F..... 000 (000)

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization nor	any relate	d org	aniz	atio	n c	ompe	nsa	ted any current	officer, director,	or trustee.
(A)	(B)	(C) Position (do not check more than one						(D)	(E)	(F)
Name and title	Average hours per week	box,	unles er and	ss pe d a d	rson	is both or/trust	an ee)	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	employee Key employee		Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
Julia Cochrane	15.00									
Board member	0.00	~						0	0	(
John Collins	15.00									
Board member and treasurer	15.00	~		~				0	0	(
Lawrence Jensen	15.00									
President	0.00	~		~				0	0	
Roberta Lindeman	15.00									
Board member	0.00	~						0	0	
Linda Murphy	15.00									
Board member	0.00	~						0	0	
Jean Walat	15.00									
Board member	0.00	~						0	0	
Holly Hallman	15.00									
Director	0.00	~						0	0	
Kathleen Holt	15.00									
Vice President	0.00		-	~	-			0	0	
					$\vdash$					
							-			
			1							
J										

9 72

Part	VII Section A. Officers, Directors, T	rustees,	Key I	Emp	oloy	yee	s, an	d F	lighest Compe	nsated E	mplo	yees (continued)
	(A) Name and title	(B) Average hours	Position (do not check more than on box, unless person is both a officer and a director/trusted			an	(D) Reportable compensation	(E) Reportable compensation	ation	(F) Estimated amount of other		
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from rela organization: 1099-MIS 1099-NE	s (W-2/ SC/	compensation from the organization and related organizations
			-									
			-	$\vdash$	$\vdash$							
1b	Subtotal		٠						0		0	0
	Total from continuation sheets to Part Total (add lines 1b and 1c)			•			 	· ·	0		0	
2	Total number of individuals (including reportable compensation from the organ		limite	ed	to	thos	se lis	ted	l above) who r 0	eceived n	nore	than \$100,000 o
3	Did the organization list any former employee on line 1a? If "Yes," complete								oloyee, or highe			Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual											e h
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or ind	 lividua 	5 V
Section 1	ion B. Independent Contractors  Complete this table for your five high	hest comm	oneat	tad	ind	lone	nden		ontractors that	rocoived	moro	
	compensation from the organization. Rep											
	(A) Name and business add	dress							(B) Description of se	rvices		(C) Compensation
None												
								-				
	Total number of independent contractor	ors (includ	ina h	ut ·	not	lim	ited t	0 +	hose listed abo	ve) who		
_	received more than \$100,000 of compens							-	0	vo, will		

Form 99	00 (2022)						D
		Statement of Revenue					Page <b>9</b>
		Check if Schedule O contains a resp	onse or note to ar	y line in this Pa	rt VIII		🗆
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaigns 1	a 0	to the street of the state of t		14 mg 150 mg 180 mg	on which the second
la u		Membership dues <u>1</u>					
D E		Fundraising events <u>1</u>					
iffs ar /			<b>d</b> 0		The same of		THE STATE OF THE
B, G		J	e 0				<b>公司管理</b>
r Si		All other contributions, gifts, grants, and similar amounts not included above	f 204.204		150 13		
the	g	Noncash contributions included in	f 204,204	2 4 2 2 Z	Carrier Area		
Contributions, Gifts, Grants, and Other Similar Amounts	9		g \$ 0		花墓 基础 是	是 医 概 专	
a Co	h	Total. Add lines 1a–1f		204,831		1 3 4 6	
			Business Code				
S C	2a						
Program Service Revenue	b						
S c	С						
yram Ser Revenue	d						
igo.	е						
م ا	f	All other program service revenue .					
	<u>g</u>	<b>Total.</b> Add lines 2a–2f	de interest and	0			4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
	3	other similar amounts)					
	4	Income from investment of tax-exempt					+
	5	Royalties	•				
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					1. 18. \$1. \$1. \$1.
/	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c	0 0				
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets other than inventory <b>7a</b>					
	b	Less: cost or other basis				2011年1月1日	The Pa
ğ	b	and sales expenses . 7b					
) Ve	С	Gain or (loss) 7c	0 0		100 1000		
æ		Not and the second second					
Other Revenue		Gross income from fundraising					1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
ō		events (not including \$ 627	- X		1 5 5 1 5		
		of contributions reported on line		100 may 20 mg			A SET BETTER THE
			Ba	<b>建筑等的</b>	but the	2. 18 · 17 · 18 · 18	1. 多。塞。美。奇
			Bb		1		
		Net income or (loss) from fundraising Gross income from gaming	events				41-7-1-7-1
	Ja		ea l		St. Tourseller	1000	41 4 4 4
	b		9b	1. 经营业基础的	1 JA 18 18 18 18 18 18 18 18 18 18 18 18 18		
		Net income or (loss) from gaming activ					
		Gross sales of inventory, less					
		<u> </u>	0a		Constitution and		of the species in
		Less: cost of goods sold1	The same of the same			The second second	
	С	Net income or (loss) from sales of inve					
Snc	11-		Business Code				application of the
ne Jue	11a b				-	<del> </del>	+
/iscellaneous Revenue	C				<del>                                     </del>		
S &	d	All other revenue					

204,831

e Total. Add lines 11a-11d .

Total revenue. See instructions

0

0



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).

