

**FORM 990-EZ**

Department of Treasury  
Internal Revenue Service

**Short Form  
Return of Organization Exempt  
From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-1150

**2023**

**Open To Public Inspection**

|  |  |   |  |   |  |   |  |
|--|--|---|--|---|--|---|--|
| <b>A</b> For the <u>2023</u> calendar year, or tax year beginning <u>01/01/2023</u> , and ending <u>12/31/2023</u>   |  |   |  |   |  |   |  |
| <b>B</b> Check if applicable<br><input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input checked="" type="checkbox"/> Initial return<br><input type="checkbox"/> Final return/terminated<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;"><b>C</b> Name of Organization<br/><u>BRYANT GLADNEY FOUNDATION</u></td> <td style="width:30%;"><b>D</b> Employer ID number<br/><u>92-1662922</u></td> </tr> <tr> <td>Number and Street (or P.O. box, if mail is not delivered to street address)<br/><u>PO BOX 1154</u></td> <td><b>E</b> Telephone number<br/><u>5736733810</u></td> </tr> <tr> <td>City or town, state or country, and Zip + 4<br/><u>PROSPER, TX 76227</u></td> <td><b>F</b> Group Exemption Number<br/><u></u></td> </tr> </table> | <b>C</b> Name of Organization<br><u>BRYANT GLADNEY FOUNDATION</u> | <b>D</b> Employer ID number<br><u>92-1662922</u> | Number and Street (or P.O. box, if mail is not delivered to street address)<br><u>PO BOX 1154</u> | <b>E</b> Telephone number<br><u>5736733810</u> | City or town, state or country, and Zip + 4<br><u>PROSPER, TX 76227</u> | <b>F</b> Group Exemption Number<br><u></u> |
| <b>C</b> Name of Organization<br><u>BRYANT GLADNEY FOUNDATION</u>  | <b>D</b> Employer ID number<br><u>92-1662922</u>   |   |  |   |  |   |  |
| Number and Street (or P.O. box, if mail is not delivered to street address)<br><u>PO BOX 1154</u>  | <b>E</b> Telephone number<br><u>5736733810</u>   |   |  |   |  |   |  |
| City or town, state or country, and Zip + 4<br><u>PROSPER, TX 76227</u>  | <b>F</b> Group Exemption Number<br><u></u>   |   |  |   |  |   |  |
| <b>G</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other:  |  |   |  |   |  |   |  |
| <b>I</b> Website: <u>WWW.GLADNEYFOUNDATION.ORG</u>   |  |   |  |   |  |   |  |
| <b>J</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) <input type="checkbox"/> 4947(a)(1) <input type="checkbox"/> 527   |  |   |  |   |  |   |  |
| <b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other:   |  |   |  |   |  |   |  |
| <input type="checkbox"/> Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).   |  |   |  |   |  |   |  |

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Check if the organization used Schedule O to respond to any question in this Part I.

|           |   |         |          |
|-----------|---|---------|----------|
| <b>1</b>  | Contributions, gifts, grants, and similar amounts received.   |         | \$ 27293 |
| <b>2</b>  | Program service revenue including government fees and contracts   |         | \$ 0     |
| <b>3</b>  | Membership dues and assessments   |         | \$ 0     |
| <b>4</b>  | Investment income   |         | \$ 2811  |
| <b>5a</b> | Gross amount from sale of assets other than inventory   | \$ 0    |          |
| <b>5b</b> | Less: cost or other basis and sales expenses  | \$ 0    |          |
| <b>5c</b> | Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)   |         | \$ 0     |
| <b>6</b>  | Gaming and fundraising events   |         |          |
| <b>6a</b> | Gross income from gaming (attach Schedule G if greater than \$15,000)   | \$ 0    |          |
| <b>6b</b> | Gross income from fundraising events (Not including 0 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) | \$ 0    |          |
| <b>6c</b> | Less: direct expenses from gaming and fundraising events  | \$ 0    |          |
| <b>6d</b> | Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)  |         | \$ 0     |
| <b>7a</b> | Gross sales of inventory, less returns and allowances   | \$ 1965 |          |
| <b>7b</b> | Less: cost of goods sold  | \$ 1431 |          |
| <b>7c</b> | Gross profit or (loss) from sales of inventory  |         | \$ 534   |
| <b>8</b>  | Other revenue   |         | \$ 0     |
| <b>9</b>  | <b>Total revenue</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8  |         | \$ 30638 |
| <b>10</b> | Grants and similar amounts paid (list in Schedule O)  |         | \$ 10000 |
| <b>11</b> | Benefits paid to or for members   |         | \$ 0     |
| <b>12</b> | Salaries, other compensation, and employee benefits   |         | \$ 0     |
| <b>13</b> | Professional fees and other payments to independent contractors   |         | \$ 0     |
| <b>14</b> | Occupancy, rent, utilities, and maintenance   |         | \$ 0     |
| <b>15</b> | Printing, publications, postage, and shipping   |         | \$ 312   |
| <b>16</b> | Other expenses (describe in Schedule O)   |         | \$ 4151  |
| <b>17</b> | <b>Total expenses</b> Add lines 10 through 16   |         | \$ 14463 |
| <b>18</b> | Excess or (deficit) for the year (Subtract line 17 from line 9)   |         | \$ 16175 |
| <b>19</b> | Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior years return)   |         | \$ 28666 |
| <b>20</b> | Other changes in net assets or fund balances (explain in Schedule O)  |         | \$ 0     |
| <b>21</b> | Net assets or fund balances at end of year. Combine lines 18 through 20   |         | \$ 44841 |

