EXTENDED TO NOVEMBER 15, 2023 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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For the	2022 calendar year, or tax year beginning and ending		
В	Check if applicable	C Name of organization	D Employer identific	cation number
Г	Addres change	AMERICAN PROMISE, INC.		
	Name Change	Doing business as	47-46088	40
	Initial return	Number and street (or P.O. box if mall is not delivered to street address) Room/st	lite E Telephone numbe	r
	Final return/	33 BRADFORD STREET	(978) 25	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross recelpts \$	1,191,379.
	Amend return	CONCORD, MA 01/42	H(a) Is this a group re	
	Applica		for subordinates	
	pendin	SAME AS C ABOVE	H(b) Are all subordinates in	
		The state of the s		list. See instructions
	Websit		H(c) Group exemptio	
			ear of formation; ZUIDIA	A State of legal domicile: MA
LP		Summary	סט דאומטדטט א	NTD ODCANTTOD
8	1 1	Briefly describe the organization's mission or most significant activities: $\frac{ extbf{TO}}{ extbf{TO}}$ $\frac{ extbf{EMPOW}}{ extbf{TO}}$	ONCOTOUTOR A	ND ORGANIZE
a	-			
Governance		Check this box if the organization discontinued its operations or disposed of not not not not in the governing body (Part VI, line 1a)	1 -	5
Ĝ		Number of Independent voting members of the governing body (Part VI, line 1b)		<u>~</u> <u>~</u> 5
•ජ ග		Fotal number of individuals employed in calendar year 2022 (Part V, line 12)		24
iřie		Total number of volunteers (estimate if necessary)		225
Activities &		otal unrelated business revenue from Part VIII, column (C), line 12		0.
⋖		Net unrelated business taxable income from Form 990-T, Part I, line 11		0.
			Prior Year	Current Year
0	8 (Contributions and grants (Part VIII, line 1h)	872,520.	1,189,933.
ana	9 1	Program service revenue (Part VIII, line 2g)	0.	0.
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
-	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	1,446.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	872,520.	
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
Ses	15 3	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 236,942.	308,509. 20,175.	562,348.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	20,175.	U •
찙	b	lotal fundraising expenses (Part IX, column (D), line 25) 430, 942.	394,400.	576,568.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	723,084.	
	1	Revenue less expenses, Subtract line 18 from line 12	149,436.	52,463.
70	3	tevenue reas expenses, outstract line to nominio 12	Beginning of Current Year	End of Year
\$ £	20	Fotal assets (Part X, line 16)	917,638.	869,583.
SSE	21	Fotal liabilities (Part X, line 26)	133,760.	33,242.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20	783,878.	836,341.
P	art II	Signature Block		
		ties of perjury, I declare that I have examined this return, including accompanying schedules and sta		y knowledge and bellef, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all Information of which prep		
		Signatura of official CHENTENTT	Date	<u> </u>
Sig	1	Signature of officer	Date	
He	re	JEFF CLEMENTS, PRESIDENT Type or print name and title	·	
			Date Check	PTIN
p.	, I	Print/Type preparer's name SANDRA M. BROWN, CPA Preparer's signature Andrew M. Brown	O8/08/23 Check Lift self-employ	
Pai	parer	Firm's name SMITH, SULLIVAN & BROWN, P.C.		3-1985162
	Parer Only	Firm's address 80 FLANDERS ROAD - SUITE #302	FIIII S EIN 4	<u> </u>
val	- viiiy	WESTBOROUGH, MA 01581	Phone no. (5	08) 871-7178
Ma	v the IF	S discuss this return with the preparer shown above? See instructions	Transition ()	X Yes No

10420808 807818 AME8840

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)?	,		X
_	If "Yes," complete Schedule A	2	Х	
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
~	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Rev. Proc. 98-197 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		X
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		_X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u>X</u>
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			T.F
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			X
	Part VI	11a		
þ	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		x
_	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 of its total	11b		
Ç	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
a	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
Δ.	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	-114		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	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 foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	or for foreign Individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			x
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	<u> </u>	 ^-
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		x
40	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		- 42
19		19		x
200	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	<u> </u>		-
~ '	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Form 990 (2022) AMERICAN PROMISE,
Part IV Checklist of Required Schedules (continued)

