efile Public Visual Render ObjectId: 202313179349308311 - Submission: 2023-11-13 TIN: 31-1589053 OMB No. 1545-0047 Form **990** Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service For the 2022 calendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022 C Name of organization D Employer identification number B Check if applicable: Godly Play Foundation Address change 31-1589053 Name change Doing business as Initial return Final return/terminated E Telephone number Amended return Number and street (or P.O. box if mail is not delivered to street address) PO Box 563 122 W 8th Ave Application pending (971) 344-2999 City or town, state or province, country, and ZIP or foreign postal code Ashland, KS 67831 **G** Gross receipts \$ 2,366,987 Name and address of principal officer: $\mathbf{H(a)}$ Is this a group return for Heather Ingersoll subordinates? Yes PO Box 563 122 W 8th Ave H(b) Are all subordinates Ashland, KS 67831 Yes No included? Tax-exempt status: ✓ 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list. See instructions. **H(c)** Group exemption number ▶ Website: ▶ godlyplayfoundation.org L Year of formation: 1997 M State of legal domicile: KS K Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities: The Foundation's mission is to guide the use of the method to support children's spirituality. Activities & Governance Check this box ▶ 3 Number of voting members of the governing body (Part VI, line 1a) . 11 **4** Number of independent voting members of the governing body (Part VI, line 1b) 11 Total number of individuals employed in calendar year 2021 (Part V, line 2a) . 5 12 24 Total number of volunteers (estimate if necessary) . . . 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 657,607 1,691,706 **9** Program service revenue (Part VIII, line 2g) . 109,809 90,199 **10** Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 115,785 -23,998 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 204,930 206,854 1,088,131 1,964,761 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 407,545 451,136 **16a** Professional fundraising fees (Part IX, column (A), line 11e) 0 **b** Total fundraising expenses (Part IX, column (D), line 25) 13,437 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . 386,824 293,605 837,960 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 701,150

19 Revenue less expenses. Subtract line 18 from line 12 . . .

ets or lances 1,126,801

2 700 022

End of Year

386,981

2 (70 522

Beginning of Current Year

% iii 20	i iotai ass	sets (Part A, life 16)					2,67	9,522	3,700	,033
Fund Bi	. Total lial	oilities (Part X, line 26)					2	9,556	14	,940
žĒ 22	Net asse	ts or fund balances. Subtract	t line 21 from lii	ne 20			2,64	9,966	3,685	,093
Part II	Sign	ature Block					-			
Under per	nalties of places of places of places of the	perjury, I declare that I have ef, it is true, correct, and con					ed on all infor			nas
	Signa	ture of officer					2023-11-06 Date			_
Sign	Sigila	ture of officer					Date			
Here		er Ingersoll Executive Director								
	Type o	or print name and title								
		Print/Type preparer's name	Prenarer	's signature	1	Date		PTIN		_
Date		This type preparer 3 hame	Периге	3 Signature		2023-11-06	Check if	P005269	31	
Paid	F	Firmala manas - Manaadii Malkaa	0 Camanani II D				self-employed			
Prepar		Firm's name 🕨 Kennedy McKee	& Company LLP				Firm's EIN	48-099/992	۷	
Use Or	nly 🕆	Firm's address PO Box 1477					Phone no. (62	0) 227-313	5	
							(02	0, 22, 010		
		Dodge City, KS	6/80114//							
May the I	RS discus	s this return with the prepare	er shown above?	(see instructions)				✓	Yes 🗌 No	
For Pape	erwork Re	duction Act Notice, see th	ne separate ins	structions.		Cat. N	lo. 11282Y		Form 990 (2	021)
										,
				—— Page 2 ——						
				ruge 2						
Form 990	(2021)								Pa	ige 2
Part III	State	ement of Program Serv	ice Accompl	ishments						
		if Schedule O contains a res	-		- 111					2
- Duis			•	o ally lille ill tills Fait		<u> </u>	<u> </u>		· · · · ·	
_	•	be the organization's mission								
		ndation is a non-profit religio	us and education	nal organization crea	ited for th	ne purpose o	of facilitating	the practi	ce of Godly Play	
through re	esearcn, t	raining and resources.								
	-	nization undertake any signifi		- ·	ar which	were not lis	ted on			
the	e prior Form	n 990 or 990-EZ?							🗌 Yes 💟 No	
If "	'Yes," desc	ribe these new services on S	chedule O.							
3 Did	the organ	nization cease conducting, or	make significar	nt changes in how it c	conducts,	any prograi	m			
ser	vices? .								🗌 Yes 🔽 No)
If "	'Yes " desc	ribe these changes on Sched	lule O							
4 Des	scribe the	organization's program service)(3) and 501(c)(4) organiza	ce accomplishm	ents for each of its the	hree large	est program	services, as	measured	by expenses.	
		d revenue, if any, for each p						,		
4a (Co	Code:) (Expenses \$	185,87	78 including grants of	\$	(0) (Revenue \$		214,206)	
thr For Pla	rough 6 fror oundation wi ay is a Mont	nd Materials: In December 2007, in the founder and author, The Reventh the "Complete Guide" now at 8 essori based program and, as such in Play Foundation is producing and	verend Dr. Jerome B volumes. Godly P th, there are mater	Berryman. Additional pullay Foundation receives rials (e.g. Arks, Temples)	ublications royalty inco that are u	and articles come from its pure from its pure from its pure from its pure from the f	ontinue to be de publisher, Churc nation with the	eveloped and th Publishing publications	nd gifted to the g, Incorporated. God	dly
U.S cla to litu	assical religi education t urgical actio) (Expenses \$ Godly Play Foundation trains and ous (e.g. Christian, Quaker, Jewis o stimulate children's active partion n and silence of their religious tra	h) language in a w cipation in story ar idition. The Godly l	rk of independent Godly ray that enhances the chi nd ritual and to awaken t Play Foundation maintain	Play Traine ild's auther heir creatins as and encl	ers in the Unite ntic experience vity for the lea	e of God. Traing arning of the la	ers learn to nguage, sac	us Montessori's app cred stories, parables	s,
as	they train o	hurch school teachers, hospital ch	naplains and other	s who use the Godly Play	y method.					
4c (Co	Code:) (Expenses \$	225,22	22 including grants of	\$	(0) (Revenue \$		0)	
chi	ildhood spir	Development: The Godly Play Fou ituality and the practices of nurtur and revising current editions.The l	ring and developin	g that spirituality thorug	h story and	d play. The Ce	enter also is res	ponsible for	r Godly Play publicat	ions,
(Co	Code:) (Expenses \$	48,20	including grants of	\$	(0) (Revenue \$		0)	
Ev	ervdav God	v Plav: In 2022. Godly Play recie	ved a grant that al	lows the organization to	exapnd th	eir resources	to support pare	nts and car	eaivers in their hom	es

Form **990** (2021)

and through their faith communites. The project will include an online hub for resources, inspiration, and community building for parents and caregivers with relevant pathways for religious education leaders. The overarching goals of this project are to:Empower parents and caregivers to foster a sustainable and integrated family spirituality through these critical activities, equipping them to incorporate rhythm, wonder, play, and narrative in their relationships with their children by providing access to resources, courses, storytelling materials, and community support. Equip religious education professionals to imagine and implement innovative models for empowering and equipping parents and caregivers to sustain an integrated family spirituality. Support clergy and church leadership in cultivating a faith community that embraces and promotes a holistic approach to ministry centered on the spiritual needs of children and families.

