Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 2022 Open to Public

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection For the 2022 calendar year, or tax year beginning and ending D Employer identification number C Name of organization Check if applicable: Address change GABBY'S LADDER, INC. Doing business as 38-3564824 Name change Number and street (or P.O. box if mail is not delivered to street address) 734-242-8773 Initial return 2262 N. MONROE STREET Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated MONROE MI 48162 556,059 **G** Gross receipts\$ Amended return Name and address of principal officer: H(a) Is this a group return for subordinates? Application pending KAYE LANI R RAFKO WILSON 4916 FRARY LANE H(b) Are all subordinates included? MONROE MI 48161 If "No," attach a list. See instructions **X** 501(c)(3) 501(c) ( 4947(a)(1) or Tax-exempt status: (insert no.) GABBYSLADDER.ORG Website: H(c) Group exemption number Year of formation: 2001 X Corporation Form of organization: Trust Association M State of legal domicile: Part I Summary 1 Briefly describe the organization's mission or most significant activities: PROVIDE GUIDANCE AND SUPPORT TO GRIEVING CHILDREN, TEENS, ADULTS AND Governance PROVIDE GRIEF EDUCATION AND SUPPORT SERVICES TO SCHOOLS, CHURCHES AND THE COMMUNITY 2 Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 10 Activities & 4 Number of independent voting members of the governing body (Part VI, line 1b) 10 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 4 5 6 Total number of volunteers (estimate if necessary) ...... 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 Current Year 8 Contributions and grants (Part VIII, line 1h) 454,832 302,414 Revenue 9 Program service revenue (Part VIII, line 2g) 23,858 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 20,348 27,144 <u>40,5</u>58 2,650 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 363,320 508,484 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ... 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 98,506 150,887 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 689 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 64,460 61,533 162,966 212,420 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 200,354 296,064 19 Revenue less expenses. Subtract line 18 from line 12 5 Beginning of Current Year End of Year 1,492,929 1,327,662 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 13,844 22,018 22 Net assets or fund balances. Subtract line 21 from line 20 313,818 1,470,911 Signature Block 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. Sian Signature of officer Here KAYE LANI R RAFKO WILSON EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Check Paid MATTHEW HEHL 11/15/23 self-employed P01220404 Preparer COOLEY HEHL SABO & CALKINS, 38-1335762 Firm's name Firm's EIN **Use Only** 1 SOUTH MONROE MONROE, MI 734-241-7200

48161

May the IRS discuss this return with the preparer shown above? See instructions

Form 990 (2022) <b>GABBY</b>			38-356	4824	Page 2
		ervice Accomplishmen			
		ins a response or note to	any line in this Part	III	<u></u>
	NCE AND S COVIDE GRI	UPPORT TO GRIEV EF EDUCATION AN NTTY		RVICES TO SCHO	OOLS,
2 Did the americation on	dantalia anni alamifia			d 4b	
prior Form 990 or 990-E If "Yes," describe these	Z?	ant program services during the control of the cont			Yes X No
convicos?		make significant changes in ho		n 	Yes X No
4 Describe the organization expenses. Section 501(	on's program service c)(3) and 501(c)(4)	e accomplishments for each or organizations are required to reach program service reporte	eport the amount of grants	· · · · · · · · · · · · · · · · · · ·	
	penses \$	173,867 including gra THE COMMUNITY		) (Revenue \$ CHILDREN AND	15,086 ) THEIR
*					
•					
•					
•					
•					
•					
	penses \$	250 including gra	ants of \$	) (Revenue \$	<b>3,851</b> )
STACY'S SPARK	LES PROVI	DED SCHOLARSHIP	S AND GRIEF S	SUPPORT	
•					
*					
*					
*					
*					
•					
		2,970 including gra	ants of \$ TO THE COMMU	) (Revenue \$ JNITY FOR EDUC	4,921 )
SUPPORT PURPO	)SES				
*					
***************************************					
• • • • • • • • • • • • • • • • • • • •					
• • • • • • • • • • • • • • • • • • • •					
Ad Other man	(Danasila	44-0)			
<b>4d</b> Other program services (Expenses \$		dule O.) including grants of \$	) (Rever	nue \$	)
4e Total program service ε		177,087	) (Never	ιαο ψ	J