**Part II Balance Sheets** (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II.

|           |  |          |          |
|-----------|--|----------|----------|
| <b>22</b> | Cash, savings, and investments   | \$ 26950 | \$ 40839 |
| <b>23</b> | Land and buildings   | \$ 0     | \$ 0     |
| <b>24</b> | Other assets (describe in Schedule O)  | \$ 1762  | \$ 4007  |
| <b>25</b> | <b>Total assets</b>  | \$ 28712 | \$ 44846 |
| <b>26</b> | <b>Total liabilities</b> (describe in Schedule O)                                  | \$ 46    | \$ 5     |
| <b>27</b> | <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) | \$ 28666 | \$ 44841 |

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III.

**What is the organizations primary exempt purpose?**

SUPPORT PARAMEDIC EDUCATION

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**28 Description:** SCHOLARSHIP PROGRAM - THE FOUNDATION PROVIDES TUITION SCHOLARSHIPS FOR STUDENTS ENROLLED IN PARAMEDIC PROGRAMS IN THE UNITED STATES

( Grants: \$ 10000 )

If this amount includes foreign grants, check here

**Expenses**  
(Required for section 501(c)(3) and 501(c)(4) organizations;

**28a**  
\$ 10634

**29 Description:**

( Grants: \$ )

If this amount includes foreign grants, check here

**29a**  
\$

**30 Description:**

( Grants: \$ )

If this amount includes foreign grants, check here

**30a**  
\$

**31** Other program services (describe in Schedule O)

( Grants: \$ )

Check if this amount includes foreign grants

**31a**

**32 Total program service expenses** (add lines 28a through 31a)

\$ 10634

**Part IV List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV.

| (a) Name and title                    | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimated amount of other compensation |
|---------------------------------------|--|---|---|--|
| SHAUN GLADNEY, PRESIDENT/TREASURER    | 10.00  | \$ 0  | \$ 0  | \$ 0                                       |
| JAMIE GLADNEY, BOARD MEMBER           | 2.00   | \$ 0  | \$ 0  | \$ 0                                       |
| JULIA GLADNEY, BOARD MEMBER/SECRETARY | 5.00   | \$ 0  | \$ 0  | \$ 0                                       |

**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.)

Check if the organization used Schedule O to respond to any question in this Part V.

|            |   | Yes                      | No                                  |
|------------|---|--------------------------|-------------------------------------|
| <b>33</b>  | Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O.  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>34</b>  | Were any significant changes made to the organizing or governing documents? If Yes, attach a conformed copy of the amended documents if they reflect a change to the organization name. Otherwise, explain the change on Schedule O. See instructions | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>35a</b> | Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>35b</b> | If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>35c</b> | Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III.                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>36</b>  | Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

|            |  |                          |                                     |
|------------|--|--------------------------|-------------------------------------|
|            | year? If "Yes," complete applicable parts of Schedule N.   |                          |                                     |
| <b>37a</b> | Enter amount of political expenditures, direct or indirect, as described in the instructions.  | \$                       | 0                                   |
| <b>37b</b> | Did the organization file Form 1120-POL for this year?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>38a</b> | Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>38b</b> | If "Yes," complete Schedule L, Part II and enter the total amount involved.  | \$                       |                                     |
| <b>39</b>  | Section 501(c)(7) organizations. Enter:  |                          |                                     |
| <b>39a</b> | Initiation fees and capital contributions included on line 9   | \$                       |                                     |
| <b>39b</b> | Gross receipts, included on line 9, for public use of club facilities  | \$                       |                                     |
| <b>40a</b> | Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:<br>Section 4911: Section 4912: section 4955:   |                          |                                     |
| <b>40b</b> | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part 1. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>40c</b> | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers of disqualified persons during the year under sections 4192, 4955, and 4958.  |                          |                                     |
| <b>40d</b> | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization.  |                          |                                     |
| <b>40e</b> | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>41</b>  | List the states with which a copy of this return is filed: TX  |                          |                                     |
| <b>42a</b> | The organization books are in care of SHAUN GLADNEY, Telephone no. 5736733810 Located at PO BOX 1154, PROSPER , TX, 75078  |                          |                                     |
| <b>42b</b> | 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)?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|            | If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  |                          |                                     |
| <b>42c</b> | At any time during the calendar year, did the organization maintain an office outside the United States?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|            | If "Yes," enter the name of the foreign country:   |                          |                                     |
| <b>43</b>  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here:   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|            | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041: Enter the amount of tax-exempt interest received or accrued during the tax year.   | \$                       | 0                                   |
| <b>44a</b> | Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>44b</b> | Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>44c</b> | Did the organization receive any payments for indoor tanning services during the year?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>44d</b> | If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>45a</b> | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>45b</b> | Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?<br>If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>46</b>  | Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