4d	Other program services (Describe	in Schedule O.)			
(Expenses \$ 48,265		65 including grants of \$	0) (Revenue \$	0)	
4e	Total program service expense	s 600,985			

Page 3

Form 990 (2021) Page **3**

Pai	rt IV _ Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X, as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 20	11a	Yes	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🐕	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 📆	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			

	business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No

Form **990** (2021)

Page 4

Form 990 (2021) Page **4**

Pai	Checklist of Required Schedules (continued)			
	·		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L,</i> Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes,"</i>			
	complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M </i>	30		No

31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	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 1a 60			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
		F	orm 99	0 (2021

———— Page 5 ——

Form	990 (2021)			Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b	Yes	
3a	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country:			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
-				

•	Did the organization, during the year, pay premiums, directly or indirectly, on a persona	Dellei	it contract:	''	1	NO
g	If the organization received a contribution of qualified intellectual property, did the organized?	nizatio	n file Form 8899 as	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, di 1098-C ?	d the c	organization file a Form	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised sponsoring organization have excess business holdings at any time during the year? .			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966? $$.			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related	d perso	n?	9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 9	990 in I	ieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on So	 chedule	 : O.	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans					
	Enter the amount of reserves on hand	13c		4		
	Did the organization receive any payments for indoor tanning services during the tax ye			14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000, parachute payment(s) during the year?	.000 in •	remuneration or excess	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on r If "Yes," complete Form 4720, Schedule O.	net inve	estment income?	16		No
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine op that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.		engage in any activities	17		
				F	orm 99	0 (2021)
	Page 6 ————					
Form	990 (2021)					Page 6
Par	lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in	Schedu	gh 7b below, and for a "N lle O. See instructions. • • • • • •	No" resp	onse to	
Se	ction A. Governing Body and Management					
			•		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	11			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	11			
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?	ss relat	tionship with any other	2		No
3	Did the organization delegate control over management duties customarily performed b			3		No
	supervision of officers, directors or trustees, or key employees to a management compa	any or o	uner person? .		<u> </u>	
4	supervision of officers, directors or trustees, or key employees to a management compa Did the organization make any significant changes to its governing documents since the	•	·	4		No

6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	!
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	!
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	✓ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: Theresa Arnold 122 W 8th Ave Ashland, KS 67831 (620) 635-2593		- Mars 00	0 (2021)
		F	orin 99	0 (2021)
	Page 7			
Form	990 (2021)			Page 7
Par	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Empland Independent Contractors	ployee	es,	
	Check if Schedule O contains a response or note to any line in this Part VII			
Se	ction A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees			
	omplete this table for all persons required to be listed. Report compensation for the calendar year ending with or within t	ne orga	nization	's tax
year.	List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of and	ount		
	mpensation. 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, 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours	than o	ne b	ox, ι ın of	t ch unle fice	r and a	son	Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC/1099- NEC)	(W-2/1099- MISC/1099- NEC)	organization and related organizations
(1) Mary Hunter Maxwell	5.00	Х		х				0	0	0
(2) Cynthia Hill Vice President	3.00	х		х				0	0	0
(3) L Zoe Cole Secretary	2.00	х		х				0	0	0
(4) David Madison Treasurer	3.00	х		х				0	0	0
(5) Rob ONeill Board Member	1.00	X						0	0	0
(6) Noel Schmidt Board Member	1.00	х						0	0	0
(7) Emily Griffin Board Member	3.00	х						0	0	0
(8) Judy Johnson Board Member	1.00	х						0	0	0
(9) Edward Johnson Board Member	2.00	х						0	0	0
(10) Heather Ingersoll Executive Director	45.00	х		х				108,368	0	0
(11) Laura Willis Board Member	1.00	х						0	0	0
(12) Nancy Morrison Board Member	1.00	х						0	0	0

_					Form 990 (2021)

Page 8 -

Form 990 (2021) Page 8

(A) Name and title	(B) Average hours per week (list any hours for related	than d	ne b	ox, ι in of	t che unles ficer	and a	son	from the	(E) Reportable compensation from related organizations (W- 2/1099- MISC/1099-NEC)	(F) Estimated amount of othe compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			related organizations
						*				
c Total from continuation sheet d Total (add lines 1b and 1c) .	s to Part VII, Section							108,368	0	

	_		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
		-		INO
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	(A) usiness address	=	Des	(B) cription of services	(C) Compensation
2 Total number of independent contractors (in	cluding but not limite	d to those listed abo	ve) who received m	ore than \$100,000 o	of
compensation from the organization > 0					Form 990 (2021)
					FOIIII 990 (2021)
		Page 9			
Form 990 (2021)					Do a o O
Part VIII Statement of Revenue					Page 9
Check if Schedule O contains a re	esponse or note to an	y line in this Part VIII			🗆
		(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
		Total Tevenae	exempt	business	excluded from
			function revenue	revenue	tax under sections 512 - 514
g g lerated campaigns 1a					
mbership dues 1b					
mbership dues 1b					
idraising events 1c					
É LIGITATION CALLES : .					
ated organizations 1d rernment grants (contributions)					
die e					
mbership dues 1b 8,340 Idraising events 1c ated organizations 1d					
<u> </u>					
f All other contributions, gifts, grants, and similar amounts not included					
above 1f					
1,683,366					
g Noncash contributions included in lines 1a - 1f:\$					
 - 					
91,587					
h Total. Add lines 1a-1f	1,091,700	1		1	1
S. Food Training	Business Code	82,847	82,847	,	
2a Fees - Training	900099	32/3 ./	02,017		
Program Service Revenue	900099	7,352	7,352	!	
	_				
93					
	_				
E	_				
a s					
	-				
f All other program service revenue.					
9 Total. Add lines 2a–2f ▶	90,199	·		1	T
3 Investment income (including dividends, similar amounts)	interest, and other	5,664			5,664
4 Income from investment of tax-exempt be	ond proceeds				
5 Rovalties					

