) organiz		to report the amount of	of grants and allo	ocations to oth	iers, the total expenses,
	and reven	ue, if any, for each program se	rvice reported.				
4a	(Code:) (Expenses \$	533,658	including grants of \$	0) (Revenue \$	121,391)
та	•	(TECHNOLOGY EDUCATION PROJEC					
	INFORMATIO	ON AND COMMUNICATION TECHNO	LOGY IN THE TWIN CIT	IES AND THOSE WHO DO	N'T (THE "DIGITAL	DIVIDE"). THE (ONLY AMERICORPS PROGRAM IN
		TACKLING THIS ISSUE, CTEP PLAC					
	TENCIT BIO				, civic, Eboc, (10		
4b	(Code:) (Expenses \$	562,812	including grants of \$	25 252) (Revenue \$	6,739)
40	•	CATION - SPNN SERVES AS THE PU			· · · · · · · · · · · · · · · · · · ·	, ,	
	TEAM OFFER	RS ACCESS TO EQUIPMENT, COMPU	TERS, PROFESSIONAL	MEDIA SOFTWARE AND T	ELEVISION STUDIO	SPACE FOR CO	MMUNITY MEMBERS,
		AL AND COMMUNITY PARTNERS AN SED PROGRAMS FOR OUR YOUTH.	ID LOCAL NONPROFIT C	RGANIZATIONS TO PROD	DUCE MEDIA CONTE	ENT. THE TEAM A	LSO HAS DROP IN SPACE AND
	CONORT DA	SED PROGRAMS FOR OUR FOUTH.					
4 -	(0.)	N/=) (D	
4c	(Code:) (Expenses \$ PRODUCTIONS - THE SPNN COMM	410,854	including grants of \$) (Revenue \$	54,650)
		VICES AND BY COVERING MANY IM					
		ING HUNDREDS OF HOURS OF CON IN ADDITION TO PRODUCTION AN					
		TH CONTENT 24/7. CHANNELS 14 A					
		CHANNEL 16 IS DEDICATED TO EDU					
	COMMUNITY	TO SPNN PRODUCTIONS, WHICH C	JUVER A WIDE VARIELI		L, CIVIC AND INFO	JAMAI IONAL AC	TIVITILO IN THE SALINT PAUL
	(Code:) (Expenses \$		including grants of \$) (Revenue \$	1,341)
		, (Ξλροπους φ		φ		, (-, ,
_							
4d	Other prog	gram services (Describe in Sch	edule O.)				
	(Expenses	\$ i	including grants of \$	i) (Revenue s	\$	1,341)
4e	Total pro	gram service expenses 🕨	1,507,32	4			
and the second se							

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Page 3

Par	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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. 🗐	2	Yes	
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		No
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	Yes	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 🗐 .	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D</i> ,Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 🐒	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 😼	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		No
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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 🔞	11a	Yes	
	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? <i>If "Yes," complete Schedule D, Part VII</i> 🗐	11b		No
	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? <i>If "Yes," complete Schedule D, Part VIII</i> 2	11c		No
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	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🗐	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
b	Schedule D, Parts XI and XII 😒	12a 12b	Yes	No
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			
		13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		No
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		No
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		No
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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	

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Par	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	Yes	
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		No
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . $\$.	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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? <i>If "Yes," complete Schedule L</i> , Part I	25b		No
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 "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV			
~	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete	28b		No
C	Schedule L, Part IV	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	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	Yes	
Pa	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			
			Vec	No

1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable $\$.

 ${\bm b}~$ Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable ~ .

1a	84	
1b	0	

С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	
	(gambling) winnings to prize winners?	1c

Yes

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Form	990	(2022)

Page 5

Pa	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
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	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year?If "No" to line 3b, provide an explanation in 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		No
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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $$.	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? \cdot .	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	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			<u> </u>
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No

b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	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? If "Yes," see the instructions and file Form 4720, Schedule N.	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			No
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17		
		F	orm 99	0 (2022)
	Page 6			
Form	990 (2022)			Page 6
Pai	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "N lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI		onse to	
Se	ction 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 in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
-	officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? $$.	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
	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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	L
	Each committee with authority to act on behalf of the governing body?	8b	Yes	<u> </u>
	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code		
10-	Did the eventiantion have lead charters have been as officiated	10-	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
D	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?	11a	Yes	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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			l

	ents?	• •		•	•	·			16b		
Section C. Disclosure											
17 List the states with which a copy of thi	is Form 990 is requ	uired t	o be filed	MN							
18 Section 6104 requires an organization 501(c)(3)s only) available for public in				A, if	app				section		
✓ Own website ✓ Another's web	·	-									
19 Describe in Schedule O whether (and i	f so, how) the org	anizati	on made its g	overi	ning	docu	men	ts, conflict of int	erest		
 policy, and financial statements availal State the name, address, and telephor THE ORGANIZATION 550 VANDALIA 	ne number of the p	erson	who possesse					's books and rec	ords:		
FILL ORGANIZATION 350 VANDALIA	STREET 170 5	IFAUL	-, MI 55114 (0	51).	224	-5155			F	orm 990	(2022
			Page 7 —								
			5								
Form 990 (2022) Part VII Compensation of Officers	s Directors Tr	ustee	s Key Emn	lov	000	Hia	hee	t Compensat	ed Employee		Page 7
and Independent Contra		ustee	s, key Emp	ioy	203	, mg	nea	st compensat	eu Employee		
Check if Schedule O contains a	response or note	to any	line in this Pa	rt VII							
Section A. Officers, Directors, Tru	stees, Key Em	ploye	es, and Hig	hes	st C	omp	ens	ated Employ	ees		
La Complete this table for all persons require rear.	ed to be listed. Rep	port co	mpensation fo	r the	e ca	lendar	- yea	ar ending with or	within the orga	nization's	tax
List all of the organization's current off					als c	or orga	aniza	ations), regardle	ss of amount		
 f compensation. Enter -0- in columns (D), (List all of the organization's current key 		•			def	initior	of	"kev emplovee "			
 List the organization's five current high 	est compensated e	mploy	ees (other tha	n an	offi	cer, d	irect	or, trustee or ke			
ho received reportable compensation (box ne organization and any related organization		x 6 of	Form 1099-MI	SC,	and	or bo	x 1	of Form 1099-NE	C) of more than	\$100,00	0 from
 List all of the organization's former offic 		s, or h	nighest compe	nsate	ed e	mploy	vees	who received m	ore than \$100,0	00	
of reportable compensation from the organiz	•		-								
 List all of the organization's former dire 	ectors or trustees	that	received in th	0 C 2 I	naci	-					
organization, more than \$10,000 of reportab									trustee of the		
	le compensation f	om th							trustee of the		
	le compensation fi list the persons a	om th bove.	e organization	and	any	relat	ed c	organizations.			
ee the instructions for the order in which to Check this box if neither the organizatio (A)	le compensation fi list the persons a n nor any related o (B)	rom th bove. organiz	e organization zation compen (C	and sate	any dan	ý relat	ed c	officer, director,	or trustee.	(F	
ee the instructions for the order in which to Check this box if neither the organizatio	le compensation fi list the persons a n nor any related o (B) Average hours per	rom th bove. organiz Pos one	e organization zation compen (C ition (do not c box, unless p	and sate) heck ersoi	any d an a mo n is	relat y curr re tha both a	ed c rent an an	organizations. officer, director, (D) Reportable compensation	or trustee. (E) Reportable compensation	Estim amou	ated nt of
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0.50

.....