**Part VI Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part V.

|            |   | Yes                      | No                                  |
|------------|---|--------------------------|-------------------------------------|
| <b>47</b>  | Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>48</b>  | Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>49a</b> | Did the organization make any transfers to an exempt non-charitable related organization?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>49b</b> | If "Yes," was the related organization a section 527 organization?  | <input type="checkbox"/> | <input type="checkbox"/>            |
| <b>50</b>  | Complete this table for the organizations five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None." |                          |                                     |

-- none --

|            |  |  |
|------------|--|--|
| <b>50f</b> | Total number of other employees paid over \$100,000  | 0  |
| <b>51</b>  | Complete this table for the organizations five highest compensated independent contractors who received more than \$100,000 of compensation from the organization. If there is none, enter "None." |  |
|            | -- none --   |  |
| <b>51d</b> | Total number of other independent contractors each receiving over \$100,000  | 0  |
| <b>52</b>  | Did the organization complete Schedule A?<br><b>Note:</b> All section 501(c)(3) organizations must attach a completed Schedule A.  | <input checked="" type="checkbox"/> <input type="checkbox"/> |

|   |   |   |
|---|---|---|
| <p><b>Schedule A</b><br/><b>(Form 990 or 990-EZ)</b></p> <p>Department of Treasury<br/>Internal Revenue Service</p> | <p><b>Public Charity Status and Public Support</b></p> <p>Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.<br/>Attached to Form 990 or Form 990-EZ.</p> | <p>OMB No. 1545-0047</p> <p style="font-size: 2em; font-weight: bold; color: red;">2023</p> <p style="background-color: black; color: white; text-align: center; padding: 2px;">Open To Public Inspection</p> |
|---|---|---|

|  |   |
|--|---|
| Name of the organization:<br>BRYANT GLADNEY FOUNDATION | Employer identification number:<br>92-1662922 |
|--|---|

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2  A school described in section 170(b)(1)(A)(ii).
- 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
- 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9  An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - 12a  Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
  - 12b  Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
  - 12c  Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
  - 12d  Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
- 12e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- 12f Enter the number of supported organizations:
- 12g Provide the following information about the supported organization(s).

| (I) Name of supported organization | (II) EIN | (III) Type of organization (described in line 1-10 above) | (IV) Is the organization listed in your governing document? | (V) Amount of monetary support | (VI) Amount of other support |
|------------------------------------|----------|---|---|--------------------------------|------------------------------|
| -- none --                         |          |   |   |                                |                              |

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

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

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) > |   | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
|---|---|----------|----------|----------|----------|----------|-----------|
| 1   | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  | \$ 0     | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 0         |
| 2   | Tax revenues levied for the organizations benefit and either paid to or expended on its behalf  | \$ 0     | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 0         |
| 3   | The value of services or facilities furnished by a governmental unit to the organization without charge   | \$ 0     | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 0         |
| 4   | <b>Total.</b> Add lines 1 through 3   | \$ 0     | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 0         |
| 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) |          |          |          |          |          | 0         |
| 6   | <b>Public support.</b> Subtract line 5 from line 4  |          |          |          |          |          | 0         |

### Section B. Total Support

| Calendar year (or fiscal year beginning in) > |   | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total                |
|---|---|----------|----------|----------|----------|----------|--------------------------|
| 7   | Amounts from line 4   | \$ 0     | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 0                        |
| 8   | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources   | \$ 0     | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 0                        |
| 9   | Net income from unrelated business activities, whether or not the business is regularly carried on  | \$ 0     | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 0                        |
| 10  | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)   | \$ 0     | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 0                        |
| 11  | <b>Total support.</b> Add lines 7 through 10  |          |          |          |          |          | 0                        |
| 12  | Gross receipts from related activities, etc. (see instructions)   |          |          |          |          |          | 0                        |
| 13  | <b>First five years.</b> If the Form 990 is for the organizations first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here |          |          |          |          |          | <input type="checkbox"/> |

### Section C. Computation of Public Support Percentage

|     |   |  |  |  |  |  |                          |
|-----|---|--|--|--|--|--|--------------------------|
| 14  | Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))  |  |  |  |  |  | 0 %                      |
| 15  | Public support percentage from 2022 Schedule A, Part II, line 14  |  |  |  |  |  | 0 %                      |
| 16a | <b>33 1/3% support test—2023.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization   |  |  |  |  |  | <input type="checkbox"/> |
| 16b | <b>33 1/3% support test—2022.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  |  |  |  |  |  | <input type="checkbox"/> |
| 17a | <b>10%-facts-and-circumstances test—2023.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization      |  |  |  |  |  | <input type="checkbox"/> |
| 17b | <b>10%-facts-and-circumstances test—2022.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization |  |  |  |  |  | <input type="checkbox"/> |
| 18  | <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions   |  |  |  |  |  | <input type="checkbox"/> |