ı			(i) Rea	al	(ii) Per	sonal]			
6a	Gross rents	6a								
b	Less: rental expenses	6b								
С	Rental income or (loss)	6c								
	Net rental income		loss)		٠	_	1			
			(i) Securi	ities	(ii) O					
7a	Gross amount from sales of assets other than inventory	7a								
b	Less: cost or other basis and sales expenses	7b		29,662						
С	Gain or (loss)	7c		-29,662	!					
	Net gain or (loss)					•	-29,662			-29,662
e a	Gross income from full (not including \$		of							
Other Revenue	contributions reported See Part IV, line 18		ne 1c).	8a						
æ .	Less: direct expens	ses		8b			1			
je d	: Net income or (los	s) fro	om fundraisi	ng eve	nts	•				
₹ [Gross income from g See Part IV, line 19			9a						
Ŀ	Less: direct expens	ses		9b						
(: Net income or (los	s) fro	om gaming a	ctivitie	es	•				
10	Gross sales of inve	ntor nces	y, less	10a		579,060				
Ŀ	Less: cost of goods	solo	d	10b		372,564				
_ (Net income or (loss	s) fro	om sales of i	nvento	ory	•	206,496	206,496		
	Miscellaneo		evenue		Business					
111	a Miscellaneous Inco	ome				900099	358	358		
١.										
l t	•									
6	:									
,	All other revenue			 -						
6	Total. Add lines 11	la−1	1d			•	358			
12	Total revenue. Se	ee in:	structions .			•	1,964,761	297,053	0	-23,998
_							1,504,701	297,033	<u> </u>	Form 990 (2021)

Page 10 -

Form 990 (2021) Page **10**

Part IX Statement of Functional Expenses								
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).								
Check if Schedule O contains a response or note to any line in this Part IX								
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				

1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See				
	Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	108,368	81,276	27,092	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	281,725	231,284	40,004	10,437
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	29,506	29,506		
	Payroll taxes	31,537	25,606	5,133	798
	Fees for services (non-employees):				
	Management				
	Legal	91,587		91,587	
	Accounting	43,140		43,140	
	Lobbying	-, -			
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	111,760	98,092	13,668	
12	Advertising and promotion	2,978	1,015		1,963
	Office expenses	10,777	9,588	1,066	123
	Information technology	-,	.,	,	
	Royalties				
	Occupancy	19,510	17,662	1,848	
	Travel	15,828	15,712	-,	116
	Payments of travel or entertainment expenses for any federal, state, or local public officials	-5,755	257: 22		
19	Conferences, conventions, and meetings	7,165	7,165		
	Interest		•		
	Payments to affiliates				
	Depreciation, depletion, and amortization	3,102	3,102		
	Insurance	1,885	1,885		
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	,,,,,	,,,,		
	a Trainer expenses	29,537	29,537		
	b Dues, fees & subscripti	19,867	19,867		
	c International discretio	11,540	11,540		
	d International initiativ	8,884	8,884		
	e All other expenses	9,264	9,264		
25	Total functional expenses. Add lines 1 through 24e	837,960	600,985	223,538	13,437
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).		
	 •	 Form 990 (2021)

Page 1 Page 2 Page 3 Page 4 Page 4 Page 4 Page 5 Page 5 Page 6			Page 11			
Check if Schedule O contains a response or note to any line in this Part IX . G	Forn	າ 990				Page 1
Cash-non-interest-bearing	Pa	art X	Balance Sheet			
1			Check if Schedule O contains a response or note to any line in this Part IX			🗆
2 Savings and temporary cash investments						
3 Pledges and grants receivable, net		1	Cash-non-interest-bearing	812,862	1	1,727,676
4 Accounts receivable, net		2	Savings and temporary cash investments		2	
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 6 Loans and other receivables from other disqualified persons (sa defined under section 4958(f(1)), and persons described in section 4958(f(1)) and f(1) a		3	Pledges and grants receivable, net		3	
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6		4	Accounts receivable, net		4	
section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	Assets	5	trustee, key employee, creator or founder, substantial contributor, or 35%		5	
8 Inventories for sale or use 142,010 8 158,532 9 Prepaid expenses and deferred charges 9 Prepaid expenses 10 Deferred revenue 11 Deferred revenue 9 Ps. 20 Part IV, line 11 11 11 11 11 11 11 11 11 11 11 11 11		6			6	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 99,857 10b 72,625 20,634 10c 27,232 11 Investments—publicly traded securities 11 12 Investments—publicly traded securities 11 743,791 12 826,366 13 Investments—other securities. See Part IV, line 11 13 13 14 Intangible assets 14 9985,253 14 9955,253 14 9955,253 15 Other assets. See Part IV, line 11 15 16 17 17 18 18 19 19 19 19 19 19		7	Notes and loans receivable, net		7	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 99,857 10b 72,625 20,634 10c 27,232 11 Investments—publicly traded securities 11 12 Investments—publicly traded securities 11 743,791 12 826,366 13 Investments—other securities. See Part IV, line 11 13 13 14 Intangible assets 14 9985,253 14 9955,253 14 9955,253 15 Other assets. See Part IV, line 11 15 16 17 17 18 18 19 19 19 19 19 19		8	Inventories for sale or use	142,010	8	158,532
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 99,857 10b 72,625 20,634 10c 27,232 11 Investments—publicly traded securities 11 12 Investments—publicly traded securities 11 743,791 12 826,366 13 Investments—other securities. See Part IV, line 11 13 13 14 Intangible assets 14 9985,253 14 9955,253 14 9955,253 15 Other assets. See Part IV, line 11 15 16 17 17 18 18 19 19 19 19 19 19		9	Prepaid expenses and deferred charges		9	
11 Investments—publicly traded securities		10a		,857		
12 Investments—other securities. See Part IV, line 11		b	Less: accumulated depreciation 10b 72,	,625 20,634	10c	27,232
13 Investments—program-related. See Part IV, line 11		11	Investments—publicly traded securities .		11	
14 Intangible assets		12	Investments—other securities. See Part IV, line 11	743,791	12	826,368
15 Other assets. See Part IV, line 11		13	Investments—program-related. See Part IV, line 11		13	
16 Total assets. Add lines 1 through 15 (must equal line 33)		14	Intangible assets	955,253	14	955,253
17 Accounts payable and accrued expenses		15	Other assets. See Part IV, line 11	4,972	15	4,972
18 Grants payable		16	Total assets. Add lines 1 through 15 (must equal line 33)	2,679,522	16	3,700,033
19 Deferred revenue		17	Accounts payable and accrued expenses	14,862	17	932
20 Tax-exempt bond liabilities		18	Grants payable		18	
21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		19	Deferred revenue		19	
22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		20	Tax-exempt bond liabilities		20	
Secured mortgages and notes payable to unrelated third parties	S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Unsecured notes and loans payable to unrelated third parties		22	employee, creator or founder, substantial contributor, or 35% controlled enti		22	
24 Unsecured notes and loans payable to unrelated third parties	Ë	23	Secured mortgages and notes payable to unrelated third parties			
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25		i	. ,			
Total liabilities. Add lines 17 through 25			Other liabilities (including federal income tax, payables to related third particular and other liabilities not included on lines 17 - 24).	es, 14,694		14,008
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets without donor restrictions		26	•	29,556	26	14,940
29 Capital stock or trust principal, or current funds	Ses		Organizations that follow FASB ASC 958, check here 🕨 🔽 and			
29 Capital stock or trust principal, or current funds	land	27		1,661,610	27	1,593,046
29 Capital stock or trust principal, or current funds	Ba	28	Net assets with donor restrictions	988,356	28	2,092,047
29 Capital stock or trust principal, or current funds	nd		Organizations that do not follow FASB ASC 958, check here 🕨 🗌 an	nd		
30 Paid-in or capital surplus, or land, building or equipment fund	or Fu	29	complete lines 29 through 33.		29	
31 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances	ts	30	Paid-in or capital surplus, or land, building or equipment fund		30	
32 Total net assets or fund balances	Se	31	Retained earnings, endowment, accumulated income, or other funds		31	
	As	32	Total net assets or fund balances	2,649,966	32	3,685,093