I

(6) AQIULA COLLINS

(7) ANGIE LYNCH

(8) KYLE MAREK-SPARTZ

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

0 Х 0 0 0.50 Х 0 0 0 0.50 Х 0 0 0

	-	-		 			
(9) SIMONA ZAPPAS	0.50	x			0	0	0
BOARD MEMBER	T	^			0	0	0
(10) ROBIN HICKMAN	0.50	x			0	0	0
AT LARGE	1	^			0	0	0
(11) MARTIN LUDDEN	40.00		х		79,330	0	2,127
EXECUTIVE DIRECTOR	Ī		~		73,550	0	2,127
	I	1				F	orm 990 (2022)

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Page **8**

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list	Positi box,	(C) on (do not cheo unless person i and a directo	:k m s bo	oth a	n offic	one er	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	organization (W- 2/1099- MISC/1099-NEC)	organizations (W-2/1099- MISC/1099-NEC)	from the organization and related organizations
1b Sub-Total			<u> </u>			•	-	<u> </u>		<u> </u>
c Total from continuation sheet d Total (add lines 1b and 1c) .							F	79,330	0	2,127

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 0 2

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

_	Yes	No
3		No

4	For any individual listed on line 1a, is the sur organization and related organizations great individual				the	4 No	0
5	Did any person listed on line 1a receive or ar services rendered to the organization?If "Yes	•	,		vidual for	5 N	0
Se	ection B. Independent Contractors						
1	Complete this table for your five highest com					pensation	
	from the organization. Report compensation		ear ending with or wi	thin the organization			
	(A) Name and busin			Descr	(B) iption of services	(C) Compensatio	n
	Total number of independent contractors (inclu compensation from the organization > 0	iding but not limite	d to those listed abo	ve) who received mo	ore than \$100,000	of	
						Form 990 (20	022)
			Page 9				
Form	n 990 (2022)					5	~~ •
	art VIII Statement of Revenue					Pag	ge 9
Γċ	Check if Schedule O contains a resp	onse or note to an	v line in this Part VIII			<i>.</i> .	כ
			(A)	(B)	(C)	(D)	
			Total revenue	Related or	Unrelated business	Revenue excluded fror	m
				exempt function	revenue	tax under secti	
				revenue		512 - 514	
	Federated campaigns 1a						
	ributions,						
	Membership dues 1b						
Othe	erAmt						
Ar f io	Fundraising events 1c						
d	Related organizations 1d						
е	Government grants (contributions) 1e						
	253,224						
f	All other contributions, gifts, grants,						
	and similar amounts not included 1f						
_	999,352 Noncash contributions included in						
	lines 1a - 1f:\$ 1g						
h	Total. Add lines 1a-1f	• • 1,252,576					
		Business Code					
	2a CTEP PARTNER FEES	517000	121,283	121,283			
a							
u a) PRODUCTION SERVICES	517000	27,565	27,565			
Service Revenue				17.970			
9	: RENTAL INCOME	531190	17,870	17,870			
ž	BUUCATION AND TRAINING		6,180	6,180			
		611430		0,200			
am						_	
Prodram	2						
á	-		7,915	7,915		+	
	f All other program service revenue.		.,	.,			
	9 Total. Add lines 2a–2f	180,813					
	3 Investment income (including dividends, int		2.055				0.000
	similar amounts)		2,066			2	2,066
	4 Income from investment of tax-exempt bon	d proceeds 🕨 🕨					
1		- 1		I I		•	

5 Royalties			🕨	l			
	$\prod_{i=1}^{n} [$	(i) Real	(ii) Personal				
6a Gross rents	6a	3,200	D				
b Less: rental expenses	6b	(5	1			
c Rental income or (loss)	6c	3,200	D	1			
d Net rental incom	e or (lo	oss)	• •	3,200			3,200
		(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory	7a						
Less: cost or other basis and sales expenses Gain or (loss) d Net gain or (loss)	7b			_			
Gain or (loss)	7c						
d Net gain or (loss	;)	<u>.</u>	• • • •				
(not including \$ contributions report See Part IV, line 18	ed on lin	of e 1c). 8a					
b Less: direct expe c Net income or (lo			ents 🕨				
9a Gross income from See Part IV, line 1	n gamin 9 .	g activities. 9a					
b Less: direct expe	nses .	9b		1			
c Net income or (lo	ss) froi	m gaming activiti	es 🕨	_			
10a Gross sales of inv returns and allow	ventory, vances	, less ••• 10a					
b Less: cost of good	ds sold	10b					
c Net income or (lo	ss) froi	m sales of invento		-			
			Business Code	_			
11a							
b							
therRevenueMiscAmt							
d All other revenue				108	108		
e Total. Add lines		d	•	100			
12 Total revenue.	See ins	tructions		108	180,921	n	5,266
				1,150,705	100,921		5,200

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Part IX Statement of Functional Ex					
Section 501(c)(3) and 501(c)(4) o	rganizations must o	complete all columns.	. All other organization	ons must complete c	olumn (A).
Check if Schedule O contains a res	ponse or note to ar	ny line in this Part IX			🗆
Do not include amounts reported on lines (7b, 8b, 9b, and 10b of Part VIII.	ōb,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic or domestic governments. See Part IV, line 21		16,802	16,802		
2 Grants and other assistance to domestic in Part IV, line 22		8,550	8,550		
3 Grants and other assistance to foreign orga					

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	and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	86,150	34,460	34,460	17,230
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	726,171	661,947		64,224
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,196	5,587		1,609
9	Other employee benefits	123,731	119,272	1,670	2,789
10	Payroll taxes	59,901	51,659	2,091	6,151
11	Fees for services (non-employees):				
a	Management				
b	Legal				
c	Accounting	65,652	563	65,089	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	163,824	152,454	9,879	1,491
12	Advertising and promotion	727	382	345	
13	Office expenses	53,316	44,192	8,023	1,101
14	Information technology				
	Royalties				
	Occupancy	301,142	267,693	22,665	10,784
	Travel	1,921	1,921		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	6,512	4,462	2,006	44
20	Interest	17,429	14,539	2,208	682
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	83,711	74,945	5,222	3,544
	Insurance	24,941	22,321	1,572	1,048
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a EQUIPMENT RENTAL, REPAI	17,375	16,327		1,048
	b DUES AND MEMBERSHIPS	6,492	5,035	1,457	
	c TRAINING AND DEVELOPMEN	4,060	4,060		
	d				
	e All other expenses	2,333	153	2,180	
25	Total functional expenses. Add lines 1 through 24e	1,777,936	1,507,324	158,867	111,745
26	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).				

– Page 11 – Form 990 (2022) Page **11 Balance Sheet** Part X \Box Check if Schedule O contains a response or note to any line in this $\ensuremath{\mathsf{Part}}\xspace$. **(B)** End of year **(A)** Beginning of year 298,189 102,959 1 Cash-non-interest-bearing 1 • • • 204,849 2 165,737 2 Savings and temporary cash investments