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

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

### Section A. Public Support

| Calendar year (or fiscal year beginning in) > |   | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
|---|---|----------|----------|----------|----------|----------|-----------|
| 1   | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 27293    | \$ 27293  |
| 2   | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organizations tax-exempt purpose | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 1965     | \$ 1965   |
| 3   | Gross receipts from activities that are not an unrelated trade or business under section 513  | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 0        | 0         |
| 4   | Tax revenues levied for the organizations benefit and either paid to or expended on its behalf  | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 0        | 0         |
| 5   | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  | \$ 0     | \$ 0     | \$ 0     | \$ 0     | 0        | 0         |

|           |  |    |      |      |      |      |          |              |
|-----------|--|----|------|------|------|------|----------|--------------|
| <b>6</b>  | <b>Total.</b> Add lines 1 through 5  | \$ | 0 \$ | 0 \$ | 0 \$ | 0 \$ | 29258 \$ | <b>29258</b> |
| <b>7a</b> | Amounts included on lines 1, 2, and 3 received from disqualified persons   | \$ | 0 \$ | 0 \$ | 0 \$ | 0 \$ | 11002 \$ | <b>11002</b> |
| <b>7b</b> | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | \$ | 0 \$ | 0 \$ | 0 \$ | 0 \$ | 0 \$     | <b>0</b>     |
| <b>7c</b> | Add lines 7a and 7b  | \$ | 0 \$ | 0 \$ | 0 \$ | 0 \$ | 11002 \$ | <b>11002</b> |
| <b>8</b>  | <b>Public support.</b> (Subtract line 7c from line 6.)   |    |      |      |      |      | \$       | <b>18256</b> |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) > |   | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |                          |
|---|---|----------|----------|----------|----------|----------|-----------|--------------------------|
| <b>9</b>                                      | Amounts from line 6   | \$       | 0 \$     | 0 \$     | 0 \$     | 0 \$     | 29258 \$  | <b>29258</b>             |
| <b>10a</b>                                    | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources   | \$       | 0 \$     | 0 \$     | 0 \$     | 0 \$     | 2811 \$   | <b>2811</b>              |
| <b>10b</b>                                    | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975   | \$       | 0 \$     | 0 \$     | 0 \$     | 0 \$     | 0 \$      | <b>0</b>                 |
| <b>10c</b>                                    | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources   | \$       | 0 \$     | 0 \$     | 0 \$     | 0 \$     | 2811 \$   | <b>2811</b>              |
| <b>11</b>                                     | Net income from unrelated business activities, whether or not the business is regularly carried on  | \$       | 0 \$     | 0 \$     | 0 \$     | 0 \$     | 0 \$      | <b>0</b>                 |
| <b>12</b>                                     | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)   | \$       | 0 \$     | 0 \$     | 0 \$     | 0 \$     | 0 \$      | <b>0</b>                 |
| <b>13</b>                                     | <b>Total support.</b> Add lines 7 through 10  | \$       | 0 \$     | 0 \$     | 0 \$     | 0 \$     | 32069 \$  | <b>32069</b>             |
| <b>12</b>                                     | Gross receipts from related activities, etc. (see instructions)   |          |          |          |          |          | \$        | <b>0</b>                 |
| <b>13</b>                                     | <b>First five years.</b> If the Form 990 is for the organizations first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here |          |          |          |          |          |           | <input type="checkbox"/> |

**Section C. Computation of Public Support Percentage**

|           |  |  |  |  |  |  |  |            |
|-----------|--|--|--|--|--|--|--|------------|
| <b>15</b> | Public support percentage for 2023 (line 8, column (f) divided by line 13, column (f)) |  |  |  |  |  |  | <b>0 %</b> |
| <b>16</b> | Public support percentage from 2022 Schedule A, Part III, line 15                      |  |  |  |  |  |  | <b>0 %</b> |

**Section D. Computation of Investment Income Percentage**

|            |   |  |  |  |  |  |  |                          |
|------------|---|--|--|--|--|--|--|--------------------------|
| <b>17</b>  | Investment income percentage for 2023 (line 10c, column (f) divided by line 13, column (f))   |  |  |  |  |  |  | <b>0.00 %</b>            |
| <b>18</b>  | Investment income percentage from 2022 Schedule A, Part III, line 17  |  |  |  |  |  |  | <b>0.00 %</b>            |
| <b>19a</b> | <b>33 1/3% support test—2023.</b> If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization           |  |  |  |  |  |  | <input type="checkbox"/> |
| <b>19b</b> | <b>33 1/3% support test—2022.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization |  |  |  |  |  |  | <input type="checkbox"/> |
| <b>20</b>  | <b>Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions   |  |  |  |  |  |  | <input type="checkbox"/> |