3,685,093

		33		3	,700,033
			F	orm 99	0 (2021
	Dans 12				
	Page 12 ———————————————————————————————————				
D ()(0 (2021)				Page 12
Part XI	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
• To	tal variables (much acual Dort VIII caluma (A) line 12)				064 761
	tal revenue (must equal Part VIII, column (A), line 12)	2		1	,964,761 837,960
	evenue less expenses. Subtract line 2 from line 1	3		1	,126,801
	et assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			,649,966
	et unrealized gains (losses) on investments	5			-91,674
	onated services and use of facilities	6			-31,07-
		7			
	vestment expenses	8			
	ior period adjustments	9			(
	et assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10		3	,685,093
		10		J	,005,095
Part X	Check if Schedule O contains a response or note to any line in this Part XII				~
	Check it Schedule O contains a response of note to any line in this Part All		•	Yes	No
				163	NO
_	counting method used to prepare the Form 990: Cash				
	the organization changed its method of accounting from a prior year of checked. Other, explain on the checked of the checked o				
2a W	ere the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed parate basis, consolidated basis, or both:	on a			
(Separate basis Consolidated basis Both consolidated and separate basis				
b We	ere the organization's financial statements audited by an independent accountant?		2b	Yes	
	'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate insolidated basis, or both:	basis,			
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
- 16					
	"Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
If	the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
3a As	s a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	nale			
	idit Act and OMB Circular A-133?	rigic	3a		No
b If	"Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi Idit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired	١		
211	duk of addits, explain with in schedule of and describe any steps taken to undergo such addits.		3b		

efile Public Visual Render ObjectId: 202313179349308311 - Submission: 2023-11-13

SCHEDULE A

(Form 990)

Department of the Treasury

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

TIN: 31-1589053 OMB No. 1545-0047

Interna	Internal Revenue Service			Go to <u>www.irs</u>	<u>.gov/Form990</u> for i	nstructions a	nd the latest info	ormation.	Inspection		
		he organiza	tion					Employer identific			
Goaly	Play Fo	oundation						31-1589053			
	rt I				us (All organization						
The c	rganiz	zation is not a	a private four	ndation because	e it is: (For lines 1 thro	ugh 12, check	only one box.)				
1		A church, c	onvention of	churches, or as	sociation of churches	described in s e	ection 170(b)(1)	(A)(i).			
2		A school de	scribed in se	ction 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form	າ 990).)				
3		A hospital of	or a cooperat	ive hospital ser	vice organization desc	ribed in sectio	on 170(b)(1)(A)((A)(iii).			
4		A medical r name, city,		nization operat	ed in conjunction with	a hospital des	cribed in section :	170(b)(1)(A)(iii). E	nter the hospital's		
5				d for the benefi mplete Part II.)	t of a college or unive	rsity owned or	operated by a gov	ernmental unit descril	oed in section		
6		A federal, s	tate, or local	government or	governmental unit de	scribed in sec	tion 170(b)(1)(A	()(v).			
7				mally receives (vi). (Complete	a substantial part of it Part II.)	s support from	n a governmental u	init or from the genera	al public described in		
8		A communi	ty trust desci	ribed in sectio	170(b)(1)(A)(vi).	(Complete Par	t II.)				
9					escribed in 170(b)(1) ee instructions. Enter				ege or university or a		
10	✓	from activit investment	ies related to income and	its exempt fur unrelated busin	(1) more than 33 _{1/3} % actions—subject to cer ess taxable income (leapplete Part III.)	tain exceptions	s, and (2) no more	than 33 1/3% of its su	ipport from gross		
11		An organiza	ation organize	ed and operated	d exclusively to test fo	r public safety.	See section 509	(a)(4).			
12		more public	cly supported	organizations	d exclusively for the bed described in section 5 Is the type of supportin	09(a)(1) or s	section 509(a)(2). See section 509 (a			
а		organizatio	n(s) the pow		ated, supervised, or composite a major of the major of th						
b		manageme	nt of the sup		ervised or controlled in the sare and C.						
С					supporting organizatio ions). You must com				ted with, its		
d		functionally	integrated.	The organizatio	d. A supporting organing organizationd. Sections A and	fy a distributio	n requirement and				
е					ved a written determir integrated supporting		e IRS that it is a Ty	pe I, Type II, Type III	functionally		
f	Ente	r the number	of supported	l organizations				<u> </u>			
g					ipported organization(() A	(:\ \ \		
	(1) [Name of supports		(ii) EIN	(iii) Type of organization (described on lines	in your gove	rganization listed rning document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
			1- 10 above (see instructions))	Yes	No						
Tota	I			<u> </u>							
For F	aperv	work Reduc or 990-EZ.	tion Act Not	ice, see the I	nstructions for	Cat. No. 112	285F	Schedule	A (Form 990) 2022		

Page 2

Schedule A (Form 990) 2022 Page **2**

P	art II Support Schedule for C						
	(Complete only if you ch						ify under Part III.
	If the organization failed	to qualify und	er the tests lis	ted below, pleas	se complete Par	t III.)	
	ection A. Public Support	I	ı		•	<u> </u>	
	lendar year · fiscal year beginning in) 🕨	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
_	membership fees received. (Do not						
	include any "unusual grant.")						
2	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities						
•	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from						
	line 4.						
	ection B. Total Support						T
	lendar year	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	fiscal year beginning in) Amounts from line 4						
8	Gross income from interest,						
Ū	dividends, payments received on						
	securities loans, rents, royalties and						
_	income from similar sources						
9	Net income from unrelated business activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through						
	10 Gross receipts from related activities, 6	etc (see instruct	ions)			1 42	
						12	
13	First 5 years. If the Form 990 is for the						ganization, check
	this box and $\textbf{stop here}\boldsymbol{\ldots}\boldsymbol{\ldots}\boldsymbol{\ldots}$					▶□	
S	ection C. Computation of Public	Support Per	centage				
14	Public support percentage for 2022 (lir	ne 6, column (f)	divided by line 1	1, column (f))		14	
	Public support percentage for 2020 Scl					15	
	33 1/3% support test—2022. If the						nie hov
168	and stop here. The organization quali	_					IIS DOX
							- _
b	33 1/3% support test—2021. If the						
	box and stop here. The organization	•	, , ,	•			
17 a	10%-facts-and-circumstances test and if the organization meets the "fact	-2022. If the c	organization did n	ot check a box or	n line 13, 16a, or i	16b, and line 14 is	10% or more,
					-		-
	meets the "facts-and-circumstances" to	_	-		_		
b	10%-facts-and-circumstances tes more, and if the organization meets the						
					-	•	_
	meets the "facts-and-circumstances"		•		-		
18	Private foundation. If the organization				•		• -
	instructions						
						Schedule A	A (Form 990) 2022
			Page	3 ———			
			. 390	-			
Sch	edule A (Form 990) 2022						Page 3
	Part III Support Schedule for	or Organizati	ons Described	in Section 50)9(a)(2)		
	(Complete only if you	_				ailed to qualify i	nder Part II. If
	the organization fails						
_	antina A Bublic Commant	.,,		, p	p.220. are	,	