4 Accounts receivable, net 25,175 4 44,814 5 Loans and other receivables from any or othese persons 35% 6 Loans and other receivables, rom any of these persons 5 7 Notes and loans receivable, net 7 8 Inventories for sale or use 7 9 Prepad dexpenses and deferred charges 28,850 10a Lant, buildings, and equipment: cost or other 10a 11a Investments-other scuritles. See Part IV, line 11 12 11 Investments-other scuritles. See Part IV, line 11 12 12 Investments-other scuritles. See Part IV, line 11 12 13 Investments-other scuritles. See Part IV, line 11 13 14 10b 1,075,682 16 15 Other payable and accured expenses 0,3743 12 63,743 14 10 1,075,682 16 1,377,738 15 Total assets. Add lines 1 through 15 (must equal line 33) 1,575,682 16 1,377,738 15 Total assets and other payables to any current or former officer, directry, trustee, key and counties and neap spayable so any current or former officer, dir		3	Pledges and grants receivable, net		. 459,21	3	345,772
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 5 5 6 5 7 6 7 8 9 7 8 9 7 8 9 7 9 10a 1.199.707 10b 1.199.707 10c 1.199.707 10c 1.100 11 1.100 11 1.100 12 1.100 13 1.100 14 1.100 15 0.101 16 1.11 17 1.100 18 11 19 10a 1.199.707 10 1.12 11 1.12 11 1.11 12 1.11 13 1.11 14 1.11 15 1.11 16 1.11 17 1.12 18 1.11 19 1.11 19 1.11 19 1.11 10 1.12 11 12 1.11		4	Accounts receivable, net			5 4	44,814
section 4958(r)(1), and persons described in section 4958(c)(3)(B). 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 20,050 9 Prepaid expenses and deferred charges 20,050 9 Land, buildings, and equipment: cost or other bases. Complete Part Vol of Schedule D 100 1,199,707 10 Lass: accumulated depreciation 100 100 767,276 11 Investments—publicly traded securities 11 12 12 Investments—publicly traded securities 14 13 13 Investments—program-related. See Part IV, line 11 13 14 14 14 14 14 15 Other assets. See Part IV, line 11 13 157,682 16 1376,738 16 Total assets. Add lines 1 through 15 (must equal line 33) 1,577,682 16 1376,738 19 Deferred revenue . . 18 12 21 Lasns and ather payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entry or foundy member of any of these payable to unrelated third parties, and other labilities (nchuding federal lin		5	trustee, key employee, creator or founder, subs	tantial	contributor, or 35%	5	
B Inventories for sale or use 8 9 Prepaid expenses and deferred charges 29,055 9 10a 1.199,707 29,055 9 11 Investments-publicly traded securities 11 11 12 Investments-publicly traded securities 11 12 13 Investments-program-related. See Part IV, line 11 13 14 14 Intargible assets 14 133 15 Other assets. See Part IV, line 11 14 14 16 Total assets. Add lines 1 through 15 (must equal line 33) 1.575,682 16 1.375,738 17 Accounts payable and accrued expenses 63,743 17 63,072 18 Grants payable 12 12 13 14 19 Deferred revenue 12 12 16 13,75,738 19 Deferred revenue 12 12 13 14 10 Deferred revenue 12 12 13 14 10 Deferred revenue 12 14 13 14 12 Lasser o		6				6	
✓ Include buildings, and equipment: gost or the transmission of the second depreciation to Schedule D Include to transmission of the second depreciation of the second depreciating dependent depreciating depreciating depreciation of the second	ŝ	7	Notes and loans receivable, net			7	
✓ Include buildings, and equipment: gost or the transmission of the second depreciation to Schedule D Include to transmission of the second depreciation of the second depreciating dependent depreciating depreciating depreciation of the second	et	8	Inventories for sale or use			8	
basis. Complete Part Vi of Schedule D 10a 1.199.707 b Less: accumulated depreciation 10b 767.278 516,140 10c 432,429 11 Investments-publicly traded securities . 11 11 12 12 Investments-porgram-related. See Part IV, line 11 13 12 13 Investments-porgram-related. See Part IV, line 11 13 14 14 14 14 15 Other assets. See Part IV, line 11 14 13 16 Total assets. Add lines 1 through 15 (must equal line 33) 1575.682 16 1375.788 17 Accounts payable and accrued expenses . . 18 19 29.126 10 Tax-exempt bond liabilities . . . 12 . <td>Ass</td> <td>9</td> <td>Prepaid expenses and deferred charges</td> <td></td> <td> 29,65</td> <td>9</td> <td></td>	Ass	9	Prepaid expenses and deferred charges		29,65	9	
11 Investments—publicly traded securities . 11 12 Investments—other securities. See Part IV, line 11	4	10a		10a	1,199,707		
12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 14 Intrangible assets 14 15 Other assets. See Part IV, line 11 14 16 Total assets. Add lines 1 through 15 (must equal line 33) 14 17 Accounts payable and accrued expenses 63,743 17 63,072 18 Grants payable 18 19 0eferred revenue 120,033 19 22,126 18 Grants payable 18 20 21 20 21 20 21 20 21 20 21 20 21 20 21 20 21 20 21 22 23 23,233,854 24 20 22 23 23,233,854 24 20 22 23 23,233,854 24 20 24 22 24 24 20 24 20 24 24 24 24 20 25 308,255 308,255 308,255 308,255 308,255 308,255 308,255 308,255 <td< td=""><td></td><td>b</td><td>Less: accumulated depreciation</td><td>10b</td><td>767,278 516,14</td><td>) 10c</td><td>432,429</td></td<>		b	Less: accumulated depreciation	10b	767,278 516,14) 10c	432,429
13 Investmentsprogram-related. See Part IV, line 11		11	Investments—publicly traded securities .			11	
14 Intangible assets 14 15 Other assets. See Part IV, line 11 42.463 15 284.027 16 Total assets. Add lines 1 through 15 (must equal line 33) 1.575.682 16 1.375.738 17 Accounts payable and accrued expenses 63.743 17 63.072 18 Grants payable 18 18 19 Deferred revenue 126.939 19 29.126 20 Tax-exempt bond liabilities 20 20 21 21 Econs and other 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 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 25 Other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 24 24 26 Total liabilities. Add lines 17 through 25 495.078 26 634.307 27 Net assets without donor restrictions 21 20 21 22 26 Total liabilities. Add lines 17 through 25 495.078 26 634.307 <t< td=""><td></td><td>12</td><td>Investments-other securities. See Part IV, line</td><td>11 .</td><td></td><td>12</td><td></td></t<>		12	Investments-other securities. See Part IV, line	11 .		12	
15 Other assets. See Part IV, line 11 42.463 15 284.027 16 Total assets. Add lines 1 through 15 (must equal line 33) 1.575.682 16 1.375.738 17 Accounts payable and accrued expenses 63.743 17 63.072 18 Grants payable 18 18 19 Deferred revenue 126.939 19 29.126 20 Tax-exempt bond liabilities 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 20 22 Loans and other 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 24 22 23 Secured mortgages and notes payable to unrelated third parties 300.797 23 233.854 24 Unsecured notes and loans payable to unrelated third parties 3.699 25 308.255 24 0ther liabilities not included on lines 17 - 24). Complete lines 27, 28, 32, and 33. 27 599,759 25 Total liabilities chad lines 17 through 25 495,078 26 634.307		13	Investments-program-related. See Part IV, line	e 11 .		13	
16 Total assets. Add lines 1 through 15 (must equal line 33)		14	Intangible assets			14	
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18 Grants payable 18 19 Deferred revenue 126,939 19 29,126 20 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 20 22 Loans and other 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 22 23 Secured mortgages and notes payable to unrelated third parties 300,797 23 233,854 24 Unsecured notes and loans payable to unrelated third parties 300,797 23 233,854 24 Unsecured notes and loans payable to unrelated third parties 3,599 25 308,255 25 Other liabilities (included on lines 17 - 24). 26 634,307 26 Total liabilities not included on lines 17 - 24). 26 634,307 27 Net assets with donor restrictions 21 29 28 Net assets with donor restrictions 216,898 28 141,672 29 Organizations that do not follow FASB ASC 958, check here > and complete lines 29 through 33. 29		16	Total assets. Add lines 1 through 15 (must eq	ual line		2 16	1,375,738
19 Deferred revenue 126,939 19 29,126 20 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other 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 22 23 Secured mortgages and notes payable to unrelated third parties 300,797 23 233,854 24 Unsecured notes and loans payable to unrelated third parties 300,797 23 233,854 24 Unsecured notes and loans payable to unrelated third parties 300,797 25 308,255 30 Other liabilities on included on lines 17 - 24). Complete Part X of Schedule D 26 634,307 25 Organizations that follow FASB ASC 958, check here ▶ and complete lines 27, 28, 32, and 33. 863,706 27 599,759 26 Net assets with donor restrictions 29 29 29 29 20 Paid-in or capital surplus, or land, building or equipment fund 30 29 29 27 Total net assets or fund balances 31 31		17	Accounts payable and accrued expenses	•	63,74	3 17	63,072
20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other 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 20 23 Secured mortgages and notes payable to unrelated third parties 300,797 23 233,854 24 Unsecured notes and loans payable to unrelated third parties 300,797 23 233,854 25 Other liabilities ont included on lines 17 - 24). Complete Part X of Schedule D 24 308,255 26 Total liabilities. Add lines 17 through 25 495,078 26 634,307 27 Net assets without donor restrictions 216,898 28 141,672 28 Net assets with donor restrictions 29 29 29 29 29 20 Paid-in or capital surplus, or land, building or equipment fund 30 31 31 31 Total liabilities and net assets/fund balances 1,575,882 33 1,375,78		18	Grants payable		18		
21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other 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 21 23 Secured mortgages and notes payable to unrelated third parties 300,797 23 233,854 24 Unsecured notes and loans payable to unrelated third parties 324 300,797 23 233,854 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 26 634,307 26 Total liabilities. Add lines 17 through 25 495,078 26 634,307 27 Net assets without donor restrictions		19	Deferred revenue	126,93	19	29,126	
22 Loans and other 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 22 23 Secured mortgages and notes payable to unrelated third parties 300.797 23 233.854 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities. Add lines 17 - 24). Complete Part X of Schedule D 26 634.307 26 Total liabilities. Add lines 17 through 25 495.078 26 634.307 27 Net assets without donor restrictions 216.898 28 141.672 29 Capital stock or trust principal, or current funds 29 29 20 Paid-in or capital surplus, or land, building or equipment fund 30 31 21 Total liabilities and net assets/fund balances 1,575,682 33 1,375,788		20	Tax-exempt bond liabilities		20		
23 Secured mortgages and notes payable to unrelated third parties 300,737 23 233,034 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 3,599 25 308,255 26 Total liabilities. Add lines 17 through 25 495,078 26 634,307 27 Net assets without donor restrictions	s	21	Escrow or custodial account liability. Complete F	of Schedule D	21		
23 Secured mortgages and notes payable to unrelated third parties 300,737 23 233,034 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 3,599 25 308,255 26 Total liabilities. Add lines 17 through 25 495,078 26 634,307 27 Net assets without donor restrictions	abilitie	22	employee, creator or founder, substantial contri	or 35% controlled entity	22		
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 3,599 25 308,255 26 Total liabilities. Add lines 17 through 25 . 495,078 26 634,307 27 Organizations that follow FASB ASC 958, check here ▶ ✓ and complete lines 27, 28, 32, and 33. 27 863,706 27 599,759 28 Net assets with donor restrictions . . 216,898 28 141,672 Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33. 29 29 29 30 Paid-in or capital surplus, or land, building or equipment fund . 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 31 33 Total liabilities and net assets/fund balances . 1,080,604 32 741,431	1	23	Secured mortgages and notes payable to unrela	rd parties 300,79	23	233,854	
20 and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 26 26 Total liabilities. Add lines 17 through 25 . 495,078 26 634,307 26 Organizations that follow FASB ASC 958, check here ▶ ✓ and complete lines 27, 28, 32, and 33. 27 Segure 27 599,759 28 Net assets with donor restrictions . . 216,898 28 141,672 Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33. 29 29 29 Capital stock or trust principal, or current funds . . 29 30 Paid-in or capital surplus, or land, building or equipment fund . 30 31 Retained earnings, endowment, accumulated income, or other funds 31 33 Total liabilities and net assets/fund balances . 1,575,682 33 1,375,738		24	Unsecured notes and loans payable to unrelated	d third j	parties	24	
SourceOrganizations that follow FASB ASC 958, check hereImage: Complete lines 27, 28, 32, and 33.27Net assets without donor restrictions		25	and other liabilities not included on lines 17 - 24		s to related third parties, 3,59	25	308,255
Visit of the discription of the sector with donot restrictions of the transmission of transmission of the transmission of transmission of the transmission of transmissing transmission of transmission of transmis		26	Total liabilities. Add lines 17 through 25 .		495,07	3 26	634,307
Visit of the discription of the sector with donot restrictions of the transmission of transmission of the transmission of transmission of the transmission of transmissing transmission of transmission of transmis	ances	~-	complete lines 27, 28, 32, and 33.	heck h			500 750
Visit of the discription of the sector with donot restrictions of the transmission of transmission of the transmission of transmission of the transmission of transmissing transmission of transmission of transmis	Sale			• •		-	
29Capital stock or trust principal, or current funds2930Paid-in or capital surplus, or land, building or equipment fund3031Retained earnings, endowment, accumulated income, or other funds3132Total net assets or fund balances1,080,6043233Total liabilities and net assets/fund balances1,575,68233		28	Net assets with donor restrictions	• •		28	141,672
30Paid-in or capital surplus, or land, building or equipment fund3031Retained earnings, endowment, accumulated income, or other funds3132Total net assets or fund balances1,080,6043233Total liabilities and net assets/fund balances1,575,68233		29	complete lines 29 through 33.	check here 🕨 🗌 and	29		
	S			nt fund	-	<u> </u>	
	Set					<u> </u>	
	As						741 431
	Vet			• •		-	
	-	55	ista habintes una net assets/funa balances	•			