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

|           |   | Yes                      | No                       |
|-----------|---|--------------------------|--------------------------|
| <b>1</b>  | Are all of the organizations supported organizations listed by name in the organizations 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. | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>2</b>  | 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).                            | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>3a</b> | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>3b</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.  | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>3c</b> | 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.   | <input type="checkbox"/> | <input type="checkbox"/> |



|     |   |                          |                          |
|-----|---|--------------------------|--------------------------|
| 4a  | Was any supported organization not organized in the United States (“foreign supported organization”)? If “Yes,” and if you checked 12a or 12b in Part I, answer (b) and (c) below.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4b  | 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.   | <input type="checkbox"/> | <input type="checkbox"/> |
| 4c  | 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.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5a  | Did the organization add, substitute, or remove any supported organizations during the tax year? If “Yes,” answer (b) and (c) 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). | <input type="checkbox"/> | <input type="checkbox"/> |
| 5b  | 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?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 5c  | Substitutions only. Was the substitution the result of an event beyond the organization’s control?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 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.   | <input type="checkbox"/> | <input type="checkbox"/> |
| 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 or 990-EZ).  | <input type="checkbox"/> | <input type="checkbox"/> |
| 8   | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If “Yes,” complete Part I of Schedule L (Form 990 or 990-EZ).   | <input type="checkbox"/> | <input type="checkbox"/> |
| 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.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 9b  | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If “Yes,” provide detail in Part VI.   | <input type="checkbox"/> | <input type="checkbox"/> |
| 9c  | Did a disqualified person (as defined in 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.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 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 10b below.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 10b | 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.)  | <input type="checkbox"/> | <input type="checkbox"/> |
| 11  | Has the organization accepted a gift or contribution from any of the following persons?   |                          |                          |
| 11a | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 11b | A family member of a person described in (a) above?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 11c | A 35% controlled entity of a person described in (a) or (b) above? If “Yes” to a, b, or c, provide detail in Part VI.   | <input type="checkbox"/> | <input type="checkbox"/> |

### Section B. Type I Supporting Organizations

|   |   |                          |                          |
|---|---|--------------------------|--------------------------|
| 1 | Did the 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. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If “Yes,” explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.   | <input type="checkbox"/> | <input type="checkbox"/> |

### Section C. Type II Supporting Organizations

|   |  |                          |                          |
|---|--|--------------------------|--------------------------|
| 1 | Were a majority of the organization’s directors or trustees during the tax year also a majority of the directors or trustees of each of the organization’s supported organization(s)? If “No,” describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | <input type="checkbox"/> | <input type="checkbox"/> |
|---|--|--------------------------|--------------------------|

### Section D. All Type III Supporting Organizations

|   |   |                          |                          |
|---|---|--------------------------|--------------------------|
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization’s tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the | <input type="checkbox"/> | <input type="checkbox"/> |
|---|---|--------------------------|--------------------------|



|   |  |                          |                          |
|---|--|--------------------------|--------------------------|
|   | organization's governing documents in effect on the date of notification, to the extent not previously provided?   |                          |                          |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).                              | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. | <input type="checkbox"/> | <input type="checkbox"/> |

**Section E. Type III Functionally Integrated Supporting Organizations**

|    |   |                          |                          |
|----|---|--------------------------|--------------------------|
| 1  | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).   |                          |                          |
| 1a | The organization satisfied the Activities Test. Complete line 2 below.  | <input type="checkbox"/> |                          |
| 1b | The organization is the parent of each of its supported organizations. Complete line 3 below.   | <input type="checkbox"/> |                          |
| 1c | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).   | <input type="checkbox"/> |                          |
| 2  | Activities Test. Answer (a) and (b) below.  |                          |                          |
| 2a | 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. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2b | Did the activities described in (a) 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.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3  | Parent of Supported Organizations. Answer (a) and (b) below.  |                          |                          |
| 3a | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3b | 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.   | <input type="checkbox"/> | <input type="checkbox"/> |

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

| <b>Section A. Adjusted Net Income</b>   |  | (A) Prior Year | (B) Current Year (optional) |
|---|--|----------------|-----------------------------|
| 1                                       | Net short-term capital gain  | \$ 0           | \$ 0                        |
| 2                                       | Recoveries of prior-year distributions   | \$ 0           | \$ 0                        |
| 3                                       | Other gross income (see instructions)  | \$ 0           | \$ 0                        |
| 4                                       | Add lines 1 through 3.   | \$ 0           | \$ 0                        |
| 5                                       | Depreciation and depletion   | \$ 0           | \$ 0                        |
| 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) | \$ 0           | \$ 0                        |
| 7                                       | Other expenses (see instructions)  | \$ 0           | \$ 0                        |
| 8                                       | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).  | \$ 0           | \$ 0                        |
| <b>Section B - Minimum Asset Amount</b> |  | (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):  |                |                             |
| 1a                                      | Average monthly value of securities  | \$ 0           | \$ 0                        |
| 1b                                      | Average monthly cash balances  | \$ 0           | \$ 0                        |
| 1c                                      | Fair market value of other non-exempt-use assets   | \$ 0           | \$ 0                        |
| 1d                                      | Total (add lines 1a, 1b, and 1c)   | \$ 0           | \$ 0                        |
| 1e                                      | Discount claimed for blockage or other factors (explain in detail in Part VI):   | \$ 0           | \$ 0                        |
| 2                                       | Acquisition indebtedness applicable to non-exempt-use assets   | \$ 0           | \$ 0                        |
| 3                                       | Subtract line 2 from line 1d.  | \$ 0           | \$ 0                        |
| 4                                       | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  | \$ 0           | \$ 0                        |
| 5                                       | Net value of non-exempt-use assets (subtract line 4 from line 3)   | \$ 0           | \$ 0                        |
| 6                                       | Multiply line 5 by .035.   | \$ 0           | \$ 0                        |
| 7                                       | Recoveries of prior-year distributions   | \$ 0           | \$ 0                        |