	ction A. Public Support		1	1		1	
	endar year fiscal year beginning in) 🕨	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
`1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.").	353,485	303,779	446,583	633,308	1,600,477	3,337,632
3	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513	972,699	843,249	495,359	677,525	669,259	3,658,091
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	1,326,184	1,147,028	941,942	1,310,833	2,269,736	6,995,723
7a b	Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3	302,715	257,422	333,603	460,203	515,075	1,869,018
_	received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						0
c	Add lines 7a and 7b	302,715	257,422	333,603	460,203	515,075	1,869,018
8	Public support. (Subtract line 7c						5,126,705
Se	from line 6.)						
Cale	endar year	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
•	fiscal year beginning in)	1,326,184	1,147,028	941,942	1,310,833	2,269,736	6,995,723
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,984		·			128,463
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
с 11	Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.	4,984	17,853	12,434	115,785	-22,593	128,463
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .						
13	Total support. (Add lines 9, 10c, 11, and 12.).	1,331,168	1,164,881	954,376	1,426,618	2,247,143	7,124,186
14	First 5 years. If the Form 990 is for	_			•		
	this box and stop here						▶□
	ection C. Computation of Public			(6)		T	
15	Public support percentage for 2022 (li		•			15	71.960 %
16	Public support percentage from 2021					16	71.730 %
	ection D. Computation of Invest Investment income percentage for 20			line 12 column (f\)	14-1	1 000 0/
17	Investment income percentage from 2	,		, ,	• •	17	1.800 %
18						18 n 33 1/3% and line	2.580 %
19a	more than 33 1/3%, check this box an						
b	33 1/3% support tests—2021. If the not more than 33 1/3%, check this box	e organization did	not check a box	on line 14 or line	19a, and line 16 is	more than 33 1/3	% and line 18 is
20	Private foundation. If the organizat						
-	and organization	I I I I I I I I I I I I I I I I I I I		2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2	3.12 30% 3114 300		form 990) 2022
							,

Schedule A (Form 990) 2022 Page 4

Part IV Supporting Organizations

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

Se	ection A. All Supporting Organizations			
		Y	'es	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.			
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.			
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3b 3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section $4958(c)(3)(C)$), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).			
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		-
C	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a	-	
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10a	#	
	Schadula	(Form 0	90)	2022

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 Page 5 Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a 11b A family member of a person described on 11a above? A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part 11c C Section B. Type I Supporting Organizations No Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting 2 organization. Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the 1 supporting organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times 3 during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions): The organization satisfied the Activities Test. Complete line 2 below. b The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) Activities Test. Answer lines 2a and 2b below. Yes No a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of 3a the supported organizations? If "Yes" or "No", provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its

supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022	Page 6

— Page 6 —

Pai	rt v Type III Non-Functionally Integrated 509(a)(3) Supporting C	rganı	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in	ntegrate	ed Type III supporting or	ganization (see

Schedule A (Form 990) 2022

------ Page 7 -----

Schedule A (Form 990) 2022

instructions)

Page **7**

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

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022:			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7:			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain</i> in Part VI . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) (2022)

Part VI	Section A, line Part IV, Section	Information. Provide the explanations required by Part II, line 10; Part I is 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part V, Section E, lines 2, 5, and 6.	n B, lines 1 and 2; Pa ne 1; Part V, Section	rt IV, Section C, line 1; B, line 1e; Part V
		Facts And Circumstances Test		
	Return Reference	Explanation		
			Sche	dule A (Form 990) 2022
Additio	onal Data			Return to Form
		Software ID: Software Version:		
	ic Visual Rende			TIN: 31-1589053 OMB No. 1545-0047
Schedu (Form 990)	ne B	Schedule of Contributors		OWIB NO. 1545-0047
Department of t		► Attach to Form 990, 990-EZ, or 990-PF. ► Go to <u>www.irs.gov/Form990</u> for the latest information	on.	2022
Name of the Godly Play I	e organization Foundation			er identification number
Organizati	ion type (check	one):	31-1589	J53
Filers of:		Section:		
Form 990 d	or 990-EZ	501(c)() (enter number) organization		
		4947(a)(1) nonexempt charitable trust not treated as a private	e foundation	
		527 political organization		
Form 990-l	PF	501(c)(3) exempt private foundation		
		4947(a)(1) nonexempt charitable trust treated as a private for	undation	
		501(c)(3) taxable private foundation		
Check if you Note: Only	our organization a section 501(is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General F	Rule and a Special	Rule. See instructions.
General R	ule			
m	or an organizati noney or other p ontributions.	on filing Form 990, 990-EZ, or 990-PF that received, during the year, roperty) from any one contributor. Complete Parts I and II. See instru	contributions totali ctions for determini	ng \$5,000 or more (in ng a contributor's total

Special Rules

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			(Complete Part II for noncash contributions.)
		\$	Noncash
-		-	Payroll
110.	rume, address, and Air + 4	Total Collinations	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			(Complete Part II for noncash contributions.)
			Noncash
-		-	Payroll
140.	Hame, address, and Zir + 4	Total Collinations	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	,		(Complete Part II for noncash contributions.)
		\$ RESTRICTED	Noncash
RESTRICTED		-	Payroll
110.	nume, audiess, and Air + 4	Total Collabations	Person
Contributors (a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	space is needed.	
Name of organization Godly Play Foundat			Employer identification number 31-1589053
Schedule B (Form	n 990) (2022)	Page	
For Paperwork Redu for Form 990, 990-EZ	action Act Notice, see the Instructions Z, or 990-PF. Page 2	Cat. No. 30613X	Schedule B (Form 990) (2022)
990-EZ, or 990-PF or on its Form 990 990-EZ, or 990-PF	•	neck the box on line H of its nts of Schedule B (Form 99	s Form 990-EZ 90,
-			
during the If this box i purpose. D	anization described in section 501(c)(7), (8), or (10) filing Form 99 year, contributions exclusively for religious, charitable, etc., purpo is checked, enter here the total contributions that were received do not complete any of the parts unless the General Rule applies to charitable, etc., contributions totaling \$5,000 or more during the years.	ses, but no such contribution buring the year for an excluse this organization because	ons totaled more than \$1,000. ively religious, charitable, etc., it received nonexclusively
during the	anization described in section 501(c)(7), (8), or (10) filing Form 99 year, total contributions of more than \$1,000 exclusively for religion or for the prevention of cruelty to children or animals. Complete Page 1	us, charitable, scientific, lite	
received fr	tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (For rom any one contributor, during the year, total contributions of the of VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.		