Form	990 (2022)		Page 12
Par	TXI Reconcilliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	🛛
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,438,763
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,777,936
3	Revenue less expenses. Subtract line 2 from line 1	3	-339,173
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,080,604
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	
		. 1	

9	Other changes in net assets or fund balances (explain in 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			741,431
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Z 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		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed of separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	on a			
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O	•		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Ur Guidance, 2 C.F.R. Part 200, Subpart F?	niform	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired	Зb		
			F	orm 99	0 (2022)

Additional Data

Software ID: Software Version:

Form 990, Special Condition Description:

Special Condition Description

Return to Form

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Department of the Treasury				plete if the o	rganization is a sect 4947(a)(1) nonexe Attach to Form 9	Charity Status and Public Support ganization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. gov/Form990 for instructions and the latest information.					
		ne organiza GHBORHOOD N						Employer identif	ication number		
Pa	rt I	Reason	for Public	Charity Stati	us (All organization	s must comp	lete this part.) S	41-1500773			
					it is: (For lines 1 thro						
1		A church, c	onvention of	churches, or as	sociation of churches of	lescribed in se	ection 170(b)(1)	(A)(i).			
2		A school de	escribed in se	ction 170(b)(1)(A)(ii). (Attach Sch	edule E (Form	990).)				
3		A hospital of	or a cooperat	ive hospital serv	vice organization descr	ibed in sectio	n 170(b)(1)(A)(iii).			
4		A medical r name, city,		nization operate	ed in conjunction with	a hospital des	cribed in section 1	L70(b)(1)(A)(iii).	Enter the hospital's		
5 6		170(b)(1)	(A)(iv). (Co	mplete Part II.)	t of a college or univer governmental unit de				ribed in section		
7					a substantial part of its				ral public described in		
•		section 17	'0(b)(1)(A)	(vi). (Complete	Part II.)		-				
8					170(b)(1)(A)(vi).	· ·	•				
9		An agricult non-land g	urai research rant college c	organization de f agriculture. Se	escribed in 170(b)(1) ee instructions. Enter t	(A)(IX) opera the name, city	ted in conjunction , and state of the c	with a land-grant co college or university:	llege or university or a		
10		An organiza from activit investment	ation that noi ties related to income and	mally receives: ts exempt fun unrelated busin	(1) more than 331/3% ctions—subject to cert	of its support ain exceptions	from contributions, and (2) no more	s, membership fees, than 33 1/3% of its	and gross receipts		
11		An organiza	ation organiz	ed and operated	l exclusively to test for	public safety.	See section 509	(a)(4).			
12		more publi	cly supported	organizations of	l exclusively for the be described in section 5 the type of supportin	09(a)(1) or s	section 509(a)(2)). See section 509	(a)(3). Check the box		
а		Type I. A son organization	supporting or n(s) the pow	ganization oper	ated, supervised, or co appoint or elect a majo	ontrolled by its	supported organiz	zation(s), typically b	y giving the supported		
b		manageme	nt of the sup		ervised or controlled in ation vested in the san and C.						
с					supporting organization ons). You must com				ated with, its		
d		Type III n functionally	on-function	ally integrated	 d. A supporting organi n generally must satisf t IV, Sections A and 	zation operate y a distributio	d in connection wit n requirement and	th its supported orga			
е	\Box				ved a written determin integrated supporting		IRS that it is a Ty	ре I, Туре II, Туре I	II functionally		
f	Enter				· · · · · · · · · · · ·			<u>.</u>			
g					pported organization(1		
	(i) N	lame of supp organization		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		rganization listed rning document?	(v) Amount of monetary support (see instructions)			
						Yes	No				
Гota											
		vork Reduc or 990-EZ.	tion Act Not	ice, see the Ir	nstructions for	Cat. No. 112	85F	Schedul	e A (Form 990) 2022		
					Pag	je 2 ——					
		(Form 990)		. fac. 0			470/11/21/21/21		Page 2		
Pa	rt II	(Comple	ete only if y	ou checked th	ations Described ne box on line 5, 7, ify under the tests l	or 8 of Part 1	I or if the organiz	zation failed to qu			
		A. Public									
Cale	ndar	Vear		I	I	I	I	I	I		

	r fiscal year beginning in) 🕨	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not	1,458,930	1,518,081	1,658,931	1,688,956	1,252,576	7,577,474
_	include any "unusual grant.")						
2	Tax revenues levied for the organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,458,930	1,518,081	1,658,931	1,688,956	1,252,576	7,577,474
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)						
6	Public support. Subtract line 5 from line 4.						7,577,474
	ection B. Total Support						
	lendar year r fiscal year beginning in) 🕨	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4.	1,458,930	1,518,081	1,658,931	1,688,956	1,252,576	7,577,474
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and	1,660	3,537	223	234	5,266	10,920
	income from similar sources.						
9	Net income from unrelated business						
	activities, whether or not the business is regularly carried on.						
10	Other income. Do not include gain						
	or loss from the sale of capital				332	108	440
11	assets (Explain in Part VI.) Total support. Add lines 7 through						
	10						7,588,834
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	1,679,551
13	First 5 years. If the Form 990 is for t						ization, check
	this box and stop here					▶∪	
_	Section C. Computation of Publi		-				
14	Public support percentage for 2022 (li					14	99.850 %
15	Public support percentage for 2021 Sc					15	99.890 %
16a	33 1/3% support test-2022. If the	organization did r	ot check the box	on line 13, and lin	e 14 is 33 1/3% or	more, check this l	
	and stop here. The organization qual						
b	33 1/3% support test-2021. If the	-					- 0
	box and stop here. The organizatior 10%-facts-and-circumstances tes						
1/2	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						_
b	10%-facts-and-circumstances te more, and if the organization meets	st—2021. If the o	rganization did no	t check a box on l	ine 13, 16a, 16b,	or 17a, and line 15	5 is 10% or
	meets the "facts-and-circumstances"						► 🗆
18	Private foundation. If the organization						
	instructions						<u> ►U</u>
						Schedule A (I	Form 990) 2022
			Page 3				