|   |  |    |   |    |                          |
|---|--|----|---|----|--------------------------|
| <b>8</b>                                | Minimum Asset Amount (add line 7 to line 6)  | \$ | 0 | \$ | 0                        |
| <b>Section C - Distributable Amount</b> |  |    |   |    | Current Year             |
| <b>1</b>                                | Adjusted net income for prior year (from Section A, line 8, Column A)  | \$ |   | \$ | 0                        |
| <b>2</b>                                | Enter 85% of line 1.   | \$ |   | \$ | 0                        |
| <b>3</b>                                | Minimum asset amount for prior year (from Section B, line 8, Column A)   | \$ |   | \$ | 0                        |
| <b>4</b>                                | Enter greater of line 2 or line 3.   | \$ |   | \$ | 0                        |
| <b>5</b>                                | Income tax imposed in prior year   | \$ |   | \$ | 0                        |
| <b>6</b>                                | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).                           | \$ |   | \$ | 0                        |
| <b>7</b>                                | Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). |    |   |    | <input type="checkbox"/> |



**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 III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total**

**more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ 0

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Schedule B (Form 990), such as legislation enacted after the schedule and its instructions were published, go to [www.irs.gov/Form990](http://www.irs.gov/Form990).

**Note:** Terms in bold are defined in the *Glossary* of the Instructions for Form 990.

## Reminders

Certain tax-exempt organizations are no longer required to report the names and addresses of their contributors on Schedule B (Form 990). However, these organizations must continue to keep this information in their books and records. Organizations described in section 501(c)(3) and section 527 are still required to report the names and addresses of their contributors on Schedule B. See Regulations section 1.6033-2 (T.D. 9898), 2020-25 I.R.B. 935, and *General Rule*, later.

## Purpose of Schedule

Schedule B (Form 990) is used to provide information on contributions the organization reported on:

- Form 990, Return of Organization Exempt From Income Tax, Part VIII, Statement of Revenue, line 1;
- Form 990-EZ, Short Form Return of Organization Exempt From Income Tax, Part I, line 1; or
- Form 990-PF, Return of Private Foundation, Part I, line 1.

## Who Must File

Every organization must complete and attach Schedule B to its Form 990, 990-EZ, or 990-PF, unless it certifies that it doesn't meet the filing requirements of this schedule by:

- Answering "No" on Form 990, Part IV, Checklist of Required Schedules, line 2; or
- Checking the box on:
  - Form 990-EZ, line H; or
  - Form 990-PF, Part I, Analysis of Revenue and Expenses, line 2.

See the separate instructions for these lines on those forms. If an organization isn't required to file Form 990, 990-EZ, or 990-PF but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

## Accounting Method

When completing Schedule B (Form 990), the organization must use the same accounting method it checked on Form 990, Part XII, Financial Statements and Reporting, line 1; Form 990-EZ, line G; or Form 990-PF, line J.

## Public Inspection

**Note:** Don't include social security numbers of contributors as this information may be made public.

- Schedule B is open to public inspection for an organization that files Form 990-PF.
- Schedule B is open to public inspection for a section 527 political organization that files Form 990 or 990-EZ.
- For all other organizations that file Form 990 or 990-EZ, the names and addresses of contributors aren't required to be made available for public inspection. All other information, including the amount of contributions, the description of **noncash contributions**, and any other information, is required to be made available for public inspection unless it clearly identifies the contributor.

If an organization files a copy of Form 990 or 990-EZ, and attachments, with any state, it shouldn't include its Schedule B (Form 990) in the attachments for the state, unless a schedule of contributors is specifically required by the state. States that don't require the information might inadvertently make the schedule available for public inspection along with the rest of the Form 990 or 990-EZ.

See the instructions for Form 990, 990-EZ, or 990-PF for information on telephone assistance and the public inspection rules for these forms and their attachments.

## Contributions To Be Included on Part I

A contributor (person) includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations. In addition, section 509(a)(2), 170(b)(1)(A)(iv), and 170(b)(1)(A)(vi) organizations must also report **governmental units** as contributors.

## Contributions

Contributions reportable on Schedule B (Form 990) are contributions, grants, bequests, devises, and gifts of money or property, whether or not for charitable purposes. For example, political contributions to section 527 political organizations are included. Contributions don't include fees for the performance of services. See the instructions for Form 990, Part VIII, line 1, for more detailed information on contributions.