Pert N. Column (A), In e2? If "Yes," complete Schedule I, Parts I and III 20 Did the organization assert "7" e1* To Part VII), Section A, Ins. 3, 4, e7 s, about compensation of the organization's current and former officers, direction, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24a Did the organization have a tax-exempt bonds sex 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 IV. "14" (%)" or a few accession of the sex exempt bonds beyond a temporary period exception" 24b or Did the organization market an escrow account other than a refunding encrow at any time during the year of several and the sex exempt bonds outstanding at any time during the year of several and year of the sex exempt bonds outstanding at any time during the year of the sex exempt bonds outstanding at any time during the year of the sex exempt bonds outstanding at any time during the year 2. 24b Did the organization are that it engaged in an excess benefit transaction with a disqualified person of with a disqualified person of the principal of the sex exempts benefit transaction with a disqualified person of the organization with a disqualified person of the organization and that the transaction have the sex expected on any excess benefit transaction with a disqualified person of the organization with a disqualified person of the organization and the sex expected on any excess benefit transaction with a disqualified person of the organization and the sex expected on any excess benefit transaction with a disqualified person of the organization and the sex expected on any excess benefit transaction with one of the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction are year in the organization engage in an excess benefit transaction with a disqualified person in a prior year, and t				Yes	No
Did the organization saver "Yes" to Perk IVI, Section A, Ilins 3, 4, or 5, about comparation of the organization's current and former officers, directors, trustees, key employees, and highest comparated employees? If "Yes," complete Schedule IV Pres," protection of the last day of the year, that was issued after December 37, 2002; If "Yes," answer lines 28th through 284 and complete Schedule IV. If Wo," por line 28s. 24d X	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			**
and tromar officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part II and the state day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24th through 24d and complete Schedule K. If "No." po to the 25s		, , , , , , , , , , , , , , , , , , , ,	22		<u> </u>
Schedule / Land Did the organization have a tax-exempt bond leave with an outstanding principal amount of more than \$100,000 as of the least day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," po to line 25a. Schedule K. If "No," po to line 25a. Did the organization maintain an escrow account other than a rehanding serrow at any time during the year of the property bonds? Did the organization maintain an escrow account other than a rehanding serrow at any time during the year of the property bonds? did bit the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Sacctics 05(4(5)), 05(10(4)), and 601(10(28) organizations. Did the organization are paging in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I. 15 is the organization wave that the regarded in a recessee benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I. 25b List the organization report any amount on Part X, Ine 5 or 22, for receivables from or paysables to any current or former officer, director, trustee, key employee, creator or former officer, director, trustee, key analyses between the propinger schedule and the propinger sc	23	· ·			
24a Did the organization have a tax-exampt bond issue with an outstanding principal amount of more than \$150,000 as of the last day of the year, that was issued effer December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to the 25a			00		y
sheduke (if Mo., por large 25a	04.	Schedule J	23		
Schedule K. If *No.** por tail ne 25a b Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tux-exempt bonds? c Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tux-exempt bonds? 24d Did the organization maintain an escrow account other than a refunding secrow at any time during the year? Office of Did the organization of the secretary to the secretary than a did not the secretary to the secretary than a did not the secretary than a discussified person in a pitor year, and that the transaction with a disqualified person during the year? If *Ves, *complete Schedule L, Part I	24a				
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an accrow account other than a refunding ecrow at any time during the year'to defease any tax-exempt bonds? d Did the organization set as an 'no behalf of 'issuer for bonds outstanding at any time during the year't of defease any tax-exempt bonds? 24d			24a		х
c Did the organization meintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? d Did the organization meintain an escrow account other than a refunding secrow at any time during the year? 24d 25a Section 501(c)(3), 901(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? if 1'ves, "complete Schedule I. Part 1 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 with a disqualified person in a prior year, and that the transaction 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 transity member of any of these persons? if "Yes," complete Schedule L. Part II 26 X 27 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? if "Yes," complete Schedule L. Part II 26 X X 28 Was the organization report any amount or employee thereof, a grant selection committee member, or to a 85% controlled entity (including an employee threeof or family member of any individual described in the 28ad if "Yes," complete Schedule L. Part IV 27 X X X X X X X X X	h				
any tax-exempt bonds? 46c 47c 48c 48c 48c 48c 48c 48c 48					
d Did the organization act as an "on behalf of" Issuer for bonds outstanding at any time during the year? 25a Section S01(c)(3), 901(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Pes," complete Schedule L, Part I 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 with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization provide Schedule L, Part II 25b X 26 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 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Zib Was the organization aporty to a business transaction with one of the following parties (see the Schedule L, Part IV 28 Was the organization aporty to a business transaction with one of the following parties (see the Schedule L, Part IV 28 A family member of any individual described in line 28a* If "Yes," complete Schedule L, Part IV 28 A family member of any individual described in line 28a* If "Yes," complete Schedule L, Part IV 29 Did the organization neceive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule III 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule III 29 Did the organization includate, terminate, or dissolve and cease operations? If "Yes," complete Schedule III 20 Did the organization receive contributions of art, historical treasures, or other similar assets,	Ī		24c		
25a Section 501(c)(3), 501(c)(4), and 501(c)(20) 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 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 prior Forms 990 or 990-EZ7 If "Yes," complete Schedule L, Part I 25b X 2 10 the organization report any amount on Part X, line 5 or 22, for receivables from or psyables 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? 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 or ganger assistantial contributor or employee thereof or ganger assistantial contributor or employee thereof or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part II 27 X 28 A 256 Controlled entity of one or more individuals and/or organizations described in line 28a or 28b7II 28a X 29 Did the organization receive more than \$25,000 in non-eash contributions? If "Yes," complete Schedule II, Part II 28a X 29 Did the organization receive more than \$25,000 in non-eash contributions? If "Yes," complete Schedule M 29 X 29 X 29 Did the organization selector contributions or art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 29 X 29 X 20 Did the organization organization selected organization organization related to any tax-exempt or a transfer more then organization under Regulations sections 301,7701-2 and 301,7701-37 If "Yes,"	d				
transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I					
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I 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 of 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 forholding an employee thereof or family member of any or complete Schedule L, Part III 27 X 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part III 27 X 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV 28 X 29 A Current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "ves," complete Schedule L, Part IV 28 X 29 Did the organization feether more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 29 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 33 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 30.1,7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iino 1 34 Was the organization have a controlled enti			25a		X
Schedule L, Part I 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, trustase, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If *Yes,* complete Schedule L, Part II 25	b				
Did the organization report any amount on Part X, line 6 or 22, for receivables from or psyables 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? If "Yes," complete Schedule L, Part III 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions; a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28 A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28 A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II. Part IV. 29 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule II. Part IV. 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule II. Part II. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule II. Part II. 31 Did the organization or of 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 II, III, or IV, and Part V, lino 1 32 Did the organization have a controlled entity within the meani		that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? if "Yes," complete Schedule L, Part III. 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): a A current of former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28 A SS% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 28 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Did the organization receive contributions of art, historical tressures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 X 31 Did the organization liquidate, terminate, or dissolve and cases operations? If "Yes," complete Schedule N, Part II. 31 Did the organization liquidate, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 32 Did the organization own 100% of an entity diaregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I. 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II. 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36		(,	25b		<u> </u>
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26	26				ł
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 7 if "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28 A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b7If "Yes," complete Schedule L, Part IV 28 C X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, and it is a part of the organization injudate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 30 Did the organization injudate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 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 II, III, or IV, and Part V, line 1 33 Did the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Did the organization organization neated to any tax-exempt or exable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, III organization complete Schedule R,					37
creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule I., Part III, III, III, III, III, III, III, II			26		<u> </u>
entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III, Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28a X 28b X 28b X 28c 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 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part II 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part II 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Ilno 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 37 X 38 Did the organization conduct more than 5% of its activities through an entity that is not a related organization? 38 If the organization conduct more than 5% of its ac	27				
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): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X c 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 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization ilquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 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 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iiine 1 34 Y Stee organization have a controlled entity within the meaning of section 512(b)(13)? The "Yes," complete Schedule R, Part V, Iiine 2 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iiine 2 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, Iiine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organ					v
Instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustes, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule I. Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L., Part IV c A 55% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L., Part IV 28b X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part II 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35b Section 501(c)(3) organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organization or the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part V, lines 11			27		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X c 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 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 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 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iline 1 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, Iline 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iline 2 35b Section 501(c)(3) organizations. 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, Iline 2 36c Ji the organization conduct more than 5% of its activities through an entity that is not a related organization? If "Yes," complete Schedule R, Part V, Iline 2 36 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b	26	· · · · · · · · · · · · · · · · · · ·			
"Yes," complete Schedule L, Part IV 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 Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30	•				[<u>-</u>
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c 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 30 If 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 If the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 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 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Ilne 1 34 X 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35 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, Ilne 2 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, Ilne 2 36 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 V Inne 2 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, Ilnes 11b and 19? Note: All Form 990 filers are required to complete Schedule O organization to organization comple	а		28a		Х
*** **** Complete Schedule L, **Part IV** 286	b		-		
"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30		•			
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30	_		28c		Х
contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32	29		29	Х	
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31	30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
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 X 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 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 X 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 V I 37 X 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 and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O and In this Part V I In the Inter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 13 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 0 C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			30		
Schedule N, Part II 32	31	• • • • • • • • • • • • • • • • • • • •	31		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	32				i
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33		Schedule N, Part II	32		X
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 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 Jid 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 V Jines 11b and 19? Note: All Form 990 filers are required to 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 and Int his Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	33				۱.,
Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35a X 35a X 35a X 35a X 35a X 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 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 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 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 X Part 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 4 Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			33		
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 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for réportable payments to vendors and reportable gaming	34	M. LLL V. A.	34	x	
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 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 Note: All Form 990 filers are required to complete Schedule O Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for réportable payments to vendors and reportable gaming		Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part Vi 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 Check if Schedule O contains a response or note to any line in this Part V 10 Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	b				
If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 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 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			35b		<u></u>
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 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 88 X Part VI Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	36		36		
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 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 Check if Schedule O contains a response or note to any line in this Part V 10 Enter the number reported in box 3 of Form 1096, Enter -0- if not applicable Check if Schedule O contains a response or note to applicable Did the organization comply with backup withholding rules for réportable payments to vendors and reportable gaming	37				
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 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V The image of the provided in box 3 of Form 1096. Enter -0- if not applicable applicable because of Forms W-2G included on line 1a. Enter -0- if not applicable appl		- · · · · · · · · · · · · · · · · · · ·	37		X
Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for réportable payments to vendors and reportable gaming	38	• • •			<u> </u>
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 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		Note: All Form 990 filers are required to complete Schedule O	38	X	
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 13 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	Pa				
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 13 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for réportable payments to vendors and reportable gaming		Check if Schedule O contains a response or note to any line in this Part V		·····	ᆜ
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for réportable payments to vendors and reportable gaming				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming					:
			4		!
	С	(gambling) winnings to prize winners?	1c	 	