Schedule A (Form 990) 2022

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

Page 3

Faithr	Support Schedule for Organizations Described in Section 505(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.)
Section A.	Public Support

	endar year fiscal year beginning in) 🕨	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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				1		1		
5	to or expended on its behalf The value of services or facilities								
-	furnished by a governmental unit to								
6	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								
с	13 for the year. Add lines 7a and 7b.								
8	Public support. (Subtract line 7c								
	from line 6.) ction B. Total Support								
	ndar year		1				1		
	fiscal year beginning in) 🕨	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f)	Total	
9	Amounts from line 6								
10a	Gross income from interest,								
	dividends, payments received on securities loans, rents, royalties and								
	income from similar sources.						_		
b	Unrelated business taxable income (less section 511 taxes) from								
	businesses acquired after June 30,								
	1975.						_		
с 11	Add lines 10a and 10b. Net income from unrelated business								
	activities not included on line 10b,								
	whether or not the business is								
12	regularly carried on. Other income. Do not include gain or								
	loss from the sale of capital assets								
13	(Explain in Part VI.) Total support. (Add lines 9, 10c,						_		
15	11, and 12.)								
14	First 5 years. If the Form 990 is for the	-					-		_
	this box and stop here								▶∪
	ction C. Computation of Public	Support Perce	entage	(f)					
15	Public support percentage for 2022 (lir					15			
16	Public support percentage from 2021 S					16			
	ction D. Computation of Invest Investment income percentage for 202			ling 12 column ((f))				
17				inite 13, column (
18 Investment income percentage from 2021 Schedule A, Part III, line 17						17			
		021 Schedule A,	Part III, line 17 .			18	no 17	is not	
	33 1/3% support tests-2022. If the	021 Schedule A, organization did n	Part III, line 17 . not check the box	on line 14, and li	ne 15 is more than	18 33 1/3%, and li		_	
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19a	33 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests-2021. If the	021 Schedule A, organization did n stop here. The e organization did	Part III, line 17 . not check the box organization qual not check a box	on line 14, and li ifies as a publicly on line 14 or line	ne 15 is more than supported organiza 19a, and line 16 is	18 33 1/3%, and li ation more than 33 1	 /3% ar	► □ nd line	18 is
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19a b	33 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests-2021. If the	021 Schedule A, organization did n stop here. The organization did and stop here. T	Part III, line 17 . not check the box organization qual not check a box The organization	on line 14, and li ifies as a publicly on line 14 or line qualifies as a pub	ne 15 is more than supported organiza 19a, and line 16 is licly supported orga	18 33 1/3%, and li ation more than 33 1 anization	 /3% ar ■	nd line	
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19a b 20 Schee Par 1 2 3a	 33 1/3% support tests-2022. If the more than 33 1/3%, check this box and 33 1/3% support tests—2021. If the not more than 33 1/3%, check this box Private foundation. If the organization dule A (Form 990) 2022 t IV Supporting Organization (Complete only if you checked a box 12b, of Part I, complete Se 12d, of Part I, complete Section ction A. All Supporting Organization Are all of the organization's supported <i>If "No," describe in Part VI how the su describe the designation. If historic an</i> Did the organization have any supported <i>in section 509(a)(1) or (2)? If "Yes," explain in P described in section 509(a)(1) or (2).</i> Did the organization have a supported <i>3c below.</i> 	021 Schedule A, organization did n I stop here. The d e organization did and stop here. The on did not check a son did not che	Part III, line 17 . not check the box organization qual not check a box The organization a box on line 14, Page 4 Page 4 f Part I. If you ch you checked box omplete Part V.) ed by name in the trions are designation ionship, explain. nat does not have rganization deter	on line 14, and li ifies as a publicly on line 14 or line qualifies as a pub 19a, or 19b, chect 19a, or 19b, chect ecked box 12a, of 12c, of Part I, co 12c, of Part I, co an IRS determina mined that the su 501(c)(4), (5), or under section 501(ne 15 is more than supported organiza 19a, and line 16 is licly supported orga k this box and see f Part I, complete S mplete Sections A, overning document d by class or purpos ation of status under pported organization (6)? If "Yes," answ	18 33 1/3%, and li ation more than 33 1 anization instructions instructions Schedule A Gections A and E D, and E. If you ss? See, er section on was rer lines 3b and nd satisfied	I //3% ar I (Form 6. If you 1 1 2	P Du checked bo	2022 age 4 ked x

c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?

	IT "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	1
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.	4a	
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.	4b	
с	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.	4c	
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).	5a	
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?	5b	
с	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6	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 .		
		6	_
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).	7	
8	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).	8	
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 .		
		9a	_
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 .		
		9b	
с	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 .	9c	_
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 "Yes," answer line 10b below.	102	
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).	10a 10b	
	Cabadula A	/	0) 2022

Schedule A (Form 990) 2022

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Schedule A (Form 990) 2022

Part IV Supporting Organizations (continued)						
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	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 11a above?	11b				
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part VI .	11c				
Se	Section B. Type I Supporting Organizations					

			Yes	No
1	1 Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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		

Section C. Type II Supporting Organizations	

Yes	No
-----	----

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of 1

each of the organization's supported organizatio	on(s)? If "No," describe in Part VI how control or management of the
supporting organization was vested in the same	e persons that controlled or managed the supported organization(s).

Section 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?
- 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).
- **3** By reason of the relationship described in 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

Section E. Type III Functionally-Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):
- **a** The organization satisfied the Activities Test. Complete **line 2** below.
- c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)

2 Activities Test. Answer lines 2a and 2b below.

- 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.
- **b** 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.*

3 Parent of Supported Organizations. Answer lines 3a and 3b below.

- a 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**.
- **b** 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 Schedule A (Form 990) 2022

2a

2b

3a

ray

Schedule A (Form 990) 2022

1

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Ра	rt v Type III Non-Functionally Integrated 509(a)(3) Supporting 0	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organization			
	Section 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		
	Section 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):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	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			

		Yes	No
s he			
	1		
	2		
d.	3		

Yes

No

1

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	(explain in detail in Part VI):		1
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	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
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	
7	Check here if the current year is the organization's first as a non-functionally-i	-	÷

Schedule A (Form 990) 2022

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Schedule A (Form 990) 2022

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Part V Type III Non-Functionally Integrated	d 509(a)(3) Supporting	Organizations (co	ntinued)	
Section D - Distributions				Current Year
1 Amounts paid to supported organizations to accomplish	n exempt purposes		1	
2 Amounts paid to perform activity that directly furthers excess of income from activity	2			
3 Administrative expenses paid to accomplish exempt pu	rposes of supported organization	ons	3	
4 Amounts paid to acquire exempt-use assets			4	
5 Qualified set-aside amounts (prior IRS approval require	ed - provide details in Part VI)		5	
6 Other distributions (describe in Part VI). See instruction	ons		6	
7 Total annual distributions. Add lines 1 through 6.			7	
8 Distributions to attentive supported organizations to wheta details in Part VI). See instructions	nich the organization is respons	sive (<i>provide</i>	8	
9 Distributable amount for 2022 from Section C, line 6			9	
10 Line 8 amount divided by Line 9 amount			10	
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributic Pre-2022	ons	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6				
 Underdistributions, if any, for years prior to 2022 (reasonable cause required <i>explain in Part VI</i>). See instructions. 				
3 Excess distributions carryover, if any, to 2022:				
a From 2017.				
b From 2018				
c From 2019				
d From 2020				
e From 2021				
f Total of lines 3a through e				
g Applied to underdistributions of prior yearsh Applied to 2022 distributable amount				
 Applied to 2022 distributable amount Carryover from 2017 not applied (see instructions) 				
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4 Distributions for 2022 from Section D, line 7:				
\$				
a Applied to underdistributions of prior years				
b Applied to 2022 distributable amount				

....

- FF	ı	1	1
c Remainder. Subtract lines 4a and 4b from line 4.			
 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i>. See instructions. 			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020.			
d Excess from 2021			
e Excess from 2022			
	Page 8		Schedule A (Form 990) (2022
Schedule A (Form 990) 2022			Page
Supplemental Information. Provide the expl Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, Part IV, Section D, lines 2 and 3; Part IV, Section Section D, lines 5, 6, and 8; and Part V, Section Section D, lines 5, 6, and 8; and Part V, Section	9b, 9c, 11a, 11b, and on E, lines 1c, 2a, 2b, 3	11c; Part IV, Section B, lines 1 3a and 3b; Part V, line 1; Part V	and 2; Part IV, Section C, line 1; V, Section B, line 1e; Part V

instructions).