## General Rule

Unless the organization is covered by one of the *Special Rules*, later, it must report in Part I contributions from all persons who contribute \$5,000 or more (in money or other property) during the **tax year**. As described below, certain organizations report only total contribution amounts. Contributions may be made directly or indirectly and may take the form of money, **securities**, or any other type of property.

Include all separate and independent gifts that are \$1,000 or more to determine a contributor's total contribution. Gifts that are less than \$1,000 may be disregarded. Include each contribution reported on Form 990, Part VIII, line 1. For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property in Part VIII, line 1, it must include the value of that contribution in calculating whether the contributor meets the General Rule (or one of the Special Rules, if applicable), even if the organization didn't receive the property during the tax year.

## Certain organizations not required to report contributor names and addresses.

Certain organizations are no longer required to report the names and addresses of their contributors on Schedule B. Such organizations are those other than:

- Section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and nonexempt private foundations described in section 6033(d)), or
- Section 527 political organizations. Organizations not required to report the names and addresses should enter "N/A" in Part I, column (b). These organizations must continue to:
  - Collect the names and addresses of their contributors,
  - Keep this information in their records and books, and
  - Make the information available to the IRS upon request.

Section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and nonexempt private foundations described in section 6033(d)), and section 527 political organizations must report the names and addresses of their contributors in Part I, column (b), on Schedule B.

## Special Rules

**Section 501(c)(3) organizations that file Form 990 or 990-EZ.** For an organization described in section 501(c)(3) that meets the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and not just the 10% support test (whether or not the organization is otherwise described in section 170(b)(1)(A)), list in Part I only those contributors whose contribution of \$5,000 or more during the tax year is greater than 2% of the amount reported on Form 990, Part VIII, line 1h(A); or Form 990-EZ, line 1. *An organization that claims the benefit of this special rule must either (1) establish on Schedule A (Form 990), Part II, that it met the 331/3% support test for the current year or prior year; or (2) check the box on Schedule A (Form 990), Part I, line 7 or 8, and the box on Schedule A, Part II, line 13, as a section 170(b)(1)(A)(vi) organization in its first 5 years.*

**Example.** A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on Form 990, Part VIII, line 1h. The organization is only required to list in Parts I and II of its Schedule B each person who contributed more than the greater of \$5,000 or 2% of \$700,000 (\$14,000) during the tax year. Thus, a contributor who gave a total of \$11,000 wouldn't be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization was greater than \$5,000, it didn't exceed \$14,000.

### Section 501(c)(7), (8), or (10) organizations.

For contributions to these social and recreational clubs, fraternal beneficiary and domestic fraternal societies, orders, or associations that weren't for an exclusively religious, charitable, etc., purpose, list in Part I contributions from each contributor who contributed \$5,000 or more during the tax year, as described under *General Rule*, earlier.

For contributions to a section 501(c)(7), (8), or (10) organization received for use exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals (section 170(c)(4), 2055(a)(3), or 2522(a)(3)), list in Part I contributions from each contributor whose aggregate contributions for an exclusively religious, charitable, etc., purpose were more than \$1,000 during the tax year. To determine the more-than-\$1,000 amount, total all of a contributor's gifts for the tax year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that listed an exclusively religious, charitable, etc., contribution in Part I or II must also complete Part III to provide further information on such contributions of more than \$1,000 during the tax year and show the total amount received from such contributions that were for \$1,000 or less during the tax year.

All section 501(c)(7), (8), or (10) organizations listing contributions under this special rule should enter "N/A" in Part I, column (b), and should not enter the name and address of any contributor.

However, if a section 501(c)(7), (8), or (10) organization didn't receive total contributions of more than \$1,000 from a single contributor during the tax year for exclusively religious, charitable, etc., purposes and consequently wasn't required to complete Parts I through III with respect to these

contributions, it need only check the third *Special Rules* box on the front of Schedule B and enter, in the space provided, the total contributions it received during the tax year for an exclusively religious, charitable, etc., purpose.

## Specific Instructions



*Don't attach substitutes for Schedule B or attachments to Schedule B with information on contributors. Parts I, II, and III of Schedule B may be duplicated as needed to provide adequate space for listing all contributors. Number each page of each part (for example, Page 2 of 5, Part II).*

**Part I.** In column (a), identify the first contributor listed as No. 1 and the second contributor as No. 2, etc. Number consecutively. In column (b), section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and section 501(c)(3) nonexempt private foundations) and section 527 organizations enter the contributor's name, address, and ZIP code. Identify a donor as "anonymous" only if the organization doesn't know the donor's identity. Other organizations would enter "N/A" in place of each contributor's name, address, and ZIP code. In column (c), enter the amount of total contributions for the **tax year** for the contributor listed.

In column (d), check the type of contribution. Check all that apply for the contributor listed. If a cash *contribution* came directly from a contributor (other than through payroll deduction), check the "Person" box. A cash contribution includes contributions paid by cash, credit card, check, money order, electronic fund or wire transfer, and other charges against funds on deposit at a financial institution.