Godly Play F	oundation - Full Filing- Nonprofit Explorer - ProPublica		3/22/24, 4:44 PI
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$_	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No		(c) Total contributions	(d) Type of contribution
-		\$_	Person Payroll Noncash (Complete Part II for noncash contributions.)
	Page 3		Schedule B (Form 990) (2022)
	3 (Form 990) (2022)	Tenne	Page 3
Name of or Godly Play		Employer identification 31-1589053	on number
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Part II Non	cash Property (see instructions). Use duplicate copies of Part II if additional space is needed	d.	
(a) No. from Part I	(b) Description of noncash property given	(C) FMV (or estimate) (See instructions)	(d) Date received
- =		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
· =			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$(c)	
(a) No. from Part I	(b) Description of noncash property given	FMV (or estimate) (See instructions)	(d) Date received
- =		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_			

(a) No. from Part I	(b) Description of noncash property given			(c) / (or estimate) ee instructions)	(d) Date received	
-			<u> </u>	\$_		
				·	Schedule B (Form 990) (2022)	
		Page 4				
Name of or	B (Form 990) (2022) rganization Foundation			Employer ident	Page 4 ification number	
Part III	Exclusively religious, charitable, etc., cont than \$1,000 for the year from any one cont organizations completing Part III, enter the year. (Enter this information once. See inst Use duplicate copies of Part III if additional sp	ributor. Complete co total of exclusively i tructions.) > \$	lumns (a) through (section 501(c)(7), (8 e) and the following	line entry. For	
(a) No. from Part I	(b) Purpose of gift	(c) Use	e of gift	(d) Descrip	tion of how gift is held	
-	Transferee's name, address, and 2		sfer of gift Relations	ship of transferor to	transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use	e of gift	(d) Descrip	tion of how gift is held	
-	Transferee's name, address, and 2		sfer of gift Relations	ship of transferor to	transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use	e of gift	(d) Descrip	tion of how gift is held	
-	(e) Transfer of gift Transferee's name, address, and ZIP 4			ift Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	e of gift	(d) Descrip	tion of how gift is held	
-	Transferee's name, address, and 2	(e) Trans	sfer of gift Relations	ship of transferor to	transferee	

Schedule B (Form 990) (2022)

Additional Data Return to Form

> Software ID: Software Version:

efile Public Visual Render

ObjectId: 202313179349308311 - Submission: 2023-11-13

TIN: 31-1589053

SCHEDULE D

Department of the Treasury

(Form 990)

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

Inspection

Internal Revenue Service Employer identification number Name of the organization Godly Play Foundation 31-1589053 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible No Yes Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2a 2b Number of conservation easements on a certified historic structure included in (a) **2**c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic 2d structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes □ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes

the organization a accounting for conservation casements.

Ра	Complete if the organization answer				Otner S	similar Assets.	
1a	*C.1	FASB ASC 958, not d for public exhibition	to report in its re	venue stat esearch in			
b	If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items:	FASB ASC 958, to d for public exhibition	report in its reveni on, education, or r	ue stateme esearch in	ent and ba furtheran	lance sheet works ce of public service	of art, , provide the
	(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 a following amounts required to be reported und	rt, historical treasur	es, or other simila	r assets fo		· -	
а	Revenue included on Form 990, Part VIII, line	1				🕨 \$	
b	Assets included in Form 990, Part X					. > \$	
or	Paperwork Reduction Act Notice, see the In				. No. 522) (Form 990) 2021
		P	age 2 ———				
Sche	edule D (Form 990) 2021						Page 2
Pai	rt III Organizations Maintaining Colle	ections of Art, H	listorical Treas	sures, or	Other 9	Similar Assets (
3	Using the organization's acquisition, accession, items (check all that apply):						
а	11 77		d _ Loar	n or exchai	nge progra	ams	
b	Scholarly research		e Othe	er			
С	Preservation for future generations						
4	Provide a description of the organization's colle	ections and explain h	now they further t	he organiz	ation's exe	empt purpose in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to						s 🗆 No
Pa	Escrow and Custodial Arrangen Complete if the organization answelline 21.	nents.					
1a	Is the organization an agent, trustee, custodia included on Form 990, Part X?	n or other intermedi	ary for contributio	ons or othe	r assets n	ot · · · · Ye	s 🗌 No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:	Ī		Amount	
С	, ,	•	-	. [1c		
d					1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on For	m 990, Part X, line 2	21, for escrow or o	custodial a	ccount lial	oility? TYe	s No
b		, ,	•			•	
Pa	art V Endowment Funds.						
	Complete if the organization answer	ered "Yes" on Fori	m 990, Part IV,	line 10.			
	<u> </u>	(a) Current year	(b) Prior year	(c) Two ye		(d) Three years back	(e) Four years back
	Beginning of year balance	200,000	200,000		200,000	100,000	100,000
	Contributions						
	Net investment earnings, gains, and losses						
	Grants or scholarships						
	Other expenditures for facilities and programs						
	Administrative expenses						
g	End of year balance	200,000	200,000		200,000	200,000	100,000

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

а	Dogra designated of quasi-e	muowinent 💌						
b	Permanent endowment	100.000 %						
c	Term endowment 🕨							
		, 2b, and 2c should equal 10						
3а	Are there endowment funds organization by:	not in the possession of the	organiz	ation that are held a	nd administered	for the	Yes	No
	(i) Unrelated organizations						3a(i)	No
b	(ii) Related organizations If "Yes" on 3a(ii), are the rel		 required	· · · · · · · · · · · · · · · · · · ·			3a(ii) 3b	No
4		ended uses of the organization						<u> </u>
Pai	t VI Land, Buildings,	and Equipment.						
	Complete if the or Description of property	ganization answered "Yes (a) Cost or other basis (investment)	1	orm 990, Part IV, list or other basis (other)			X, line 10. (d) Book valu	ie
1a	Land							
b	Buildings			26,548	3	8,748		17,800
C	Leasehold improvements			2,242	2	2,242		0
d	Equipment			71,067	7	61,635		9,432
	Other	Column (d) must equal Form	000 82	rt V. column (R) line	10(c)	•		27 222
IULA	. Add lines to dirough te. (C	Column (u) must equal i omi	990, Fa	Tt x, coluillii (b), iiile	10(0).)	_	lule D (Form 99	27,232
						Senec	.u.e b (1 01 iii 5 i	,0, 2021
				Page 3				
	L L D (F 000) 2024							_
	dule D (Form 990) 2021	Ale en Consultina						Page 3
Раг	t VII Investments - Or Complete if the or	ganization answered "Yes	" on Fo	orm 990. Part IV. li	ine 11b.See Fo	rm 990. Part >	(. line 12.	
	(a) Description of	security or category	0	(b) Book value		(c) Method of v	/aluation:	
		me of security)			Cos	t or end-of-year	market value	
	Financial derivatives Closely-held equity interests		•					
	Other		•					
	piscopal Church Fdn Funds			826,368	3	F		
(B)								
(C)								
(D)								
(E)								
(F)								
(G)								
(H)								
Γotal	. (Column (b) must equal Form 99	90, Part X, col. (B) line 12.)	•	826,368	3			
Par		Program Related.		000 5 5 5	=	000 -	V 11 45	
		rganization answered 'Yes Description of investment	s on Fo		(b) Book value		x, line 13. thod of valuation	
	(a) 1	Description of investment			(b) Book value		-of-year market	
(1)								
(2)								
(3)								
(4)								
(5)								
(3)								