Facts And Circumstances Test

Explanation

Return Reference

Schedule A (Form 990) 2022

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Additional Data

Software ID: Software Version:

efile Public Visual Ren	der Objectld: 202410379349301851 - Submission: 2024-02-06	TIN: 41-1500773		
Schedule B	Schedule of Contributors	OMB No. 1545-0047		
(Form 990) Department of the Treasury Internal Revenue ServiceAttach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.2022				
Name of the organization		Employer identification number		
	41-1500773			
Organization type (che	eck one):			
Filers of:	Section:			
Form 990 or 990-EZ	□ 501(c)() (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private foundati	on		
	□ 527 political organization			
Form 990-PF	\Box 501(c)(3) exempt private foundation			
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation			
	\Box 501(c)(3) taxable private foundation			

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- □ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- □ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

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

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

Cat. No. 30613X

Schedule B (Form 990) (2022)

Page 2

Schedule B (Form 990) (2022)

Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED	,	\$ RESTRICTED	 Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$_	 Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	 Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2022)

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Schedule E	3 (Form 990) (2022)		Page 3
Name of or ST PAUL NE	ganization EIGHBORHOOD NETWORK	Employer identificatio 41-1500773	n number
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Descri	ntion of how gift is held
Part III	<i>Exclusively</i> religious, charitable, etc., con than \$1,000 for the year from any one con organizations completing Part III, enter the year. (Enter this information once. See ins Use duplicate copies of Part III if additional s	tributor. Complete columns (a) through (e) e total of exclusively religious, charitable, tructions.) \$	ection 501(c)(7), (and the followin	ig line entry. For
Name of or ST PAUL N	rganization EIGHBORHOOD NETWORK		Employer ider 41-1500773	ntification number
	B (Form 990) (2022)		T - · · ·	Page 4
		Page 4		
				Schedule B (Form 990) (2022)
-			\$	
(a) No. from Part I	(b) Description of noncash		(C) (or estimate) instructions)	(d) Date received
-			\$	
(a) No. from Part I	(b) Description of noncash		(C) (or estimate) instructions)	(d) Date received
-			\$	
(a) No. from Part I	(b) Description of noncash		(C) (or estimate) instructions)	(d) Date received
Part I		(266	instructions)	
(a) No. from	(b) 		(c) (or estimate)	(d) Date received
No. from Part I	Description of noncash		(or estimate) instructions)	Date received
(a)	(b)		(c)	(d)
		[

No. from Part I	(b) Purpose of gift		(c) Use of gift	(d) Description of how gift is held
· =	Transferee's name, address, and) Transfer of gift Relatior	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift		(c) Use of gift	(d) Description of how gift is held
· =	Transferee's name, address, and) Transfer of gift Relatior	ship of transferor to transferee
(a) No from	(h) Purnose of aift		(c) Use of aift	(d) Description of how aift is held

Part I	(b) i dipose oi gire		(0) 000 01 gift	
. =			(a) Transfor of sift	
	Transferee's name, address, and	d ZIP 4	(e) Transfer of gift Relationsh	ip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift		(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	d ZIP 4	(e) Transfer of gift Relationsh	ip of transferor to transferee
				Schedule B (Form 990) (2022)

Additional Data

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Software ID: Software Version:

efile Public Visu	al Render	ObjectId: 20241037934	49301851 - Submission: 202	24-02-06	TIN: 41-1500773			
SCHEDULE C		Political Campaig	in and Lobbying Acti	vities	OMB No. 1545-0047			
(Form 990)			come Tax Under section 501(2022			
Department of the Treasury Internal Revenue Service	►Compl		ibed below. ►Attach to Form 99 for instructions and the latest in		Open to Public Inspection			
 Section 501(c)(3) Section 501(c) (d Section 527 orga If the organization a Section 501(c)(3) Section 501(c)(3) If the organization a (Proxy Tax) (see seg Section 501(c)(4) 	 it the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations: Complete Part I-A only. it the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, Line 35c Proxy Tax) (see separate instructions), then Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization 							
Name of the organi ST PAUL NEIGHBORHC				Employer identi 41-1500773	fication number			
Part I-A Comp	lete if the	organization is exempt und	der section 501(c) or is a sec	ction 527 organiza	tion.			
"political camp	aign activitie	25."	political campaign activities in Part 1					
•	-	•		· •				
			ons					
		organization is exempt und						
	,	, 5	ion under section 4955	• •				
		, ,	managers under section 4955					
3 If the organiza	tion incurred	a section 4955 tax, did it flie Forn	n 4720 for this year?		🗌 Yes 🗌 No			
4a Was a correction	on made?				🗌 Yes 🗌 No			
b If "Yes," descri								
Part I-C Comp	lete if the	organization is exempt und	der section 501(c), except se	ection 501(c)(3).				
			for section 527 exempt function ac					
			d to other organizations for section					
3 Total exempt f	unction expe	nditures. Add lines 1 and 2. Enter	here and on Form 1120-POL, line 1	7b 🕨 🖕				
•	•		······································	Ψ.	Yes No			
5 Enter the name organization m of political con	es, addresse ade paymen tributions ree	s and employer identification numb its. For each organization listed, en ceived that were promptly and dire	per (EIN) of all section 527 political atter the amount paid from the filing ectly delivered to a separate political is needed, provide information in P	organizations to which organization's funds. A I organization, such as	the filing lso enter the amount			
(a) Name		(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0			
1								
2								
3								
4								
5								
6								
For Paperwork Reduct	ion Act Notic	e, see the instructions for Form 990	• Cat. No. 50	00845 Sche	dule C (Form 990) 2022			
		-,	Cat. NO. 50					

Schedule C (Form 990) 2022

	SECTION SOT(11)).			
A	Check b if the filing organization belongs to an expenses, and share of excess lobbying	affiliated group (and list in Part IV each affiliated gexpenditures).	group member's name	e, address, EIN,
в	Check \blacktriangleright if the filing organization checked box	A and "limited control" provisions apply.		
	Limits on Lobbying (The term "expenditures" means	g Expenditures	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinio	on (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative	body (direct lobbying)		
с	Total lobbying expenditures (add lines 1a and 1b)			
d	Other exempt purpose expenditures	1,777,936	5	
е	Total exempt purpose expenditures (add lines 1c and	1 1d)	1,777,936	5
f	Lobbying nontaxable amount. Enter the amount from columns.	n the following table in both	238,897	7
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% of line 1f)	59,724	1
h	Subtract line 1g from line 1a. If zero or less, enter -	О	C	
i	Subtract line 1f from line 1c. If zero or less, enter -0		C)
j	If there is an amount other than zero on either line a section 4911 tax for this year?			🗌 Yes 🗌 No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total	
2a	Lobbying nontaxable amount	242,955	240,720	243,726	238,897	966,298	
b	Lobbying ceiling amount (150% of line 2a, column(e))					1,449,447	
с	Total lobbying expenditures						
d	Grassroots nontaxable amount	60,739	60,180	60,932	59,724	241,575	
e	Grassroots ceiling amount (150% of line 2d, column (e))					362,363	
f	Grassroots lobbying expenditures				Cohodula C / [form 990) 2022	

Schedule C (Form 990) 2022

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Sche	dule C (Form 990) 2022			Page 3
Ра	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT f Form 5768 (election under section 501(h)).	iled		
For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(7	a)	(b)
activ		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	<u></u>		
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
с	Media advertisements?			
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?			

-	·					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			1		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			1		
i	Other activities?			1		
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?					
b	If "Yes," enter the amount of any tax incurred under section 4912			1		
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), o	r sect	ion		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		ſ	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		ľ	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
1	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	1				
2	expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
с	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures. See Instructions	5				
Pa	art IV Supplemental Information	_				
Pro	vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); F ructions), and Part II-B, line 1. Also, complete this part for any additional information.	Part II-	A, lines	1 an	d 2 (se	e
	Return Reference Explanation					
		Sched	ule C (Form	990)	2022
		Scheu	uie C (550)	2022