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	<del>                                     </del>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			x
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		122
9	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
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		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	<b> </b>	3.5	
	complete Schedule D, Part VI	11a	X	_
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more	446		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	11b		<u> </u>
·	of its total assets reported in Dort V. line 162 If "Vos." assets Cabadula D. Dort VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	110		<del></del>
ŭ	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	<b> </b>		٠,
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	15		x
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	13		
10	assistance to be for farsign individuals? If "Vac." complete Cabadula F. Darte III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	''		<del></del>
•	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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	l	X

P	art IV Checklist of Required Schedules (Continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
24a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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?			37
	If "Yes," complete Schedule L, Part I	25b		X
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%			v
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Ves." complete Schedule I. Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
-	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	051		
26	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
31	and that is treated as a markemphile for forderel isosome tour mumases? If (1)(as " assemble Colorated B. Dort VII	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	······		
	19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38		х
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance	, 55		_
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 5			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 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		X

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
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?			
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	7.		
لہ	required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year  7d	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
e f	Did the organization during the year new promiums directly or indirectly on a personal honofit contract?	75		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
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?			
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			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
<b>L</b>	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
•	the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  13c			
с 14а	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			
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?	15		х
	If "Yes," see instructions and file Form 4720, Schedule N.			_
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, 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?	17		
	If "Yes," complete Form 6069.			

38-3564824 Form 990 (2022) GABBY'S LADDER, INC. Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 10 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent ..... 10 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O... X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? X 14 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 X 15a X Other officers or key employees of the organization 15b 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? Х 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **NONE** 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Don request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records

KAYE LANI WILSON

2262 N MONROE ST

734-242-8773

MI 48162

MONROE

Form 990 (2022)	CARRYIS	T.ADDER -	INC.

3	Q	_	3	5	6	4	Q	2	4

Page 7

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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

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

Ĺ	Check	this	box i	f neither	the	organization	nor an	y related	l organizatio	n compensated	d any	/ current	officer	r, director,	or trustee.

<u> </u>		-					<del></del>			
(A) Name and title	(B) Average hours per week	box	x, unle	ss pei	tion more rson i	than one s both an or/trustee)	(D) Reportable compensation from the		<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	organization (W-2 1099-MISC/ 1099-NEC)	Y	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) KAYE LANI R RAFI	KO WILSO	N								
•	40.00									
EXECUTIVE DIRECTOR	0.00	X					46,	800	0	0
(2) LAURIE BERRY										
• •	0.00									
DIRECTOR	0.00	X						0	0	0
(3) KAREN CALENDER										
• •	0.00									
DIRECTOR	0.00	X						0	0	0
(4) BENJAMIN CAPAUL										
	0.00									
DIRECTOR	0.00	X						0	0	0
(5) NICHOLAS CAPAUL										
• •	0.00									
DIRECTOR	0.00	X						0	0	0
(6) RENEE DARROW										
•	0.00									
PRESIDENT	0.00	X		х				0	0	0
(7) CHRISTIAN J HORI	KEY									
	0.00									
DIRECTOR	0.00	X						0	0	0
(8) APRIL KASSUBA										
	0.00									
DIRECTOR	0.00	X						0	0	0
(9) LAURA LOVELAND										
	0.00									
TREASURER	0.00	X						0	0	0
(10) JUSTIN MILLER										
	0.00									
DIRECTOR	0.00	X						0	0	0
(11) AMY ZAREND										
	0.00									
SECRETARY	0.00	X		X			<u> </u>	0	0	0
										Form 990 (2022)