232004 12-13-22

10420808 807818 AME8840

1. 41	Contents regarding other ric I migo did tax compliance (seminary)		_	1	_
_	The state of the s	ı		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	2a 2	4		
	filed for the calendar year ending with or within the year covered by this return			X	<u></u> :
	and the second s			+	x
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		·		
	At any time during the calendar year, did the organization have an interest in, or a signature or other		. 00	1	
*Fa	financial account in a foreign country (such as a bank account, securities account, or other financial		4a		x
h	If "Yes," enter the name of the foreign country		-		
	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).	-	1	
59	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa				X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	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 contribut				
	were not tax deductible?		. 6b	X	
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 set	vices provided to the payo	r? 7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	*************	. 7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?		. 7c		
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 of	ontract?	. 7e	.	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?	. 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file February		_	┷	<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz		? 7h		ļ
8	Sponsoring organizations maintaining donor advised funds, Did a donor advised fund maintained	l by the			
_	sponsoring organization have excess business holdings at any time during the year?		. 8		
9	Sponsoring organizations maintaining donor advised funds.			-	ļ
a				_	
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		<u>9b</u>	 	
10	Section 501(c)(7) organizations. Enter:	ا مها			
	Initiation fees and capital contributions included on Part VIII, line 12	10a	\dashv		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	l ion !	\dashv		
11	Out to the same of the same property and the same believes	11a			
	Gross income from other sources. (Do not net amounts due or paid to other sources against	Tra :	_		
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts, is the organization filing Form 990 in lieu of Form		126	.	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			\vdash
13	Section 501(c)(29) qualified nonprofit health Insurance issuers.		┨.,		
	Is the organization licensed to issue qualified health plans in more than one state?		138	1	
	Note: See the instructions for additional information the organization must report on Schedule O.		" —		
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
C	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14:	1	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	ile O	. 141)	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remund	eration or			
	excess parachute payment(s) during the year?		. 15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	nt income?	16		Х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any actions.				1
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17	_	
	If "Yes," complete Form 6069.		- 1	1	1