Additional Data

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Software ID: Software Version:

efi	le Public Visua	I Render	ObjectId: 2024103	79349301851 - Submission: 20	24-02-0	6	TIN: 41-1500773
SC	HEDULE D		Supplement	tal Financial Statement	· C		OMB No. 1545-0047
Depar	m 990) trment of the Treasury		► Complete if the or Part IV, line 6, 7, 8, 9, 3	ganization answered "Yes," on Form .0, 11a, 11b, 11c, 11d, 11e, 11f, 12a, ▶ Attach to Form 990.	990, , or 12b.		2022 Open to Public
	al Revenue Service me of the organi		o to <u>www.irs.gov/Forn</u>	990 for instructions and the latest in			Inspection ification number
	PAUL NEIGHBORHOO				-	-	
De			ntaining Danay Advi	sed Funds or Other Similar Fund		1500773	
Pc				s" on Form 990, Part IV, line 6.	IS OF ACC	counts.	
	•			(a) Donor advised funds		(b) Funds a	nd other accounts
1	Total number at e	end of year .					
2			ns to (during year)				
3	Aggregate value	•					
4						<u> </u>	
5	organization's pr	roperty, subje	t to the organization's ex	rs in writing that the assets held in dono clusive legal control?			Yes 🗌 No
6	charitable purpo	ses and not fo	r the benefit of the donor	nor advisors in writing that grant funds or donor advisor, or for any other purpo	se conferr		sible
Pa		vation Ease					
1				s" on Form 990, Part IV, line 7. hization (check all that apply).			
•			oublic use (e.q., recreation		f an histor	ically import:	ant land area
	\Box	of natural hab		Preservation of Preservation of			
	\frown						ucture
2		on of open spa 2a through 2d		qualified conservation contribution in the	form of a	conservatio	n
2	easement on the						he End of the Year
а	Total number of	conservation e	asements		2a		
b	Total acreage res	stricted by con	servation easements		2b		
с	Number of conse	ervation easem	ents on a certified histori	c structure included in (a)	2c		
d	historic structure	e listed in the l	National Register	red after July 25, 2006, and not on a	2d		
3	Number of conse tax year ►	ervation easer	nents modified, transferre	d, released, extinguished, or terminated	by the or	ganization du	iring the
4	Number of state	s where prope	rty subject to conservation	n easement is located >		_	
5			written policy regarding the rvation easements it holds	e periodic monitoring, inspection, handli	ng of viol	ations,	Yes 🗌 No
6	Staff and volunt	eer hours dev	oted to monitoring, inspec	ting, handling of violations, and enforcin	g conserv	ation easeme	ents during the year
7	Amount of expent	nses incurred	in monitoring, inspecting,	handling of violations, and enforcing cor	servation	easements o	luring the year
8				above satisfy the requirements of sectio			Yes 🗌 No
9	balance sheet, a	and include, if		ervation easements in its revenue and ex footnote to the organization's financial s			es
Pai	rt III Örganiz	zations Mai	ntaining Collections	of Art, Historical Treasures, or (s" on Form 990, Part IV, line 8.	Other Si	milar Asse	ts.
1a	historical treasu	res, or other s	imilar assets held for pub	C 958, not to report in its revenue state ic exhibition, education, or research in fu ents that describes these items.			
b	If the organization	on elected, as res, or other s	permitted under FASB AS imilar assets held for pub	C 958, to report in its revenue statemen ic exhibition, education, or research in fu	t and bala urtherance	nce sheet we of public se	orks of art, rvice, provide the
(▶\$	
2	If the organization	on received or	held works of art, histori	cal treasures, or other similar assets for ASC 958 relating to these items:			
а	Revenue include	ed on Form 99), Part VIII, line 1			. ►\$	
b							

For Paperwork Reduction	Act Notice, s	ee the Instructio	ns for Form 990.

			Page 2						
chedule D (Form 990	1) 2022								Dago
	izations Maintaining Co	llections of Art.	Historio	cal Tre	asures, o	r Other Simi	lar Assets	(continue	Page
	nization's acquisition, accessio								
a Dublic ex			d		oan or exch	ange programs			
b Scholarly	research		e		Other				
· · ·									
	ion for future generations iption of the organization's co	llections and explain	how the	v furthe	r the organi	zation's exempt	nurnose in		
Part XIII. During the year	, did the organization solicit o	or receive donations of	of art, his	storical t	treasures or	other similar		_	
	d to raise funds rather than to			e organi			U Y	′es 🗌	No
	v and Custodial Arrange te if the organization ans		rm 990,	Part I	V, line 9, o	r reported an	amount on	Form 99	0, Part X
	tion an agent, trustee, custod						_	_	
Included on For	m 990, Part X?					· · · · · · · ·	· · 🗌 Y	′es 🗌	No
b If "Yes," explain	n the arrangement in Part XII	I and complete the fo	ollowing t	able:			Amount	t	
	nce					1c			
	g the year					1d 1e			
_	Iring the year					le 1f			
Linding balance						ļļ			
-	ation include an amount on Fo						_	′es 🗆	No
	the arrangement in Part XIII	i. Check here if the e	explanatio	on has b	een provide	d in Part XIII .	U		
	r ment Funds. Atte if the organization answer	worod "Voc" on Fo	rm 000	Dart I	/ line 10				
compic		(a) Current year	,	ior year		years back (d) Th	hree years back	(e) Four	years back
La Beginning of yea	r balance								
${\boldsymbol{b}}$ Contributions $% {\boldsymbol{b}}$.									
c Net investment e	earnings, gains, and losses								
d Grants or schola	ships								
e Other expenditur and programs									
f Administrative ex	(penses								
g End of year bala	nce								
	mated percentage of the curr ed or quasi-endowment	ent year end balance	e (line 1g	, colum	n (a)) held a	as:			
b Permanent end	owment 🕨								
c Term endowme	nt 🕨								
	s on lines 2a, 2b, and 2c shou	•							
Sa Are there endor organization by	wment funds not in the posse	ssion of the organiza	ation that	are hel	d and admir	nistered for the		Y	es No
	rganizations						[3	3a(i)	
	anizations							Ba(ii)	
	i), are the related organization		on Scheo	dule R?				3b	
Describe in Par	XIII the intended uses of the	e organization's endo	owment fu	unds.					· · ·
	Buildings, and Equipme			_		_			
Comple Description of p	roperty (a) Cost or ot (investm	ther basis (b) Cos	rm 990, st or other l			. See Form 99 cumulated deprecia		ne 10. (d) Book v	value
a Land									
b Buildings									
c Leasehold impro				766	,961	38	2,682		384,279
d Equipment .					,746		4,596		48,150
	rough 1e. (Column (d) must	equal Form 990. Par	t X. colur	nn (B).	line 10(c).)	🕨			432,429

Schedule	D	(Form	990)	2022

Schedule D (Form 990) 2022				Page 3
Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, F	Dart IV	ling 11h Soo Eo	m 000 Part	V line 12
(a) Description of security or category (including name of security)	Book value	Cos	(c) Method of	valuation: r market value
(1) Financial derivatives				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	•			
Part VIII Investments - Program Related.		line 110 See Fo	rm 000 Dart	V line 12
Complete if the organization answered 'Yes' on Form 990, F (a) Description of investment	Part IV,	(b) Book value	(c) Me	ethod of valuation:
(1)			Cost of end	d-of-year market value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)	Þ			
Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV. I	ine 11d. See For	m 990. Part	X. line 15.
(a) Description				(b) Book value
(1)UNEMPLOYMENT SERVICES TRUST - DEPOSITS (2)RIGHT OF USE ASSET - LEASE				30,186 253,841
(2)				233,043
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)		. <u></u> .		284,027
Part X Other Liabilities.	art IV	ino 110 or 1160	00 Earm 000	Part V line 25
Complete if the organization answered 'Yes' on Form 990, P 1. (a) Description of liability	art IV, I	me 11e or 11f.S		(b) Book value

1.

FUNDS HELD ON BEHALF OF OTHERS		3,599
LEASE LIABILTY		304,656
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	•	308,255
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the or	ganization's financial statements that	reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the	text of the footnote has been provide	d in Part XIII 🛛 🗹

Schedule D (Form 990) 2022

	Page 4				
Scheo	lule D (Form 990) 2022				Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stat Complete if the organization answered 'Yes' on Form 990,			eturn.	
1	Total revenue, gains, and other support per audited financial statements			1	1,557,785
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	119,022		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	119,022
3	Subtract line 2e from line 1			3	1,438,763
L	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :				
а	Investment expenses not included on Form 990, Part VIII, line 7b $\ .$	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.) .		5	1,438,763
Par	XII Reconciliation of Expenses per Audited Financial Sta			Return.	
	Complete if the organization answered 'Yes' on Form 990,				
	Total expenses and losses per audited financial statements	• •		1	1,896,958
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 -	1		
а	Donated services and use of facilities	2a	119,022		
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d	• •		2e	119,022
	Subtract line 2e from line 1	• •		3	1,777,936
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		I		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b	• •		4c	0
;	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.) .		5	1,777,936
Par	t XIII Supplemental Information				
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a 2 d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid			V, line 4; Par	t X, line 2; Part XI,
	Return Reference		Explanation		
ART	EXEMPT STATUS) MAY	BE RECO	OM AN UNCERTAIN INCOM GNIZED ONLY WHEN IT IS UPON EXAMINATION BY TA	MORE LIKELY	' THÀN NOT THAT TH