Pa	rt VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	es, a	and Highest Compensated	Employees (continued)				
	(A) Name and title	bo	x, unle	Pos check ess pe	Position eck more than s person is bot d a director/trus  Officer  Officer  Officer			(D)  Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated am of other compensation from the organization related organiz		er ation he on and	5	
									46, 800					
1b c d 2	Total from continuation sheet Total (add lines 1b and 1c) Total number of individuals (in reportable compensation from	ets to Part VII, \$	Secti mite	ion A	۹ 				46,800 46,800 e) who received more than	\$100,000 of			V [	
3 4 5	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organization and related organization and person listed on line of the state	complete Schede 1a, is the sum nizations greater	dule of re than	J for eport	suc able 50,00	h ind com	dividi npens f "Ye	sations," o	on and other compensation complete Schedule J for su	from the		3	Yes	X X
<u></u>	for services rendered to the o	rganization? If "Y									<u></u>	5		X
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.											(0)			
Name and business address Description of services Co											Cor	(C) mpensati	on	
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0														

Form 990 (202	22) GABBY'S	LADDER,	INC
Part VIII	Statement of	Revenue	

Pa	rt V			<b>t Revenue</b> edule O conta	ains a	respor	se or note	to any line in this	s Part VIII		
						•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts its	1a	Federated camp	paigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership due	es		1b						
s, C Am	С	Fundraising eve	nts		1c						
3ift lar	d	Related organization	ations		1d						
s, ( imi	е	Government grants (co	ontributio	ns)	1e						
tion sr S	f	All other contributions, and similar amounts no	gifts, gra	ants,	1f		454,832				
the	q	Noncash contributions			-''-		131,032				
dt		lines 1a-1f									
<u>a Ö</u>	h	Total. Add lines	1a-1f	: 				454,832			
							Business Code				
ice	2a		RVEYS	<b>!</b>			999999	23,858	23,858		
Program Service Revenue	b	·									
m S	C										
gra	a										
Pro	e	All other prograr		ioo rovonuo							
		Total. Add lines						23,858			
		Investment incor						23,030			
		other similar am	,	•		-		32,988			32,988
	4	Income from inv	estme	nt of tax-exempt	bond	proceeds	·····	-			-
	5	Royalties									
				(i) Real			Personal				
	6a	Gross rents	6a								
	b	Less: rental expenses	6b								
	С	Rental inc. or (loss)	6с								
	d Net rental income or (loss)			loss)		· · · · · · · · · · · · · · · · · · ·					
	1 a	a Gross amount from sales of assets (i) Securities			(ii	) Other					
		other than inventory	7a	41,	,731						
Revenue	b	Less: cost or other		4.5							
eve.		basis and sales exps.	7b		,575 ,844						
Ŗ		Gain or (loss)	7c					-5,844	-5,844		
Other		Net gain or (loss Gross income from						-3,644	-5,044		
0	Ua	(not including \$		5							
		of contributions rep									
		1c). See Part IV, lir			8a		2,650				
	b	Less: direct exp			8b						
		Net income or (I			events			2,650			2,650
		Gross income fr		_							
		activities. See Pa			9a						
	b	Less: direct expe	enses		9b						
		Net income or (I			vities .						
	10a	Gross sales of in									
		returns and allow			10a						
		Less: cost of go			10b						
	С	Net income or (I	oss) fr	om sales of inve	entory		Business Code				
sno	11-						DUSITIESS COUR				
nec	11a										
ella	b										
Miscellaneous Revenue	Ч	All other revenue									
2		Total. Add lines									
		Total revenue.						508,484	18,014	0	35,638

# Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all

Pa	rt IX Statement of Functional Ex	penses			
Secti	on 501(c)(3) and 501(c)(4) organizations must c			nplete column (A).	
	Check if Schedule O contains a resp				
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	16 900	22 652	22 007	241
_	trustees, and key employees	46,800	22,652	23,907	<u>241</u>
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	92,315	92,315		
8	Pension plan accruals and contributions (include	32,323	32,323		
Ŭ	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	252		252	
10	Payroll taxes	11,520	9,672	1,830	18
11	Fees for services (nonemployees):	-	-	·	
а	Management				
b	Legal				
С	Accounting	6,470		6,470	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	1,949	1,804	145	
g	Other. (If line 11g amount exceeds 10% of line 25, column	4	44 455	405	
	(A) amount, list line 11g expenses on Schedule O.)	14,737	14,175	487	75
12	Advertising and promotion	959	911	29	19
13	Office expenses	2,229	1,895	223	111
14	Information technology				
15 16	Royalties	10,104	9,013	1,011	80
17	Occupancy Travel	10,104	J,013	1,011	
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,275	2,269	4	2
20	Interest	, -	,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	19,946	19,946		
23	Insurance	2,864	2,435	286	143
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	•				
b	·				
C	•				
d	All other expanses				
е 25	All other expenses  Total functional expenses. Add lines 1 through 24e	212,420	177,087	34,644	689
	Joint costs. Complete this line only if the	212/120	1777007	31,011	<u></u>
	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)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X. (A) (B) Beginning of year End of year 204,676 341,726 Cash—non-interest-bearing 1 2 Savings and temporary cash investments ...... 2 3 Pledges and grants receivable, net 3 65,993 108,120 Accounts receivable, net Loans and other receivables from 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 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 8 Inventories for sale or use 8 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 999,500 10a b Less: accumulated depreciation 10b 54,485 508,200 945,015 10c 369,653 196,909 Investments—publicly traded securities 11 11 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 42,090 38,209 15 1,492,929 1,327,662 Total assets. Add lines 1 through 15 (must equal line 33) ..... 682 Accounts payable and accrued expenses 17 7,206 17 Grants payable 18 18 Deferred revenue 19 19 Tax-exempt bond liabilities 20 20 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, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties \_\_\_\_\_\_ 23 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 13,162 of Schedule D 14,812 13,844 22,018 Total liabilities. Add lines 17 through 25 ..... 26 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 1,238,618 1,470,911 27 75,200 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 29 Paid-in or capital surplus, or land, building, or equipment fund 30 Retained earnings, endowment, accumulated income, or other funds 31 31 Total net assets or fund balances 1,313,818 1,470,911 32 1,492,929 1,327,662 Total liabilities and net assets/fund balances .....

Form **990** (2022)

Pa	art XI Reconciliation 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			484
2	Total expenses (must equal Part IX, column (A), line 25)	2		12,	
3	Revenue less expenses. Subtract line 2 from line 1	3		96,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		13,	
5	Net unrealized gains (losses) on investments	5	-1	38,	<u>971</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	1,4	70,	<u>911 </u>
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		<u> </u>	
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		—
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

#### SCHEDULE A

(Form 990)