If an **employee's** cash contribution was forwarded by an employer (indirect contribution), check the "Payroll" box. If an employer withholds contributions from employees' pay and periodically gives them to the organization, report only the employer's name and address or "N/A," as applicable, and the total amount given unless you know that a particular employee gave enough to be listed separately.

Check the "Noncash" box in column (d) for any contribution of property other than cash during the tax year, and complete Part II of this schedule. For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property on Form 990, Part VIII, line 1g, it must check the "Noncash" box and complete Part II even if the organization didn't receive the property during the tax year.

For a section 527 organization that files a Form 8871, Political Organization Notice of Section 527 Status, the names and addresses of contributors that aren't reported on Form 8872, Political Organization Report of Contributions and Expenditures, don't need to be reported in Part I if the organization paid the amount specified by section 527(j)(1). In this case, enter "Pd. 527(j)(1)" in column (b) instead of a name, address, and ZIP code; but you must enter the amount of contributions in column (c).

**Part II** In column (a), show the number that corresponds to the contributor's number in Part I. In column (b), describe the **noncash contribution** received by the organization during the tax year, regardless of the value of that noncash contribution. Note the public inspection rules discussed earlier.

In columns (c) and (d), report property with readily determinable market value (for example, market quotations for securities) by listing its **fair market value (FMV)**. If the organization immediately sells **securities** contributed to the organization (including through a broker or agent), the contribution must still be reported as a gift of property (rather than cash) in the amount of the net proceeds plus the broker's fees and expenses. See the instructions for Form 990, Part VIII, line 1g, which provide an example to illustrate this point. If the property isn't immediately sold, measure market value of marketable securities registered and listed on a recognized securities exchange by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When FMV can't be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution subject to an outstanding debt, subtract the debt from the property's FMV. Enter the date the property was received by the organization, but only if the donor has fully given up use and enjoyment of the property at that time.

The organization must report the value of any **qualified conservation contributions** and contributions of **conservation easements** listed in Part II consistently with how it reports revenue from such contributions in its books, records, and financial statements and in Form 990, Part VIII, *Statement of Revenue*.

For more information on noncash contributions, see the instructions for Schedule M (Form 990), Noncash Contributions.

If the organization received a partially completed Form 8283, Noncash Charitable Contributions, from a donor, complete it and return it so the donor can get a charitable contribution deduction. Keep a copy for your records.

Original (first) and successor donee (recipient) organizations must file Form 8282, Donee Information Return, if they sell, exchange, consume, or otherwise dispose of (with or without consideration) charitable deduction property (property other than money or certain publicly traded securities) within 3 years after the date the original donee received the property.

**Part III.** Section 501(c)(7), (8), or (10) organizations that received contributions for use exclusively for religious, charitable, etc., purposes during the tax year must complete Parts I through III for each person whose gifts totaled more than \$1,000 during the tax year. Show also, in the heading of Part III, the total of gifts to these organizations that were \$1,000 or less for the tax year and were for exclusively religious, charitable, etc., purposes. Complete this information only on the first Part III page if you use duplicate copies of Part III.

If an amount is set aside for an exclusively religious, charitable, etc., purpose, show in column (d) how the amount is held (for example, whether it is commingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

**Schedule O**  
**(Form 990 or 990-EZ)**

Department of Treasury  
Internal Revenue Service

**Supplemental Information  
to Form 990-EZ**

Complete to provide information for responses to specific questions on Form 990 or 990-EZ  
or to provide any additional information.  
Attached to Form 990 or Form 990-EZ.

OMB No. 1545-1150

**2023**

**Open To Public Inspection**

Name of the organization:

BRYANT GLADNEY FOUNDATION

Employer identification number:

92-1662922

**Additional information, entered into Schedule O:**

FORM 990 - SECTION 1 - LINE 10: \$10,000 IN SCHOLARSHIPS WERE GRANTED TO STUDENTS PURSUING PARAMEDIC EDUCATION PROGRAMS IN THE UNITED STATES. ALL PAYMENTS WERE MADE DIRECTLY TO THE STUDENT'S INSTITUTION, WHICH ARE ALL NON-PROFIT OR GOVERNMENT ENTITIES. FORM 990 - SECTION 1 - LINE 16: ADDITIONAL EXPENSES NOT CATEGORIZED INCLUDE SCHOLARSHIP APPLICATION SOFTWARE, RECIPIENT GIFTS, ACCOUNTING SOFTWARE, WEBSITE EXPENSES, OFFICE SUPPLIES, BOARD SUPPLIES, FEES & PERMITS, DONOR GIFTS, CONFERENCE EXHIBITING FEES AND BOOTH SETUP, AND OBSOLETE INVENTORY. FORM 990 - SECTION 2 - LINE 24: OTHER ASSETS INCLUDES MERCHANDISE INVENTORY. FORM 990 - SECTION 2 - LINE 26: LIABILITIES INCLUDES SALES TAX THAT WAS COLLECTED ON MERCHANDISE SALES DURING QUARTER 4 OF EACH YEAR AND IS PAYABLE DURING QUARTER 1 OF THE NEXT YEAR.