BELIEVES SPNN HAS NO UNCERTAIN INCOME TAX POSITIONS THAT WOULD RESULT IN AN ACCRUAL, EXPENSE OR BENEFIT UNDER THE MORE LIKELY THAN NOT STANDARD. SPNN ADOPTED THE PROVISIONS OF ASC 842, LEASES, USING THE MODIFIED RETROSPECTIVE APPROACH WITH MAY 1, 2022, AS THE DATE OF INITIAL ADOPTION. SPNN ELECTED THE PACKAGE OF PRACTICAL EXPEDIENTS PERMITTED UNDER THE TRANSITION GUIDANCE WITHIN THE NEW STANDARD. WHICH AMONG OTHER THINGS. ALLOWED SPNN TO CARRY FORWARD THE HISTORICAL LEASE CLASSIFICATION. IN ADDITION, SPNN ELECTED THE PRACTICAL EXPEDIENT TO USE HINDSIGHT IN DETERMINING THE LEASE TERM FOR EXISTING LEASES, WHICH RESULTED IN SHORTENING THE LEASE TERMS FOR CERTAIN EXISTING LEASES. UPON IMPLEMENTATION, OPERATING LEASE RIGHT-OF-USE ASSETS INCREASED BY \$357,767, OPERATING LEASE LIABILITIES INCREASED BY \$425,648, AND DEFERRED RENT DECREASED BY \$67,881 AS OF MAY 1, 2022. ADOPTION OF THE NEW STANDARD DID NOT MATERIALLY IMPACT SPNN'S NET INCOME AND HAD NO IMPACT ON CASH FLOWS. EFFECTIVE MAY 1, 2022, SPNN ADOPTED THE PROVISIONS OF ACCOUNTING STANDARDS UPDATE (ASU) 2020-07, NOT-FOR-PROFIT ENTITIES (TOPIC 958): PRESENTATION AND DISCLOSURES BY NOT-FOR-PROFIT ENTITIES FOR CONTRIBUTED NONFINANCIAL ASSETS. THE NEW GUIDANCE REQUIRES NONPROFIT ENTITIES TO PRESENT CONTRIBUTED NONFINANCIAL ASSETS AS A SEPARATE LINE ITEM IN THE STATEMENT OF ACTIVITIES, APART FROM CONTRIBUTIONS OF CASH OR OTHER FINANCIAL ASSETS. THE STANDARD ALSO INCREASES THE DISCLOSURE REQUIREMENTS AROUND CONTRIBUTED NONFINANCIAL ASSETS, INCLUDING DISAGGREGATING BY CATEGORY THE TYPES OF CONTRIBUTED NONFINANCIAL ASSETS A NONPROFIT ENTITY HAS RECEIVED. ADOPTION OF THIS STANDARD REQUIRED INCREASED DISCLOSURE TO CONFIRM TO THE NEW REQUIRED METHOD OF PRESENTATION.

Schedule D (Form 990) 2022

Additional Data

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Schedule I (Form 990)			Grants	and O	ther Ass	istanc	e to Orga	aniza	ations,			Ur	AAAAAAAAAAAAA
(10111 550)							s in the U		•				2022
		c			tion answered	"Yes," o	n Form 990, Pa					(Open to Public
Department of the Treasury			► G	io to <u>www</u>	Attach <u>v.irs.gov/Forn</u>		990. the latest infor	rmatio	n.				Inspection
Internal Revenue Service Name of the organization											Employer i	identifica	tion number
ST PAUL NEIGHBORHOOD	D NETWORK	<									41-15007	73	
Part I General I	Informati	ion on Grant	s and Assista	ance									
the selection criteri	ria used to a	award the grant	s or assistance?						for the grants or assistant	ce, and			🗌 Yes 🛛 🗹 No
2 Describe in Part IV	-			-	-			the er	appization answered "Ves	" on Form		TV line 2	1 for any reginient
			I can be duplica				nts. Complete ir	the or	ganization answered "Yes	on Forr	n 990, Part	IV, line 2	1, for any recipient
(a) Name and addres organization or government	ess of	(b) EIN	(c) IRC se (if applica		(d) Amount grant		(e) Amount of cash assistance		(f) Method of valuation (book, FMV, appraisal, other)) Descriptio ncash assista		(h) Purpose of grant or assistance
(1) LISTEN UP YOUTH F INC 550 VANDALIA STREET 170 SAINT PAUL, MN 55114	SUITE	86-1623276	IRC 5	501(C)(3)		9,654		0					SUPPORT THE ORGANIZATION IN PROVIDING YOUTH ACCESS TO RADIO AND DIGITAL MEDIA, TOOLS TO BUILD COMMUNITY THROUGH
													MEDIA JUSTICE AND OPPORTUNITIES TO AMPLIFY VOICE AND LEADERSHIP.
2 Enter total number											•••		MEDIA JUSTICE AND OPPORTUNITIES TO AMPLIFY VOICE AND
3 Enter total number	r of other or	rganizations list	ed in the line 1	table				. 500551	· · · · · · · · · · · · · · · · · · ·	 	· · ►	Scher	MEDIA JUSTICE AND OPPORTUNITIES TO AMPLIFY VOICE AND LEADERSHIP. 1
	r of other or	rganizations list	ed in the line 1	table				. 500551	· · · · · · · · · · · · · · · · · · ·	 	· · Þ	Scher	MEDIA JUSTICE AND OPPORTUNITIES TO AMPLIFY VOICE AND LEADERSHIP.
3 Enter total number	r of other or	rganizations list	ed in the line 1	table					· · · · · · · · · · · · · · · · · · ·	 	· · •	Scher	MEDIA JUSTICE AND OPPORTUNITIES TO AMPLIFY VOICE AND LEADERSHIP. 1
3 Enter total number	r of other or Act Notice, s	rganizations list	ed in the line 1	table).					· · · · · · · · · · · · · · · · · · ·	 	· · •	Schee	MEDIA JUSTICE AND OPPORTUNITIES TO AMPLIFY VOICE AND LEADERSHIP. 1
3 Enter total number For Paperwork Reduction / Schedule I (Form 990) 20 Part III Grants and	r of other or Act Notice, s 022 Other Ass	rganizations list see the Instructi	ed in the line 1 for some for Form 990	table D. — Page 2 uals. Com	2		Cat. No.	. 500551	990, Part IV, line 22.	· · ·		Sche	MEDIA JUSTICE AND OPPORTUNITIES TO AMPLIFY VOICE AND LEADERSHIP. 1 dule I (Form 990) 2022
3 Enter total number For Paperwork Reduction / Schedule I (Form 990) 20 Part III Grants and Part III can	r of other or Act Notice, s 022 I Other Ass be duplicat	rganizations list see the Instructi sistance to Do ed if additional	ed in the line 1 f ons for Form 990 mestic Individu space is needed	table). — Page : uals. Com	2	nization a	Cat. No.	. 500551 on Form	n 990, Part IV, line 22.		(f) Desc		MEDIA JUSTICE AND OPPORTUNITIES TO AMPLIFY VOICE AND LEADERSHIP. 1 dule I (Form 990) 2022 Page 2
3 Enter total number For Paperwork Reduction / Schedule I (Form 990) 20 Part III Grants and Part III can (a) Type of grant of	r of other or Act Notice, s 022 Other Ass be duplicat or assistanc	rganizations list see the Instructi sistance to Do ed if additional	ed in the line 1 f ons for Form 990 mestic Individe space is needed (b) Number o recipients	table). — Page : uals. Com	2 plete if the orga (c) Amour cash gra	 inization a	Cat. No.	. 500551 on Form					MEDIA JUSTICE AND OPPORTUNITIES TO AMPLIFY VOICE AND LEADERSHIP. 1 dule I (Form 990) 2022
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3 Enter total number For Paperwork Reduction / Schedule I (Form 990) 20 Part III Grants and Part III can (a) Type of grant of (1) NONVIOLENT PEACE (1) (2)	r of other or Act Notice, s 022 Other Ass be duplicat or assistanc	rganizations list see the Instructi sistance to Do ed if additional	ed in the line 1 f ons for Form 990 mestic Individe space is needed (b) Number o recipients	table). — Page : uals. Com	2 plete if the orga (c) Amour cash gra	 inization a	Cat. No.	. 500551 on Form	n 990, Part IV, line 22.		(f) Desc		MEDIA JUSTICE AND OPPORTUNITIES TO AMPLIFY VOICE AND LEADERSHIP. 1 dule I (Form 990) 2022 Page 2
3 Enter total number For Paperwork Reduction / Schedule I (Form 990) 20 Part III Grants and Part III can (a) Type of grant ((1) NONVIOLENT PEACH (1) (2) (3)	r of other or Act Notice, s 022 Other Ass be duplicat or assistanc	rganizations list see the Instructi sistance to Do ed if additional	ed in the line 1 f ons for Form 990 mestic Individe space is needed (b) Number o recipients	table). — Page : uals. Com	2 plete if the orga (c) Amour cash gra	 inization a	Cat. No.	. 500551 on Form	n 990, Part IV, line 22.		(f) Desc		MEDIA JUSTICE AND OPPORTUNITIES TO AMPLIFY VOICE AND LEADERSHIP. 1 dule I (Form 990) 2022 Page 2
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