Part I

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

20027

Open to Public Inspection

Name of the organization

GABBY'S LADDER, INC. 38-356483

Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

Employer identification number 38-3564824

The	orga	nization is not	a private foundation because	e it is: (For lines 1 through 12, o	check only	one box	.)			
1	Ш	A church, cor	nvention of churches, or ass	ociation of churches described	in <b>sectio</b> i	n 170(b)(	1)(A)(i).			
2	Ш	A school des	cribed in section 170(b)(1)(	A)(ii). (Attach Schedule E (Forn	n 990).)					
3	Ш	A hospital or	a cooperative hospital servi-	ce organization described in se	ction 170	)(b)(1)(A)	iii).			
4		A medical res	search organization operated	I in conjunction with a hospital	described	in <b>sectio</b>	on 170(b)(1)(A)(iii). Enter the h	nospital's name,		
	_	city, and state	e:							
5	Ш	An organizati	on operated for the benefit of	of a college or university owned	or operat	ed by a g	overnmental unit described in			
		section 170	(b)(1)(A)(iv). (Complete Part	II.)						
6	Ц	A federal, sta	ite, or local government or g	overnmental unit described in s	section 17	70(b)(1)(A	λ)(v).			
7		•	on that normally receives a section 170(b)(1)(A)(vi). (C	substantial part of its support fro omplete Part II.)	om a gove	ernmental	unit or from the general public			
8				170(b)(1)(A)(vi). (Complete Part	t II.)					
9	П	•		cribed in section 170(b)(1)(A)(i	,	ed in con	junction with a land-grant colle	ge		
	_	-	<u> </u>	of agriculture (see instructions).			•			
	_	university:								
10	X	An organizati	on that normally receives (1)	more than 33 1/3% of its supp	oort from	contributio	ons, membership fees, and gro	ss		
		•		pt functions, subject to certain						
			S .	nd unrelated business taxable in	,		,			
44			•	0, 1975. See <b>section 509(a)(2)</b>						
11	Н	•	•	exclusively to test for public safe	•			and of		
12	Ш	-		exclusively for the benefit of, to lons described in <b>section 509(a</b>	•					
				scribes the type of supporting or				. Oncor		
	а		<u>-</u>	,, ,, ,,	•		•	na		
		Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the								
		supporting organization. You must complete Part IV, Sections A and B.								
	b	Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having								
		control or	management of the suppor	ting organization vested in the s	same pers	sons that	control or manage the support	ed		
		organization(s). You must complete Part IV, Sections A and C.								
	С			supporting organization operated structions). You must complete				rith,		
	d	Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s)								
		that is no	t functionally integrated. The	e organization generally must sa	atisfy a di	stribution	requirement and an attentiven	ess		
		requireme	ent (see instructions). <b>You</b> r	nust complete Part IV, Sectior	ns A and	D, and P	art V.			
	е			eived a written determination fro			s a Type I, Type II, Type III			
	f		nber of supported organizati	n-functionally integrated suppor	ung organ	iizaliori.		1		
	g		11	ne supported organization(s).						
/i)		e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount	of	
(1)		anization	(11) = 114	(described on lines 1–10		ur governing	support (see	other support		
				above (see instructions))	docur	ment?	instructions)	instructions	s)	
					Yes	No				
(A)										
(B)										
(5)										
(C)										
(D)										
/E\										
(E)										
Tota										
F		nuaric Dadmatia		: f F 000 000 F7				Calcaduda A /Causa	000\ 2022	

Page 2

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

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

Sec	tion A. Public Support							
Caler	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 202	22	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
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							
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							
Sec	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 202	22	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and 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 assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activities, etc.	(see instructions)					12	
13	First 5 years. If the Form 990 is for the or	rganization's first, s	second, third, fourt	h, or fifth tax year	as a section 501(c	:)(3)		
	organization, check this box and stop her						<u> </u>	
Sec	tion C. Computation of Public Su	<u> </u>						
14	Public support percentage for 2022 (line 6	, column (f) divided	d by line 11, colun	nn (f))			14	%_
15	Public support percentage from 2021 Sche	edule A, Part II, lin	e 14				15	%_
16a	33 1/3% support test—2022. If the organ	ization did not che	ck the box on line	13, and line 14 is $$	33 1/3% or more,	check this		_
	box and stop here. The organization qual	ifies as a publicly	supported organiza	ation				
b	<b>33 1/3% support test—2021.</b> If the organ this box and <b>stop here.</b> The organization			onization	15 is 33 1/3% or m			
17a	10%-facts-and-circumstances test—202	22. If the organizati	ion did not check a					
	10% or more, and if the organization mee							
	Part VI how the organization meets the fa							
<b>h</b>	organization							Ц
b	10%-facts-and-circumstances test—202	ŭ		•				
	15 is 10% or more, and if the organization			•	•	•		
	in Part VI how the organization meets the			-				
19	organization <b>Private foundation.</b> If the organization did							
18								
	instructions							L

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

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

Sec	tion A. Public Support	, ,		, <b>1</b>	'	,	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	377,076	220,688	250,341	303,205	454,832	1,606,142
_		377,070	220,000	250,541	303,203	454,052	1,000,142
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	10,828	13,291	50,234	42,877	23,858	141,088
3	Gross receipts from activities that are not an unrelated trade or business under section 513		2,300				2,300
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	387,904	236,279	300,575	346,082	478,690	1,749,530
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
500	tion B. Total Support						1,749,530
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9		387,904	236,279	300,575	346,082	478,690	1,749,530
		367,904	230,279	300,575	340,082	470,090	1,749,530
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		2,265	1,266	20,048	32,988	56,567
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b		2,265	1,266	20,048	32,988	56,567
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	387,904	238,544	301,841	366,130	511,678	1,806,097
14	First 5 years. If the Form 990 is for the o			•			_,
	organization, check this box and stop her	•		•	, ,		
Sec	tion C. Computation of Public S	upport Percent	age				
15	Public support percentage for 2022 (line 8	s, column (f), divided	d by line 13, colun	nn (f))		15	96.87 %
<u>16</u>	Public support percentage from 2021 Sch					16	%
Sec	tion D. Computation of Investme					, ,	
17	Investment income percentage for 2022 (			3, column (f))		17	3 %
18	Investment income percentage from 2021						%
19a	33 1/3% support tests—2022. If the orga						X
J.	17 is not more than 33 1/3%, check this b		=				<b>A</b>
b	33 1/3% support tests—2021. If the orgal line 18 is not more than 33 1/3%, check the						
20	<b>Private foundation.</b> If the organization die		-			-	_
	Isaniaansii ii tilo organization ai	01.00K a box c	, 100, 01		555 1115114611	~~	· · · · · · · · · · · ·

#### Part IV **Supporting Organizations**

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

### Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 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.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign b 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.
- 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)
- 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).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? С
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a 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.
- 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.
- 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.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5с		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	104		
Sche	10b dule A	(Form 9	990) 2022

Schedule A (Form 990) 2022

Part IV Supporting Organizations (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a 11b **b** A family member of a person described on line 11a above? c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 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 each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed 1 the supported organization(s). Section D. All Type III Supporting Organizations Yes No 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? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 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). The organization satisfied the Activities Test. Complete line 2 below. а b The organization is the parent of each of its supported organizations. Complete line 3 below. c | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) Activities Test. Answer lines 2a and 2b below. Yes No 2 a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a 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. 2b 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. 3a 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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V Type III Non-Function Part V Type III Non	ganiza	tions	· ·
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	ov. 20, 1	1970 (explain in Part VI).	See
instructions. All other Type III non-functionally integrated supporting organizations mu	ıst comp	lete Sections A through E	
Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year
		(71) THOI TOU	(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):			
a Average monthly value of securities	1a		
<b>b</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			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
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 0.85 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 integrated	d Type II	Il supporting organization	
(see instructions).	- *		

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions				
Amounts paid to supported organizations to accomplish exempt purposes	1			
Amounts paid to perform activity that directly furthers exempt purposes of supported				
organizations, in excess of income from activity	2			
Administrative expenses paid to accomplish exempt purposes of supported organizations	3			
Amounts paid to acquire exempt-use assets	4			
Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5			
Other distributions (describe in Part VI). See instructions.	6			
Total annual distributions. Add lines 1 through 6.	7			
Distributions to attentive supported organizations to which the organization is responsive	8			
(provide details in Part VI). See instructions.				
Distributable amount for 2022 from Section C, line 6	9			
Line 8 amount divided by line 9 amount	10			
	Amounts paid to supported organizations to accomplish exempt purposes  Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity  Administrative expenses paid to accomplish exempt purposes of supported organizations  Amounts paid to acquire exempt-use assets  Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)  Other distributions (describe in Part VI). See instructions.  Total annual distributions. Add lines 1 through 6.  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.  Distributable amount for 2022 from Section C, line 6	Amounts paid to supported organizations to accomplish exempt purposes  Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity  Administrative expenses paid to accomplish exempt purposes of supported organizations  Amounts paid to acquire exempt-use assets  Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)  5 Other distributions (describe in Part VI). See instructions.  6 Total annual distributions. Add lines 1 through 6.  7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.  Distributable amount for 2022 from Section C, line 6		

Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1_	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required-explain in Part VI). See			
	instructions.			
	Excess distributions carryover, if any, to 2022			
	From 2017			
	From 2018			
	From 2020			
	From 2021			
	Total of lines 3a through 3e			
	Applied to underdistributions of prior years			
	Applied to 2022 distributable amount			
	Carryover from 2017 not applied (see instructions)			
i	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			
	Applied to 2022 distributable amount			
	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. 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			
	Excess from 2020			
d	Excess from 2021			
е	Excess from 2022			Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

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

DAA Schedule A (Form 990) 2022