(6)						
(7)						
(8)						
(9)						
Total (Colum	nn (b) must equal Form 990, Part X, col.(B) line 13.)	_				
Part IX	Other Assets.	-				
Pait IX	Complete if the organization answered 'Yes' on Form 990, Par	rt IV. lir	ne 11d. See For	m 990. Part	· X. lin	e 15.
	(a) Description	c 1 0 /	10 1101 000 1011	11 3307 1 410	. ,,	(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						_
(9)						_
	umn (b) must equal Form 990, Part X, col.(B) line 15.)				_	
Part X	Other Liabilities.		<u> </u>			
raitA	Complete if the organization answered 'Yes' on Form 990, Par	rt IV. lir	ne 11e or 11f.S	ee Form 9	990. F	Part X. line 25.
1.	(a) Description of liability					(b) Book value
(1) Federal	l income taxes					
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colum	nn (b) must equal Form 990, Part X, col.(B) line 25.)			•		14,008
2. Liability	for uncertain tax positions. In Part XIII, provide the text of the footnote	to the o	rganization's fina	ncial stater	ments	
organizatio	n's liability for uncertain tax positions under FIN 48 (ASC 740). Check he	ere if the	text of the foot	note has be	en pro	ovided in Part XIII 🔽
				S	chedı	ile D (Form 990) 2021
	Page 4 —					
6.1.1.5	(5					
	(Form 990) 2021					Page 4
Part XI	Reconciliation of Revenue per Audited Financial States Complete if the organization answered 'Yes' on Form 990, Pa			e per Ret	urn.	
1 Total	revenue, gains, and other support per audited financial statements .				1	1,873,087
	unts included on line 1 but not on Form 990, Part VIII, line 12:	-		 	+	2,073,007
	unrealized gains (losses) on investments	2a	1	-91,674		
	ated services and use of facilities	2b				
	veries of prior vear grants	2c	<u> </u>			

					1
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			 2e	-91,674
3	Subtract line 2e from line 1			3	1,964,761
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b		٠	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			 5	1,964,761
Part	XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered 'Yes' on Form 990, Part			 er Returi	n.
1	Total expenses and losses per audited financial statements			 1	837,960
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			 2e	0
3	Subtract line 2e from line 1			 3	837,960
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b		7	
С	Add lines 4a and 4b	٠	٠	 4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) .		 5	837,960
Part	XIII Supplemental Information				

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
	The Godly Play Foundation's Endowment is intended to produce income for the purpose of supporting the administrative and management expenses of the organization.
,	The Organization is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. In addition, the Organization qualifies for the charitable deduction under Section 170(b)(1)(A) and has been classified as an organization other than a private foundation under Section 509(a)(2). The Organization has not identified any uncertainties in federal or state incon taxes for any open tax years as of December 31, 2022. The Organization is no longer subject to examinations by tax authorities for years before 2020. No authorities have commenced income 1 examinations as of December 31, 2022.

Schedule D (Form 990) 2021

Additional Data

Return to Form

Software ID: Software Version:

efile Public Visual I	Render	ObjectId: 202313179349308311 - Submission: 2023-1	1-13	TIN: 31-1589053
SCHEDULE F	St.	atement of Activities Outside the United S	tatos	OMB No. 1545-0047
(Form 990)		omplete if the organization answered "Yes" to Form 990, Part IV, line 14b, 1 Attach to Form 990.		2022
Department of the Treasury Internal Revenue Service		► Go to www.irs.gov/Form990 for instructions and the latest information	n.	Open to Public Inspection
Name of the organization Godly Play Foundation			Employer ide	ntification number

31-1303033

	al Information 90, Part IV, line		Outside the	United Stat	es. Compl	ete if the o	rganization a	nswered "Ye	s" on		
other assistance	cers. Does the oce, the grantees' rants or assistan	eligibility for th	ne grants or assi	stance, and t	he selectio	n criteria us	ed	Yes	□ No		
2 For grantmak outside the Uni	cers. Describe in ited States.	Part V the org	anization's proce	edures for mo	nitoring th	e use of its	grants and oth	er assistance	2		
3 Activites per Re	gion. (The followi	ng Part I, line 3	table can be dupl	icated if additi	onal space	is needed.)					
(a) Regi	ion	(b) Number of offices in the region	(c) Number of employees, agents and independent contractors in the region	, region (by typ fundraising services, invest to recipients k	e) (such as, , program ments, grants ocated in the	program se specif	listed in (d) is a rvice, describe ic type of in the region	(f) Total exp for and inve in the re	estments		
North America			1	regio Program serv		Internationa	ıl development		65,984		
-											
-											
3a Sub-total . b Total from contin Part I		() 1						65,984 0		
c Totals (add lines		e the Instruction	ns for Form 990.		Cat	. No. 50082V	/ Schedul	e F (Form 990	65,984) 2022		
Schedule F (Form 990) 2022		P	age 2							Page 2
Part II Grants	and Other As	ssistance to	Organization	s or Entitie	es Outsic	le the Uni	ted States.	Complete i	f the organiza	tion answered "Yes"	Page 2 on Form 990,
Part IV,	(b) IRS code	1		ore than \$5, Purpose of		II can be	duplicated if (f) Manne		(g) Amount	(h) Description	(i) Method of
organization	section and EIN (if applicable)	(c) Regio	(4)	grant		grant	cash disbursem		of noncash assistance	of noncash assistance	valuation (book, FMV, appraisal, other)
-											
-											
-											
					1						

God	ly Play Foundation - I	Full Filing- Nonpro	fit Explorer - Pr	oPublica				3/22/24, 4:44 PN
		+			 			+
					s charities by the foreign			
		-			501(c)(3) equivalency let			
								Schedule F (Form 990) 2022
Scho	dule F (Form 990) 2022				— Page 3 ————			2 2
	t III Grants and C	Other Assistance e duplicated if addi			ted States. Complete i	f the organizatio	n answered "Yes" on Fo	Page 3 orm 990, Part IV, line 16.
(a)	Type of grant or assistance	1	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
								Schedule F (Form 990) 2022
					— Page 4 ————			
_	dule F (Form 990) 2022						Page 4	
	Was the organization a U		erty to a foreign corr	poration during the tax	x year? If "Yes." the			
	organization may be requ Instructions for Form 920	uired to file Form 926, 6)	Return by a U.S. Ti	ansferor of Property to	o a Foreign Corporation (see	Yes	✓ No	
2	to separately file Form 3: Gifts, and/or Form 3520-	520, Annual Return to A, Annual Information	Report Transactions Return of Foreign	s with Foreign Trusts a Trust With a U.S. Own	organization may be requir and Receipt of Certain Foreig er (see Instructions for Forn 	gn ns	✓ No	
3	may be required to file F	orm 5471, Information	Return of U.S. Per	sons with Respect to C	rear? If "Yes," the organizati Certain Foreign Corporations	i	✓ No	
4	fund during the tax year	? If "Yes," the organiza	ntion may be require	ed to file Form 8621, I	npany or a qualified electing Information Return by a Instructions for Form 8621)		☑ No	
5	may be required to file F	orm 8865, Return of U	.S. Persons with Re	spect to Certain Foreig	rear? If "Yes," the organizat gn Partnerships (see 		☑ No	
6	organization may be requ	uired to separately file	Form 5713, Interna	ational Boycott Report	g the tax year? If "Yes," the (see Instructions for Form 	Yes	✓ No	