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
• •			Yes	Nο
1a	Enter the number of voting members of the governing body at the end of the tax year			:
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			:
b	Enter the number of voting members included on line 1a, above, who are independent 1b 5			:
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		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		w
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	.		х
L.	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a		-22
D	the effect of the second transfer of the selection	76		х
ø	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		
8		8a	_ X	· ·
	The governing body? Each committee with authority to act on behalf of the governing body?	8b	X	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion 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		X
	If "Yes," did the organization have written policles and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
¢	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	<u> </u>
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
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?			ļ :
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	ļ		
	taxable entity during the year?	16a		X
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			:
e^-	exempt status with respect to such arrangements?tion C. Disclosure	16b	l <u>. </u>	<u> </u>
	List the states with which a copy of this Form 990 is required to be filed MA, AL, AR, CA, FL, GA, HI, IL, KS	ΤV	MI	MINT
17 1Ω	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3			
18	for public inspection. Indicate how you made these available. Check all that apply.)s only	, avall	apie
	Own website Another's website Word Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d fina	ncial	
10	statements available to the public during the tax year.	ıu IIIIdl	icia)	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	JEFF CLEMENTS - (978) 254-6275			
	33 BRADFORD STREET, CONCORD, MA 01742			
23200	SEE SCHEDULE O FOR FULL LIST OF STATES	Form	990	(2022)

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

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

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

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

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization (A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average hours per	(do	not o	Pos heck	ition more) than is bot	one	Reportable compensation	Reportable compensation	Estimated amount of
	week	offi	cer ar	ss pe	irecto	or/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for related	e or di	豊			eated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	truste	ad frus		oyee	omper		1099-NEC)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated empioyee	Former			organizations
(1) WILLIAM CORTESE	22.00									
EXECUTIVE DIRECTOR	18.00	<u></u>	L	X	$ldsymbol{ldsymbol{ldsymbol{ldsymbol{eta}}}$			71,212.	60,588.	0.
(2) JEFF CLEMENTS	8.00									
PRESIDENT AND BOARD MEMBER	32.00	X	ļ	X		ļ	<u> </u>	0.	0.	0.
(3) JOHN WASS	1.00									•
BOARD CHAIR & TREASURER	1.00	X	<u> </u>	X		ļ	<u> </u>	0.	0.	0.
(4) BUFF KAVELMAN BOARD MEMBER	1.00	v						0.	0.	0.
(5) DEBRA WINGER	1.00	^	-	_	⊢	-	-	0.	V •	<u> </u>
BOARD MEMBER	$\frac{1.00}{1.00}$	X		l				0.	0.	0.
(6) JIM RUBENS	1.00		┢	┢	一	╁	_		•	0.
BOARD MEMBER	2.00	x						0.	0.	0.
		 	 	1	 	 	\vdash		•	
		 	†	- ""	T	 				
		1								
		_	<u></u>	L	L					
		_			1					
		ļ	<u> </u>	ļ	<u> </u>	<u> </u>	<u> </u>			
		-								
		ļ	ļ		 	 	ļ			
		4				-				
			├		├	╁	-			
		1								
	-	├	 	 	 	+	╫┈		-	
		1								
			╁	\vdash	一	\vdash	 			
		1								
	<u> </u>	1	1	T	 	 	1			
		1								
			•	•	_			*	· · · · · · · · · · · · · · · · · · ·	- 000 (0000

	t VII Section A. Officers, Directors, Trus (A) Name and title	(B) Average hours per	(do	not c	(C Pos heck	C) ition more		one	(D) Reportable compensation	(E) Reportable compensation		(F) Estimat	
	·	week (list any hours for related organizations below line)	tee or director	institutional trustee	nd aid	recto	or/trus pateu	tee)	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC 1099-NEC)		other compens from the organization	r ation he ation ated
		-											
			-										
											_		
					-								
···						 	ļ <u>.</u>						
1b	Subtotal		l	<u> </u>	<u> </u>	<u>.</u>		<u> </u>	71,212.	60,58	8.		0.
C	Total from continuation sheets to Part V	II, Section A							71,212.		0.		0.
2	Total (add lines 1b and 1c) Total number of individuals (including but including but												
	compensation from the organization											Yes	0 No
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s			_	-				ghest compensated emp	loyee on	-	3	х
4	For any individual listed on line 1a, is the s and related organizations greater than \$15	um of reportab	le c	omp	ensa	atio	n and	dot	her compensation from	the organization		4	x
5	Did any person listed on line 1a receive or	accrue compe	nsat	ion t	from	any	y uni	ela		dual for services			
Sec	rendered to the organization? If "Yes," contion B. Independent Contractors											5	X
1	Complete this table for your five highest compensation. Report compensation for	•									ensa	ation from	
	(A) Name and business	address	N	INC	3				(B) Description of s	ervices	Co	(C) ompensati	on
				. "		•							
		•											
											_	***	
										-			
2	Total number of independent contractors	including but r	not II	mite	d to	the	الموا	ster	ahove) who received n	nore than			
_	\$100,000 of compensation from the organ			,,,,,,,,			0	ات، د	a above, who received if	NEW WIGHT		•	

Pa	rt V	1111			=			
			Check if Schedule O contains a response	or note to any lin	e in this Part VIII	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenuè excluded
						function revenue	business revenue	from tax under sections 512 - 514
(O (O								300(15113 0 12 15 14
Contributions, Gifts, Grants and Other Similar Amounts			Federated campaigns 1a					
2 5			Membership dues 1b					
Σğ			Fundraising events 1c		٠		4	!
컕			Related organizations 1d		4 · *			
ns,			Government grants (contributions) 1e					
£ ₽		f	All other contributions, gifts, grants, and	100 000		. "		
듗퐞				189,933.				
E D		g	Noncash contributions included in lines 1a-1f	743,010.				
<u>g g</u>		h	Total. Add lines 1a-1f		1,189,933.			
				Business Code				
8	2	а						
e Ž		b						
S		C						
ev ev		d						
Program Service Revenue		e						
Œ		f	All other program service revenue					
		g	Total. Add lines 2a-2f					
	3		Investment income (including dividends, inter					
			other similar amounts)					
	4		Income from investment of tax-exempt bond					
	5		Royalties		*******	•		
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
			Less: rental expenses 6b					!
			Rental income or (loss) 6c	· · · · · · · · · · · · · · · · · · ·				
			Net rental income or (loss)					
	7		Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					:
		b	Less: cost or other basis		*			
e E			and sales expenses 7b				·	
Revenue		С	Gain or (loss) 7c					
æ			Net gain or (loss)					
ē			Gross income from fundraising events (not					
듐			including \$ of					
			contributions reported on line 1c). See		*			
			Part IV, line 18	,	·			
		b	Less: direct expenses 8b					
			Net income or (loss) from fundraising events				· · · · · · · · · · · · · · · · · · ·	
			Gross income from gaming activities. See					
	Ĭ	_	Part IV, line 19					
		h	Less: direct expenses 95			· ·		
			Net income or (loss) from gaming activities .					
	1		Gross sales of inventory, less returns					
	.~	٠.	and allowances 10	a				
		h	Less: cost of goods sold 10	· · · · · · · · · · · · · · · · · · ·	·			,
	1		Net income or (loss) from sales of inventory					
		<u>~</u>	Net income of hossy normatics of inventory .	Business Code				
Miscellaneous Revenue	11	a	MERCHANDISE SALES	900099	1,446.	1,446.		
ie ie	' '	a b	any parameters to the contrast from the form and the first state. The state state of the first state of the			2,330		
ella ver								
Z S		ų C	All other revenue			 	 	
Σ	1		All other revenue		1,446.			-
-			Total Add lines 11a-11d		1,191,379		0.	0.
	12		Total revenue. See instructions		<u>, , , , , , , , , , , , , , , , , , , </u>	T' ##0 •	<u> </u>	· [

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). X Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising expenses (A) Total expenses Do not include amounts reported on lines 6b, Management and general expenses Program service 7b. 8b, 9b, and 10b of Part VIII. **expenses** Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals, See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits pald to or for members _____ Compensation of current officers, directors, 56,517. 14,192. 503. 71,212. trustees, and key employees _____ Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 196,761. 100,435. 139,068. 436,264. 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 7,543. 3,794. 12,109. 772. Other employee benefits 42,763. 20,912. 9,975. 11,876. Payroll taxes 10 Fees for services (nonemployees): 11 Management 4,057. 4,057. Legal 32,979. 32,979. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 135,825. 56,460. 59,398. 19,967. column (A), amount, list line 11g expenses on Sch O.) 14,120 195,193. 222,947. 13,634. Advertising and promotion 12 45,791. 13,842. 17,403. 14,546. Office expenses 13 Information technology 14 Royalties 10,840 5,133 2,221 3,486. 16 Occupancy 21.742. 1,313.23,098. 43. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 39,939. 39,939 Conferences, conventions, and meetings 19 20 21 Payments to affiliates Depreciation, depletion, and amortization 22 4,859. 1,100 2,454 1,305. 23 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.) EVENT COSTS 30,719 1,069 29,650. 13,325 LICENSES, REGISTRATIONS 1,333. 11,170. 822. 12.189 STAFF DEVELOPMENT 12,189. c d e All other expenses 1,138,916. 617,544. 284,430. 236,942. Total functional expenses. Add lines 1 through 24e 25 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)

	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	571,438.	1	566,242
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net	315,429.	3	125,526
4	Accounts receivable, net		4	
5	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	
9 7	Notes and loans receivable, net		7	
8 8	Inventories for sale or use		8	
ž 9	Prepaid expenses and deferred charges	225.	9	116
108	Land, buildings, and equipment: cost or other			
	basis, Complete Part VI of Schedule D10a			•
1	Less; accumulated depreciation 10b	-	10c	
11	Investments - publicly traded securities		11	
12	Investments - other securities, See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	30,546.	15	177,699
16	Total assets. Add lines 1 through 15 (must equal line 33)	917,638.	16	869,583
17	Accounts payable and accrued expenses	133,760.	17	33,242
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
1	Loans and other payables to any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
22	controlled entity or family member of any of these persons		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		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			
	40.4.4.5		25	
26	Total liabilities, Add lines 17 through 25	133,760.	26	33,242
120	Organizations that follow FASB ASC 958, check here	13377001	20	33,242
ß	g			
	and complete lines 27, 28, 32, and 33. Net assets without donor restrictions	468,878.	27	723,814
27 28 29 30 31 32 32 32 32 32 32 32 32 32 32 32 32 32		315,000.	28	112,527
28	Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here	313,000.	20	112,527
Ē				
5	and complete lines 29 through 33.		👝 🕂	
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	702 070	31	026 244
	Total net assets or fund balances	783,878.	32	836,341
33	Total liabilities and net assets/fund balances	917,638.	33	869,583

Form 990 (2022)

review, or compliation of its financial statements and selection of an independent accountant?

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

X

Form 990 (2022)

X

2c

3a

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

AMERICAN PROMISE, INC.

Employer identification number 47-4608840

Par	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		imilar Fund	s or Accounts. Complete if the
	organization answered Tes on Form 990, Part IV, iii	(a) Donor advised	d funds	(b) Funds and other accounts
1	Total number at end of year	(4) 2 3 1 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		(-).
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)		 -	
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets he	ld in donor adv	ised funds
	are the organization's property, subject to the organization's			
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor of			
	impermissible private benefit?			
Pai	t II Conservation Easements. Complete If the org	ganization answered "Yes	" on Form 990	, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that ap <u>ply).</u>	•	
	Preservation of land for public use (for example, recrea	ition or education)	Preservation of	of a historically important land area
	Protection of natural habitat		Preservation of	of a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d If the organization held a quality	fied conservation contrib	ution in the forr	
	day of the tax year.			Held at the End of the Tax Year
a	Total number of conservation easements			2a
b				
C	Number of conservation easements on a certified historic str			
d	Number of conservation easements included in (c) acquired			
	historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or t	erminated by t	ne organization during the tax
	year			
4	Number of states where property subject to conservation ea		7 h	
5	Does the organization have a written policy regarding the per		_	
c	violations, and enforcement of the conservation easements in Staff and volunteer hours devoted to monitoring, inspecting,			Yes No
6	Stall and volunteer flours devoted to monitoring, inspecting,	nanuling of violations, at	id embroing do	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and en	forcina consen	vation easements during the year
•	, into and or original manner in the internal	aning of Floradaria, and on	ioromig contoor	ation oddomente daming the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requiremen	ts of section 17	'0(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservati			
	balance sheet, and include, if applicable, the text of the footr		•	
	organization's accounting for conservation easements.	· ·		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Tre	asures, or	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its reve	enue statemen	and balance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education	, or research in	furtherance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that des	cribes these ite	ems.
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue	statement an	d balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, o	research in fu	rtherance of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1	*******		
	(ii) Assets included in Form 990, Part X			\$
2	If the organization received or held works of art, historical tre	asures, or other similar a	ssets for financ	ial gain, provide
	the following amounts required to be reported under FASB A	_		
а	Revenue included on Form 990, Part VIII, line 1			
b	Assets included in Form 990, Part X			<u></u> \$

232051 09-01-22

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

		N PROMISE,				460884		age 2
Pai	t III Organizations Maintaining C	ollections of A	rt, Historical T	reasures, or Oth	er Similar As	sets(contir	nued)	
3	Using the organization's acquisition, accessi collection items (check all that apply):	on, and other record	ds, check any of the	following that make	significant use o	f its		_
а	Public exhibition	d	I Loan or exc	change program				
b	Scholarly research	e	· U Other					
C	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explai	n how they further	the organization's ex	empt purpose in	Part XIII.		
5	During the year, did the organization solicit of						_	7
	to be sold to raise funds rather than to be m					Yes Yes		No
Pai	t IV Escrow and Custodial Arran		ete if the organizati	on answered "Yes" o	n Form 990, Part	IV, line 9, or	r	
	reported an amount on Form 990, Pa							
1a	Is the organization an agent, trustee, custod						Γ	٦
_	on Form 990, Part X?					Yes		J No
b	If "Yes," explain the arrangement in Part XIII	and complete the to	ollowing table:		 	Amoun		
_	Danimula a Latana a				 	Anoun	`	—
	Beginning balance							
	Additions during the year							
e	Distributions during the year							
20	Ending balance Did the organization include an amount on F					Yes	- T	No
	If "Yes," explain the arrangement in Part XIII.	· ·	= -		,		<u> </u>	ן אס ן
Pai								
		(a) Current year	(b) Prior year	(c) Two years back		ack (e) Fou	r years	back
1a	Beginning of year balance							
b	Contributions				1			—
C	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities			1				
	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1g, column e	(a)) held as:				•
a	Board designated or quasi-endowment		_%					
b	Permanent endowment	<u></u> %						
C		%						
	The percentages on lines 2a, 2b, and 2c sho							
Зa	Are there endowment funds not in the posse	ssion of the organiz	ation that are held	and administered for	the		F = -	
	organization by:						Yes	No
	(i) Unrelated organizations							
_	(ii) Related organizations				***************************************	3a(ii)		
_	If "Yes" on line 3a(ii), are the related organiza			?		3b		
4 Dai	Describe in Part XIII the intended uses of the		owment funds.					
Fai	Complete if the organization answere		0 Part IV line 11a	Sac Form 990 Port	V line 10			
						(-II D		
	Description of property	(a) Cost or o	1	1 , ,	Accumulated epreciation	(d) Boo	k valu	е
10	Land		iy basic	, (Jano) u	оргоондогт			
ia b	Land Buildings							
C	Buildings Leasehold improvements							
d	Equipment							
	Other							
	Add lines to through to (Column (d) must e		V column /D) line	1001	<u></u>			

	Complete if the organization answered "Yes"			···
(a) Descrip	tion of security or category (Including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
1) Financia	al derivatives			
2) Closely	held equity interests			
3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes"	on Form 990, Part IV, line		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)		,		
	b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. Complete if the organization answered "Yes" (a)	on Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15.	(b) Book value
(1) DU	E FROM AMERICAN PROMISE		ND. INC.	177,699
(2)				2,000
(3)				
(4)			·	
		<u> </u>		
(5)				
(5) (6)				
(5) (6) (7)				
(5) (6) (7) (8)				
(5) (6) (7) (8) (9)	umn (h) muet equal Form 900. Part Y, cal. (R) lin	0.15		177 600
(5) (6) (7) (8) (9) Total. (Colu	ımın (b) must equal Form 990, Part X, col. (B) lin	e 15.)		177,699
(5) (6) (7) (8) (9)	Other Liabilities.			, ,
(5) (6) (7) (8) (9) Total. (Colu	Other Liabilities. Complete if the organization answered "Yes"			
(5) (6) (7) (8) (9) Total. (Columbrat X	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability			, ,
(5) (6) (7) (8) (9) Total. (Coll. Part X	Other Liabilities. Complete if the organization answered "Yes"			
(5) (6) (7) (8) (9) Total. (Col. Part X 1. (1) Fec (2)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability			
(5) (6) (7) (8) (9) Total. (Columna Yang) Part X	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability			
(5) (6) (7) (8) (9) Total. (Columbia X Part X 1. (1) Fec (2) (3) (4)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability			
(5) (6) (7) (8) (9) Total. (Columbia X Part X 1. (1) Fec (2) (3) (4) (5)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability			
(5) (6) (7) (8) (9) Total. (Columbia (Columbia)) 1. (1) Fec (2) (3) (4) (5) (6)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability			
(5) (6) (7) (8) (9) Total. (Coll. Part X 1. (1) Fec (2) (3) (4) (5) (6) (7)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability			
(5) (6) (7) (8) (9) Total. (Coll. Part X 1. (1) Fec (2) (3) (4) (5) (6) (7) (8)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability			
(5) (6) (7) (8) (9) Total. (Coll. Part X 1. (1) Fec (2) (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 28	

TAX POSITION:

2

1

DETERMINATION REGARDING THE LIKELIHOOD OF THOSE POSITIONS BEING UPHELD THE PRIMARY TAX POSITION MADE BY THE ORGANIZATION IS THE UNDER REVIEW. EXISTENCE OF UNRELATED BUSINESS INCOME TAX AND THE ORGANIZATION'S STATUS AS A TAX-EXEMPT ORGANIZATION UNDER IRC SECTION 501(C)(4). FOR THE YEARS PRESENTED, THE ORGANIZATION HAS NOT RECOGNIZED ANY TAX BENEFITS OR LOSS CONTINGENCIES FOR UNCERTAIN TAX POSITIONS BASED ON THIS EVALUATION.

Schedule D (Form 990) 2022	AMERICAN PROMISE, INC.	47-4608840 Page 5
Schedule D (Form 990) 2022 Part XIII Supplemental In	formation (continued)	
		-
<u> </u>		
,		
	,	

<u></u>		
		

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer Identification number AMERICAN PROMISE, INC. 47-4608840

Pai	rt I Types of Property						
<u></u>		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part Vill, line 1g	(d) Method of deter noncash contribution		:s
1	Art - Works of art						
2	Art - Historical treasures		1				
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded	Х	57	743,010.	FMV		
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures				<u> </u>		
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ()						
26	Other ()						
27	Other ()						
28	Other (<u> </u>	<u> </u>				
29	Number of Forms 8283 received by the organi						
	for which the organization completed Form 82	83, Part V, L	Jonee Acknowled	gement 29			T
00-	Poulus Hannes all differences below to be a			and a Dark I Barry & House		Yes	No
30a	During the year, did the organization receive b				-		:
	must hold for at least 3 years from the date of			•	1	_	
	exempt purposes for the entire holding period	٢			3	Da	X
	If "Yes," describe the arrangement in Part II.			والتلاوي والمرام والمرام والمرام والمرام والمرام			
31	Does the organization have a gift acceptance					1	X
32a	Does the organization hire or use third parties contributions?		=	•		2a	х
b	lf "Yes," describe in Part II.						
33	If the organization didn't report an amount in o	olumn (c) fo	or a type of proper	ty for which column (a) is che	ecked,		
	describe in Part II.						
I MΔ	For Panerwork Reduction Act Notice see	the Instruc	tions for Earm OC	nn	Schodulo M (E	OOO	1 0000

232142 09-09-22

SCHEDULE 0 (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization

AMERICAN PROMISE TNC Employer identification number 47-4608840

Minkieth inomida, inc.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PROMISE AND OUR SUPPORTERS ADVANCE THIS NONPARTISAN CONSTITUTIONAL
AMENDMENT EFFORT BY SEEKING ENDORSEMENTS, LEGISLATIVE RESOLUTIONS,
STATE BALLOT INITIATIVES, GRASSROOTS AND DIRECT LOBBYING, AND A
ULTIMATELY A SUCCESSFUL VOTE BY CONGRESS AND STATE LEGISLATURES TO PASS
AND RATIFY THE AMENDMENT.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
AMERICAN PROMISE, INC. FOCUSES ITS ADVOCACY AND ORGANIZING PROGRAMS IN
THE FOLLOWING FIVE AREAS:
CITIZEN EMPOWERMENT: AMERICAN PROMISE'S CITIZEN EMPOWERMENT PROGRAMMING
FOCUSES ON BUILDING DISTRIBUTED, DECENTRALIZED NETWORKS TO SUPPORT,
CONNECT AND AMPLIFY CROSS-PARTISAN LOCAL ACTION BY ADVOCATES TO MOVE
FORWARD THE FOR OUR FREEDOM AMENDMENT IN STATE AND FEDERAL
LEGISLATURES.
PLEDGE CAMPAIGN: BY SECURING PLEDGES FROM CANDIDATES FOR OFFICE AND
INCUMBENTS TO USE THEIR OFFICE TO WORK FOR THE FOR OUR FREEDOM
AMENDMENT, AMERICAN PROMISE IS ABLE TO HOLD ELECTED REPRESENTATIVES TO
THEIR WORD, TO ENSURE THAT THEY REPRESENT THE GOOD OF THE COUNTRY AND
THE WILL OF THE PEOPLE FOR BIG, REAL REFORM THROUGH THE AMENDMENT,
RATHER THAN DO THE BIDDING OF BIG DONORS AND SPECIAL INTERESTS.

STATE INITIATIVES: AMERICAN PROMISE PROVIDES LEGAL EXPERTISE,

ORGANIZING STRATEGY AND EXECUTION, AND DIRECT LOBBYING SUPPORT FOR LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

STATEWIDE BALLOT CAMPAIGNS AND LOCAL AND STATE RESOLUTIONS CALLING ON

CONGRESS FOR THE FOR OUR FREEDOM AMENDMENT.

CONGRESSIONAL INITIATIVES: AMERICAN PROMISE WORKS WITH DEMOCRATS,

REPUBLICANS, AND INDEPENDENT MEMBERS OF CONGRESS TO GROW CROSS-PARTISAN

SUPPORT FOR THE FOR OUR FREEDOM AMENDMENT.

ACTION CENTER: AMERICAN PROMISE'S ACTION CENTER IS A ONE-STOP

INTERACTIVE WEBSITE FOR CITIZENS, MEDIA, ORGANIZATIONS, LEGISLATORS AND

STAFF FOR EDUCATION, RESOURCES, EVENTS, LEGISLATIVE DEVELOPMENTS,

CITIZEN STORY-TELLING, NEWS, OPINION PIECES AND MORE ABOUT THE

BACKGROUND AND PROGRESS OF THE FOR OUR FREEDOM AMENDMENT.

KEEP THE PROMISE CAMPAIGN: AT THE END OF 2020, THE ORGANIZATION

COMPLETED PHASE 1 OF ITS 3 PHASE STRATEGIC PLAN. THE ORGANIZATION BUILT

THE FOUNDATION, INCLUDING THE STRATEGY, ORGANIZATIONAL STRUCTURE,

LEADERSHIP TEAM, PROGRAMMING, AND CITIZEN PARTICIPATION THAT SET THE

STAGE FOR RAPIDLY BUILDING AND EXPANDING THE SKILLS AND ENGAGEMENT OF

AMERICANS AS THE ORGANIZATION MOVED INTO PHASE 2.

IN 2022, THE SECOND YEAR OF PHASE 2, AMERICAN PROMISE, INC. CONTINUED

TO BUILD CAPACITY IN ITS PROGRAMS AND COMMUNICATIONS DEPARTMENTS TO

MOBILIZE AND ORGANIZE ITS STATE- AND NATION-WIDE MEMBERSHIP TO BUILD

THE POLITICAL WILL, ADVOCACY, AND CAMPAIGNS NECESSARY FOR THE FOR OUR

FREEDOM AMENDMENT TO PASS THROUGH CONGRESS.

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

THE BOARD WILL REVIEW THE DRAFT 990 PRIOR TO THE PRESIDENT SIGNING THE

RETURN.

232212 10-28-22

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A

135,825.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

2022 Open to Public Inspection

OMB No. 1545-0047

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

Name of the organization

Department of the Treasury Internal Revenue Service AMERICAN PROMISE, INC.

Employer identification number 47-4608840

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.	te if the organization answered "Yes"	on Form 990, Part IV, line 33					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) ne End-of-year assets		(f) Direct controlling entity	
Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.	ations. Complete if the organization a	nswered "Yes" on Form 990	, Part IV, line 34, b	ecause it had on	e or more related tax-ex	cempt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	(g) Section 512(bX13) controlled entity?	2(b)(13) lled y?
				501(c)(3))		Yes	S
AMERICAN PROMISE EDUCATION FUND, INC 47-4601462, 33 BRADFORD STREET, CONCORD, MA 01742	CITIZEN-LED CONSTITUTIONAL AMENDMENT EDUCATION	MASSACHUSETTS	501(C)(3)	LINE 7	N/A		×
For Paperwork Reduction Act Notice, see the Instructions for Form 990	ns for Form 990.				Schedule R (Form 990) 2022	(Form 990) 2022

Page 2 47-4608840

INC. AMERICAN PROMISE, Schedule R (Form 990) 2022

General or Percentage managing ownership Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. $\overline{\mathbf{s}}$ Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Yes No 3 Code V-UBI amount in box 120 of Schedule K-1 (Form 1065) Ξ Disproportionate Yes No allocations? Ξ Share of end-of-year assets Ō Share of total income Ξ Predominant income (related, unrelated, excluded from tax under sections 512-514) Ð (d)
| Direct controlling | entity Legal domicile (state or foreign country) Primary activity ê Name, address, and EIN of related organization Ē Part IV

(g) (h) section Share of Percentage state) (s) end-of-year ownership assets Yes No			0000 (000 mm-1) & -1-4-0
(f) Share of total income			
(e) Type of entity (C corp., S corp, or trust)			
(d) (e) Direct controlling Type of entity S corp., S corp., or trust)			
Legal domicile (state or foreign country)			 000
(b) Primary activity			
(a) Name, address, and EIN of related organization			

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1	2	×	×	×		×		×	×	×	M	M	>	1 >	4 Þ	+-		×	_	1	<u>ا</u> له	×									0) 202
^	8	_	_		M	_			_		L	<u> </u>				×		 	M		_	_		o o							orm 99
		1a	4	2	₽	<u>.</u>	<u> </u>	+	10	두	-	=		≦ ;	F ;	E \$	₽	<u>₽</u>	19		+	1s		involve							e R (F
	n Parts II-IV?																						elationships and transaction thresholds.	(d) Method of determining amount involved	55,782, ACTUAL COSTS INCURRED	ACTUAL COSTS INCURRED	177,699.ACTUAL COSTS INCURRED				Schedule R (Form 990) 202
	elated organizations listed	•																					nis line, including covered	(c) Amount involved	855,782.	821,808.	177,699.				
	s with one or more r	>												A. A	anization(s)	anization(s)	(2) [5]		,				who must complete t	(b) Transaction type (a-s)	0	Ø	D				31
Make Commission 1 is a second selected in Danie II II or IV of the control of	Note: Complete line I if any entity is listed in Parts II, III, or IV of this schedule. 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	b Gift, grant, or capital contribution to related organization(s)	c Gift, grant, or capital contribution from related organization(s)	Loans or loan quarantees to or for related organization(s)			f Dividends from related organization(s)	g Sale of assets to related organization(s)	Purchase of assets from related organization(s)	i Exchange of assets with related organization(s)	j Lease of facilities, equipment, or other assets to related organization(s)		R Lease of lacilities, equipment, of order assets if off related organization(s)	Performance of services of membership of fundraising solicitations for related organization(s)	Performance of services of membership of fundraising solicitations by felated organization(s) Shains of familities equipment mailing lists or other enough with releted executive for	Sharing of paid employees with related organization(s)	p Reimbursement paid to related organization(s) for expenses	q Reimbursement paid by related organization(s) for expenses		r Other transfer of cash or property to related organization(s)	s Other transfer of cash or property from related organization(s)	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	(a) Name of related organization	(1) AMERICAN PROMISE EDUCATION FUND, INC.	(2) AMERICAN PROMISE EDUCATION FUND, INC.	(3) AMERICAN PROMISE EDUCATION FUND, INC.	(4)	(5)	9	232163 09-14-22

Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

8	ercentage wnership					Schedule R (Form 990) 2022
0	nral or P. aging o ner? o			 	 <u>, , , , , , , , , , , , , , , , , , , </u>	Form (
-	General or managing partner?		 			e R (I
(1)	Dispupor- diorate amount in box 20 managing ownership allocations? of Schedule K-1 partner? Yes No (Form 1065) Yes No					Schedul
(F)	Disproportionate allocations?					
\vdash	# W	, ,				
(b)	Share of end-of-year assets					
(t)	Share of total income			,		
(e)	Are all partners sec. 501(c)(3) orgs.?					
	der 50		 			
(g)	Predominant income (related, unrelated, sections from tax undersections 512-514)					
(3)	nicile vreign y)					
_			 			
(Q)	Primary activity					
(b) (c) (d) (d)	Name, address, and EIN of entity					