Section 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a response				
	(A)		(C)	(D)
Do not include amounts reported on lines 6b, 7b,	Total expenses	(B) Program service	Management and	Fundraising
8b, 9b, and 10b of Part VIII.  1 Grants and other assistance to domestic organizations		expenses	general expenses	expenses
and domestic governments. See Part IV, line 21 .				
•	1,500	1,500	7.a	The War was the con-
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22	32,163	32,163	16 4 4 4 4 5 6 6 6	· · · · · · · · · · · · · · · · · · ·
3 Grants and other assistance to foreign				
organizations, foreign governments, and				
foreign individuals. See Part IV, lines 15 and 16	0	0		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors,				
trustees, and key employees	0	0	0	0
6 Compensation not included above to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	16,625	16,625	0	0
8 Pension plan accruals and contributions (include	10/020			
section 401(k) and 403(b) employer contributions)	0	0	0	0
	0	0	0	0
	0	0	0	0
Payroll taxes	0	0		
11 Fees for services (nonemployees):	996	599	397	0
a Management	998	0	0	0
<b>b</b> Legal			155	0
c Accounting	155	0	0	0
d Lobbying	0	0	U	
e Professional fundraising services. See Part IV, line 17	0	_		0
f Investment management fees	0	0	0	0
g Other. (If line 11g amount exceeds 10% of line 25, column				
(A), amount, list line 11g expenses on Schedule O.) .	0	0	0	0
<b>12</b> Advertising and promotion	849	849	0	0
<b>13</b> Office expenses	4,861	0	4,829	32
<b>14</b> Information technology	454	0	0	454
<b>15</b> Royalties	0	0	0	0
<b>16</b> Occupancy	5,665	5,665	0	0
17 Travel	0	0	0	(
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	0	0	0	(
19 Conferences, conventions, and meetings .	0	0	0	(
20 Interest	0	0	0	(
21 Payments to affiliates	0	0	0	
22 Depreciation, depletion, and amortization .	0	0	0	(
23 Insurance	296	0	296	
24 Other expenses. Itemize expenses not covered				
above. (List miscellaneous expenses on line 24e. If			4-1-2-10-10-10-10-10-10-10-10-10-10-10-10-10-	
line 24e amount exceeds 10% of line 25, column			en and the second second	
(A), amount, list line 24e expenses on Schedule O.)			Carlotte Contract	
	5,158	5,158	0	
a Afghan Evacuee sponsorship	4.240			
b Asylum seeking assistance				
c ESL Classes for immigrants		7,500		
d				
e All other expenses	80,062	73,899	5,677	48
<ul> <li>Total functional expenses. Add lines 1 through 24e</li> <li>Joint costs. Complete this line only if the</li> </ul>	00,062	13,077	3,077	
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs	s			
from a combined educational campaign and	1			
fundraising solicitation. Check here i	f	1		
following SOP 98-2 (ASC 958-720)				Form <b>990</b> (202

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Part X
Part X

Check if Schedule O contains a response or note to any line in this Part X . . . . . . . . . . . . . . . . . . Beginning of year End of year 163,806 39,037 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 . . . . Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Prepaid expenses and deferred charges . . . Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D . . . | 10a 0 10c Less: accumulated depreciation . . . . . | 10b Investments—publicly traded securities . . . . . . Investments—other securities. See Part IV, line 11 . Investments—program-related. See Part IV, line 11 . . . . 0 15 Total assets. Add lines 1 through 15 (must equal line 33) . . . . 163,806 39.037 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D . Loans and other payables to any current or former officer, director, iabilities trustee, key employee, creator or founder, substantial contributor, or 35% 0 22 controlled entity or family member of any of these persons . . . . 0 23 Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . . . Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X Total liabilities. Add lines 17 through 25 . . . . . . . . . . . . Organizations that follow FASB ASC 958, check here 🔽 **Net Assets or Fund Balances** and complete lines 27, 28, 32, and 33. 39,037 157,964 0 28 5,842 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds . . . . . . . . . Paid-in or capital surplus, or land, building, or equipment fund . . . Retained earnings, endowment, accumulated income, or other funds . 163,806 39,037 163,806 39,037 Total liabilities and net assets/fund balances . . . . Form 990 (2022)

	(No. 1) (No. 1) (No. 1)		
Part	XI Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI		
1	Total for on ac finact oqual fact this or and the first this or a first thin o	1	204,831
2	rotal experience (mass equal target)	2	80,062
3	The vertice 1033 experises. Cubitate time 2 from time 1	3	124,769
4	The about of faire paramoss at pognition of the control of the con	4	39,037
5	1101 4.11104.11204. 94.1110 (100000)	5	0
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Thoi polica dajactificities	8	0
9		9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		
	32, column (B))	10	163,806
Part	XII Financial Statements and Reporting		
	Check if Schedule O contains a response or note to any line in this Part XII		🗆
			Yes No
1	Accounting method used to prepare the Form 990:  Cash  Accrual  Other		100 100 100 100 100 100 100 100 100 100
	If the organization changed its method of accounting from a prior year or checked "Other," exp	lain on	
	Schedule O.		A PART THE
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a 🗸
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	iled or	14 1 1 1 1 1
	reviewed on a separate basis, consolidated basis, or both:		1 2 2 2 2 2
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		A Maria
b	Were the organization's financial statements audited by an independent accountant?		2b 🗸
-	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on a	2 2 2 2 2 2
	separate basis, consolidated basis, or both:		12 5 5 5 5 5
	Separate basis Consolidated basis Both consolidated and separate basis		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	sight of	
·	the audit, review, or compilation of its financial statements and selection of an independent accountant	t? .	2c
	If the organization changed either its oversight process or selection process during the tax year, exp	olain on	7. 7. 2. 6.5
	Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fort	h in the	
Ja	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a 🗸
b	and the required audit or audito? If the organization did not under	rgo the	
D	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	ıdits .	3b
	Todali on analis of analis, originalis my		Form <b>990</b> (2022