Page 5

 Schedule F (Form 990) 2022
 Page 5

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

ReturnReference	Explanation
Part III Accounting Method:	

Schedule F (Form 990) 2022

Additional Data

efile Public Visual Render

or trust interests

Software ID: Software Version:

_	rm 990)		N	Ioncash Contri	butions		OMB No. 1545-0047
Depar	rtment of the Treasury al 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.irs.gov/Form990 for the latest information. Employer identify 31-1589053 Sof Property (a) (b) (c) Noncash contribution amounts reported on Form 990, Part VIII, line 19 art	2022 Open to Public Inspection				
	ne of the organizat	ion				Employer iden	tification number
Godly	y Play Foundation					31-1589053	
Pa	art I Types	of Property					
			Check if	Number of contributions or	Noncash contribution amounts reported on Form 990, Part VIII, line		(d) d of determining ontribution amounts
1	Art—Works of ar						
2							
3	Art—Fractional ir						
4	Books and public					1	
5	Clothing and hou goods	isehold					
6	Cars and other v						
7	Boats and planes	5					
8	Intellectual prop					1	
9	Securities—Publi	cly traded .					
10	Securities—Close	ely held stock .					
11	Securities—Partr	nershin IIC					

ObjectId: 202313179349308311 - Submission: 2023-11-13

TIN: 31-1589053

71	aaidonai bata				Re	carn tt	, 1 011	
Δι	dditional Data				Re	turn to	For	n
					Schedule M	(1 01111 3	, 50) (
	Neturn Nererence			Explanation	Schedule M	(Form 6	90) /	20221
	complete this part for any Return Reference	additional info	rmation.	Explanation				
. (is reporting in Part I, colun	nn (b), the nur	mber of contributions, the	number of items received,				
		i on. Provide tl	ne information required by	y Part I, lines 30b, 32b, and	33, and whether th	e organi	zation	. 55
Scho	dule M (Form 990) (2022)							Page 2
			Page 2 -					
For P	aperwork Reduction Act Notice, see the	e Instructions f	or Form 990.	Cat. No. 51227J	Schedule	M (Form	990)	(2022)
	describe in Part II.						L	L
33	If the organization didn't report an	amount in colu	ımn (c) for a type of prop	erty for which column (a) is	checked,			1
b	If "Yes," describe in Part II.							1
	contributions?					32a		No
	Does the organization hire or use the			•				
31	Does the organization have a gift a	cceptance polic	cy that requires the reviev	v of any nonstandard contrib	outions?	31		No
b	If "Yes," describe the arrangement	in Part II.						
	purposes for the entire holding peri	od?				30a		No
50a	must hold for at least three years fr	rom the date o	f the initial contribution, a	and which isn't required to b	e used for exempt			
302	During the year, did the organizatio	n receive hy c	ontribution any property r	enorted in Part I lines 1 thr	ough 28 that it		Yes	No
	ioi wilicii the organization completed	u 1 ⁻ 01111 8283, 1	rait IV, Donee ACKNOWIEG	gement			Var	NI-
29	Number of Forms 8283 received by for which the organization complete				29			
	,							
	,					-		
	Other ► ()			<u> </u>				
25	Other ► (legal fees)							
	Professional services -	Х	0	91,587	hourly rate			
24	Archeological artifacts			04 507	la a contro made			
	Scientific specimens							
20	Drugs and medical supplies .							
19	Food inventory							
18	Collectibles							
17	Real estate—Other							
	Real estate—Commercial							
15	Real estate—Residential .							
14	Qualified conservation contribution—Other							
	structures							
		l J						
13	Qualified conservation contribution—Historic	1 1			I			

Software ID: Software Version:

efile Public Visual Render

ObjectId: 202313179349308311 - Submission: 2023-11-13

TIN: 31-1589053

SCHEDULE O

(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 990-EZ.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047 **2021**

Open to Public Inspection

Name of the organization Godly Play Foundation Employer identification number

31-1589053

	122 221111
Return Reference	Explanation
Form 990, Part VI, Section A, line 1a	The President, Vice-President, Secretary, Executive Director and Treasurer constitute the Executive Committee. The Executive Committee has the responsibility of carrying out the directives of the Board of Directors and overseeing the functioning of the Foundation between Board meetings. The Board may, in its discretion appoint other members of the Board to the Executive Committee.
Form 990, Part VI, Section B, line 11b	Form 990 is reviewed by the Board Treasurer and Executive Director prior to the distribution to the full Board of Directors for discussion before filing with the IRS.
Form 990, Part VI, Section B, line 12c	The Goldy Play Foundation's Conflict of Interest policy covers directors, officers and members of a committee with Board-delegated powers. Annual disclosure of any conflicts of interest is required and monitored by the board's Secretary who is a member of the Executive Committee. Regular discussion at board meetings covers changes to board members relationships with the Foundation's programs. Board members who are 'interested parties' to any topic (i.e. Board members who are Godly Play trainers) are asked by the Secretary to excuse themselves from votes in which they have a conflict of interest.
Form 990, Part VI, Section B, line 15a	The Board Executive Committee reviews recommended compensation levels for comparable not-for-profit organizations, and negotiated a reasonable salary with the Executive Director. This was subsequently approved by the Board and is adjusted as necessary during quarterly reviews of financial performance and assessment of the Executive Director's ongoing performance.
Form 990, Part VI, Section C, line 19	Available on request
Form 990, Part IX, line 11g	Other Professional Services: Program service expenses 44,850. Management and general expenses 13,668. Fundraising expenses 0. Total expenses 58,518. Trainer fees: Program service expenses 47,642. Management and general expenses 0. Fundraising expenses 0. Total expenses 47,642. Other taxes: Program service expenses 2,565. Management and general expenses 0. Fundraising expenses 0. Total expenses 2,565. Credit card fees: Program service expenses 3,035. Management and general expenses 0. Fundraising expenses 0. Total expenses 3,035.
Form 990 Part XII, line 2c	The Organization has a Finance Committee that duties include "oversees selection and review of annual audit". This committee is comrpised of members of the board of directors who meet and report to the board.
or Donomucel Body	ction Act Notice see the Instructions for Form 900 or 900 F7 Cat. No. 51056K Schedule O (Form 900) 2021

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

Cat. No. 51056K

Schedule O (Form 990) 2021

Additional Data

Return to Form

Software ID: Software Version: