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TIN: 45-4773997

Form 990

Department of the Treasury

Internal Revenue Service

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 $\underline{www.irs.gov/Form990}$ for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

A I	or th	ne 2023 c <u>al</u>	endar year, or tax year beginning 01-01-2023 $$, and ending 12-3 $$	1-2023		•	
B Ch	eck if a	applicable:	C Name of organization SUNSHINE ON A RANNEY DAY		D Employe	r identif	ication number
		change	INCORPORATED		45-4773	997	
	ame ch itial re	_	Doing business as				
		rn/terminated	Doing Business us				
		d return	Number and street (or P.O. box if mail is not delivered to street address) Room/su	ite	E Telephone	number	
ΠA	plicat	ion pending	109-B OAK STREET		(770) 99	0-2434	
_		-	City or town, state or province, country, and ZIP or foreign postal code				
			ROSWELL, GA 30075		G Gross rec	eipts \$ 2,	856,003
			F Name and address of principal officer:	H(a) Is this	a group reti	urn for	
			PAUL NIELSEN 42C -OAK STREET		dinates?		Yes No
			ROSWELL, GA 30075	H(b) Are al includ		es	Yes No
I Ta	ıx-exei	mpt status:	501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527		," attach a lis	st. See i	nstructions.
J V	/ebsi	te: WWW	V.SUNSHINEONARANNEYDAY.COM	H(c) Group	exemption i	number	
K For	m of o	organization:	Corporation Trust Association Other	L Year of forma	tion: 2012	M State	of legal domicile: GA
F	art I	Summ	ary				
			ribe the organization's mission or most significant activities: ON A RANNEY DAY INCORPORATED IS A GEORGIA NON-PROFIT ORGANIZ	ZATION THAT C	SEDVEC THE	CDEATE	D ATLANTA ADEA IT
æ			ON A RANNEY DAY INCORPORATED IS A GEORGIA NON-PROFIT ORGANIZ EXCLUSIVELY FOR CHARITABLE PURPOSES WITH AN EMPHASIS ON RESII				R AILANIA AREA. II
anc an							
Ĕ							
Activities & Governance	,	Check this	box 🗆				
Ü	3		voting members of the governing body (Part VI, line 1a)			3	17
SO CO	4	Number of	independent voting members of the governing body (Part VI, line 1b) .			4	17
E E	5	Total numb	per of individuals employed in calendar year 2023 (Part V, line 2a)		5	19	
Ř	6	Total numb	per of volunteers (estimate if necessary)			6	1,000
ĕ	7a	Total unrela	ated business revenue from Part VIII, column (C), line 12			7a	0
	ь	Net unrelat	ted business taxable income from Form 990-T, Part I, line 11			7b	
				Pric	or Year		Current Year
	8	Contributio	ns and grants (Part VIII, line 1h)		1,180,28	36	1,386,004
Revenue	9	Program se	ervice revenue (Part VIII, line 2g)				0
٥٨e		=	t income (Part VIII, column (A), lines 3, 4, and 7d)			11	24
ď			nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,041,32		1,399,005
			ue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,221,62		2,785,033
	_		similar amounts paid (Part IX, column (A), lines 1–3)				0
			aid to or for members (Part IX, column (A), line 4)				0
70			ther compensation, employee benefits (Part IX, column (A), lines 5–10)		687,47	74	889,376
Š			al fundraising fees (Part IX, column (A), line 11e)		24,00		10,000
Expenses			sing expenses (Part IX, column (D), line 25) 220,456		21,00	,,,	10,000
ă			enses (Part IX, column (A), lines 11a–11d, 11f–24e)	-	1,525,82	12	1,601,526
			nses. Add lines 13–17 (must equal Part IX, column (A), line 25)				
		· ·			2,237,29	_	2,500,902
, un	19	Revenue le	ss expenses. Subtract line 18 from line 12	Basinaina	-15,67		284,131
Net Assets or Fund Balances				Beginning	of Current Ye	ar	End of Year
set	20	Total assets	s (Part X, line 16)		1,249,49	91	1,450,497
d B			ties (Part X, line 26)		588,99	_	505,872
Š			or fund balances. Subtract line 21 from line 20		660,49	_	944,625
	art II		ture Block		000,4.	' '	5-1-7025
	our sill	J. 91141					

any knowledge. 2024-11-13 Sign Signature of officer Date HOLLY RANNEY PRESIDENT Here Type or print name and title Print/Type preparer's name Preparer's signature Date Check if 2024-11-15 P00121054 Paid self-employed Firm's name SANTI & ASSOCIATES PC Firm's EIN 58-2019486 **Preparer Use Only** Firm's address 4010 OLD MILTON PKWY Phone no. (770) 623-4440 ALPHARETTA, GA 300053423 Yes 🗌 No For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2023) Page 2 -Form 990 (2023) Page 2 Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III . . . Briefly describe the organization's mission: SUNSHINE ON A RANNEY DAY INCORPORATED IS A GEORGIA NON-PROFIT ORGANIZATION THAT SERVES THE GREATER ATLANTA AREA. IT OPERATES EXCLUSIVELY FOR CHARITABLE PURPOSES WITH AN EMPHASIS ON RESIDENTIAL ADA MODIFICATIONS. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? . No ☐ Yes If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. (Code:) (Expenses \$ 2,032,175 including grants of \$) (Revenue \$ RESIDENTIAL ADA MODIFICATIONS, THERAPY ROOMS AND ROOM DESIGN FOR CHILDREN WITH LONG TERM DISEASES. (Code:) (Expenses \$ including grants of \$) (Revenue \$ including grants of \$ (Code:) (Expenses \$) (Revenue \$ Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$ 4e **Total program service expenses** 2,032,175

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has

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Part IV

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	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? If "Yes," complete Schedule C, Part 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? If "Yes," complete Schedule D, 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? If "Yes," complete Schedule D, Part II	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? If "Yes," complete Schedule D, Part V	10		No
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		No
	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	Yes	
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		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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? If "Yes," 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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		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** (2023)

Yes

No

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Pai	THE Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I. Parts I and III	22	Yes	No 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? If "Yes," complete Schedule L, Part II	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," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	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 **S	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? If "Yes," complete Schedule R, Part VI	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			

1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 32			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . 1b 0	1		
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 (2023)

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Form 990 (2023) Page 5 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 **b** If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Yes **3a** Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . 3a No 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 4a No financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:_ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . 5a No Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Nο 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization 6a No solicit any contributions that were not tax deductible as charitable contributions? . . . If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services Yes If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . Yes Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7c No 7d If "Yes," indicate the number of Forms 8282 filed during the year . . . Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . No If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 7g No If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h No Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? . . . 9a 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 . . . 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: 11a 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 990 in lieu of Form 1041? 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? . 13a Note. See the instructions for additional information the organization must report on Schedule O. 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	I I		
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.	<u></u>	orm 99	0 (2023)
				- ()
	Page 6 ———————————————————————————————————			
Form	990 (2023)			Daga 6
	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "N	lo" recr	onse to	Page 6
1 01	lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	• •		
Se	ction A. Governing Body and Management	1	V	Na
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 17		Yes	No
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
2	officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		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? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu		-)	140
	CHOIL BY THE OCCUPANT BY Equests information about pointies not required by the Internal Nevent		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		No
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		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i>	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
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		No
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 taxable entity during the year?	assets to, or pa	articip	ate in a joint venture or s	imila •	ır ar •	range	mei	nt with a	16a	No
b	If "Yes," did the organization follow a writin joint venture arrangements under appl										
	status with respect to such arrangements		• •		•	uic	orgai	IIZUI	tion's exempt	16b	
	ction C. Disclosure										
17	List the states with which a copy of this F	form 990 is req	uired	to be filed GA							
18	Section 6104 requires an organization to 501(c)(3)s only) available for public inspersions.	ection. Indicate	how	you made these available.	. Che	ck a					
19	Own website Another's website Describe in Schedule O whether (and if so			Other (explain in Schedu		•	s con	flict	of interest		
	policy, and financial statements available	to the public d	uring	the tax year.			•				
20	State the name, address, and telephone HOLLY RANNEY 42-C OAK STREET ROS	number of the p SWELL, GA 3007			nizat	ion's	s book	ks a	nd records:		
										Form 99	0 (2023)
				– Page 7 – – – – – – – – – – – – – – – – – – 							
_				. age /							
	990 (2023)	Divoctors Tr	cto	as Vay Employage I	اد: د		· Cor		nested Emi	Novece	Page 7
Part	Compensation of Officers, and Independent Contractor	•	uste	es, key Employees, i	nıgı	ies	Cor	npe	ensated Emp	oloyees,	
	Check if Schedule O contains a re-										
	ction A. Officers, Directors, Trust				_						<u></u>
year.	emplete this table for all persons required	to be listed. Re	port c	ompensation for the caler	ndar	year	r endii	ng v	vith or within th	ne organization	s tax
	_ist all of the organization's current office npensation. Enter -0- in columns (D), (E),				orgar	nizat	tions)	, re	gardless of amo	ount	
	ist all of the organization's current key er		-	•	tion	of "l	key er	mplo	oyee."		
	ist the organization's five current highest eceived reportable compensation (box 5 o										00 from
the or	ganization and any related organizations.			, .					,		
	ist all of the organization's former officers ortable compensation from the organization				ploye	es v	who re	ecei	ved more than	\$100,000	
	ist all of the organization's former direct									f the	
_	ization, more than \$10,000 of reportable one instructions for the order in which to lis	•		ne organization and any re	elate	a or	ganız	atio	ns.		
_	heck this box if neither the organization no			zation compensated any c	urre	nt o	fficer,	dire	ector, or trustee	<u>)</u> .	
	(A)	(B)		(C)					(D)	(E)	(F)
	Name and title	Average hours per	Po	sition (do not check more unless person is both an				,	Reportable compensation	Reportable compensation	Estimated amount of
		week (list any hours		director/truste	1 -				from the organization	from related organizations	
		for related	or director	?	Officer	Key employee	Highest compensat employee	Former	(W-2/1099-	(W-2/1099-	from the
		organizations below dotted	100 A		er	em	iest łoye	ner	MISC/1099- NEC)	MISC/1099- NEC)	and related
		line)				ploy	con				organization
			unstee			99	npe				
			6				nsat				
							ed				
` '	DLLY RANNEY	40.00			Х				119,996	5	0
PRESI					^				119,990		
` '	TER RANNEY	40.00			Х				57,130		0
	RAM DIRE				^				37,130		
(3) HE	ATHER CATLIN	1.00	Х							<u> </u>	0
DIREC	TOR	<u> </u>	^								
(4) MI	CHAEL CHANDLER	1.00	Х								0
DIREC	TOR	1									
. ,	AVIS COUICK	1.00	I								0
		4.	Х		1					J	U
DIREC											

1.00

(7) INDICTEN CATEC

(/) KKISTEN GATES DIRECTOR		х			0	0	0
(8) LORI GEARY DIRECTOR	1.00	Х			0	0	0
(9) DANA GURELA DIRECTOR	1.00	Х			0	0	0
(10) MOHAMED MASSAQUOI DIRECTOR	1.00	Х			0	0	0
(11) TRACI MESSIER SECRETARY	1.00	Х			0	0	0
(12) PAUL NIELSEN BOARD CHAIRM	1.00	Х			0	0	0
(13) ALEX PAULSON DIRECTOR	1.00	Х			0	0	0
(14) CARLOS RAMIREZ DIRECTOR	1.00	Х			0	0	0
(15) BRETT STEWART DIRECTOR	1.00	Х			0	0	0
(16) STEPHEN TIMME DIRECTOR	1.00	Х			0	0	0
(17) SCOTT WIERSON DIRECTOR	1.00	Х			0	0	0

Form **990** (2023)

Page 8 -

Form 990 (2023)

Page 8

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list		(C) sition (do not check more unless person is both an o director/trustee	office	n or er a	ne box nd a	,	(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099- MISC/1099- NEC)	other	
	any hours for related organizations below dotted line)	Individual trustee or director	?	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099- MISC/1099- NEC)		compensation from the organization and related organizations	
(18) THOMAS WILSON DIRECTOR	1.00	x						0	0	(
(19) ERIC ZEIER DIRECTOR	1.00	X						0	0	(

Sub-Total				I	<u> </u>	1 1			
: Total from continuation sh I Total (add lines 1b and 1c		•				177,126	5		
Total number of individuals of reportable compensation	(including but r	not limited t		listed above) who red	ceived m	ore than \$1	100,000	l .	
								Τ	Yes No
Did the organization list an line 1a? If "Yes," complete	•			, key employee, or h	ighest c	ompensated	d employee on	3	No
For any individual listed on organization and related or individual	4	No							
Did any person listed on lir services rendered to the or			•	•	_			5	No
Section B. Independent	Contractors								
Complete this table for you	ır five highest co							mpensati	on
from the organization. Rep	. (,	A)	•	ear ending with or w	itnin the	Ī	(B)		(C)
	Name and bu	siness addres	SS			Des	cription of services	(Compensation
Total number of independent									
compensation from the organ	iizacion							Foi	rm 990 (202
compensation from the organ				- Page 9 ————				For	
rm 990 (2023) Part VIII Statement of I	Revenue	sponse or n	ote to an	ny line in this Part VIII				Foi	Page
rm 990 (2023) Part VIII Statement of I	Revenue	sponse or n	ote to an		Rel	(B) atted or	C) Unrelated		Page (D) Revenue
rm 990 (2023) Part VIII Statement of I	Revenue	sponse or n	ote to an	ny line in this Part VIII	Rel e: fu	ated or cempt nction		ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule	Revenue	sponse or n	ote to an	ny line in this Part VIII	Rel e: fu	ated or cempt	Unrelated business	ex	Revenue
rm 990 (2023) Part VIII Statement of I Check if Schedule	Revenue O contains a res	sponse or n	ote to an	ny line in this Part VIII	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule	Revenue O contains a res	sponse or n	ote to an	ny line in this Part VIII	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule Federated campaigns . ?	Revenue O contains a res	sponse or n	ote to an	ny line in this Part VIII	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule Federated campaigns . ? Membership dues Fundraising events	Revenue O contains a res	sponse or n	ote to an	ny line in this Part VIII	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule Federated campaigns . ? Membership dues Fundraising events Related organizations	Revenue O contains a res 1a 1b 1c 1d	sponse or n	ote to an	ny line in this Part VIII	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule Federated campaigns . ? Membership dues Fundraising events Related organizations	Revenue O contains a res 1a 1b 1c 1d 1e	sponse or n	ote to an	ny line in this Part VIII	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule Federated campaigns . ? Membership dues Fundraising events Related organizations	Revenue O contains a res 1a 1b 1c 1d 1e	sponse or n	note to an	ny line in this Part VIII	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule Federated campaigns . ? Membership dues Fundraising events Related organizations All other contributions, gifts, gran and similar amounts not included above 1,386,004 Noncash contributions included in	Revenue O contains a res 1a 1b 1c 1d 1ts, 1f	sponse or n	ote to an	ny line in this Part VIII	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule Federated campaigns . ? Membership dues Fundraising events Related organizations Government grants (contributions gifts, gran and similar amounts not included above 1,386,004 Noncash contributions included in lines 1a - 1f:\$	Property of the contains a result of the conta	sponse or n	ote to an	ny line in this Part VIII	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule Federated campaigns . ? Membership dues Fundraising events Related organizations All other contributions, gifts, gran and similar amounts not included above 1,386,004 Noncash contributions included in lines 1a - 1f:\$ 505,966	Revenue O contains a res 1a 1b 1c 1d 1ts, 1f	sponse or n		(A) Total revenue	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule Federated campaigns . ? Membership dues Fundraising events Related organizations Government grants (contributions and similar amounts not included above 1,386,004 Noncash contributions included in lines 1a - 1f:\$ 505,966	Revenue O contains a res 1a 1b 1c 1d 1ts, 1f		1,386,004 ess Code	(A) Total revenue	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section
rm 990 (2023) Part VIII Statement of I Check if Schedule The Federated campaigns	Revenue O contains a res 1a 1b 1c 1d 1ts, 1f		1,386,004	(A) Total revenue	Rel e: fu	ated or cempt nction	Unrelated business	ex	Page (D) Revenue coluded from under section

Q	2								
9									
- Arado	<u> </u>								
Decorem Conde	5 <u>1</u>								
2	3 3								
å	Ē								
	f All other program	serv	ice revenue.						
	9 Total. Add lines 2	2a-21	f						
	3 Investment income similar amounts) .				nterest, and other	24			24
	4 Income from invest				nd proceeds				
	5 Royalties				<u>İ</u>				
			(i) Rea	al	(ii) Personal				
	6a Gross rents	6a		7,950					
	b Less: rental expenses	6b							
	c Rental income or	6c		7,950					
	(loss) d Net rental income	e or ((loss)			7,950	7,950		
			(i) Securi	ities	(ii) Other				
	7a Gross amount from sales of	7a							
	assets other than inventory								
9	·	7b							
Revenue	other basis and sales expenses								
Be	c Gain or (loss)	7c							
ě	d Net gain or (loss)						<u> </u>		
Other	a Gross income from fu		ising events						
	(not including \$contributions reporte	d on I	of line 1c).						
	See Part IV, line 18	•		8a	635,970				
	b Less: direct expen			8b	70,970			ī.	
	c Net income or (los	ss) fr	om fundraisi	ng eve	ents	565,000			
	9a Gross income from	gami	ng activities.						
	See Part IV, line 19			9a					
	b Less: direct expen			9b				i:	
	c Net income or (los	ss) fr	om gaming a	CTIVITIE	es				
	10a Gross sales of inve	entor	y, less						
	returns and allowa			10a					
	b Less: cost of good			10b				ie.	
	c Net income or (los	ss) fr	om sales of i	nvento	Business Code				
	11a _{SUNNY} & RANNE	Y STO	ORE REVENU	E	545655 6646	1,049,063	1,049,063		
	b PARTLY SUNNY ST	TORE	REVENUE			106,064	106,064		
Ш	C EN ? DYEE RETEN	ITION	N CREDITS			101,624	101,624		
	d All other revenue	•		\rightarrow		-430,696	-430,696		
	e Total. Add lines 1	1a-1	1d			826,055			
	12 Total revenue. S	ee in	structions .				024.005		2.1
						2,785,033	834,005		24

Form 990 (2023) 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										
	not include amounts reported on lines 6b, 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		,	J .	·					
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	177,126	134,616	23,026	19,484					
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	603,036	458,307	78,395	66,334					
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)									
9	Other employee benefits	57,821	43,944	7,517	6,360					
LO	Payroll taxes	51,393	39,059	6,681	5,653					
11	Fees for services (non-employees):									
ā	Management									
ł	Legal									
(Accounting	45,010		45,010						
(1 Lobbying									
•	Professional fundraising services. See Part IV, line 17	10,000			10,000					
f	Investment management fees									
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,708		3,708						
12	Advertising and promotion	62,274	47,328	8,096	6,850					
L3	Office expenses	28,031	21,303	3,644	3,084					
	Information technology				_					
15	Royalties				_					
L6	Occupancy	234,180	177,977	30,443	25,760					
	Travel									
	Payments of travel or entertainment expenses for any federal, state, or local public officials .									
	Conferences, conventions, and meetings									
	Interest	5,412		5,412						
	Payments to affiliates									
	Depreciation, depletion, and amortization	83,019	63,095	10,791	9,133					
	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.)	57,671	43,830	7,497	6,344					
	a MAKEOVER EXPENSES	890,434	890,434		_					
	b REPAIRS AND MAINTENANCE	77,055	58,562	10,017	8,476					
	c DONOR RELATIONS	46,450			46,450					
	d DUES AND SUBSCRIPTIONS	21,785	16,557	2,832	2,396					
	e All other expenses	46,497	37,163	5,202	4,132					
25	Total functional expenses. Add lines 1 through 24e	2,500,902	2,032,175	248,271	220,456					

Page 11 ——————————————————————————————————							
Page 11 Page 12 Page 13 Page 14 Page 14 Page 14 Page 15 Page 15 Page 16 Page 16 Page 17 Page 17 Page 18 Page 18 Page 18 Page 19 Pag							
Page 11 Page 11 Page 12 Page 13 Page 14 Page 14 Page 15 Page 15 Page 16 Page 16 Page 16 Page 17 Page 17 Page 17 Page 18 Page							
Page 11 Page 12 Page 13 Page 14 Page 15 Page 15 Page 16 Page 16 Page 16 Page 17 Page 17 Page 17 Page 18 Pag			if following SOP 98-2 (ASC 958-720).				
Page 13 Page 14 Page 15 Page 15 Page 16 Page 16 Page 16 Page 17 Page 17 Page 17 Page 18 Pag				l l			Form 990 (2023)
Page 13 Page 14 Page 15 Page 15 Page 16 Page 16 Page 16 Page 16 Page 17 Page 17 Page 17 Page 18 Pag							
Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part IX			P	age 11 ————			
Check if Schedule 0 contains a response or note to any line in this Part IX Beginning of year Beginning of year City	orm	990	(2023)				Page 11
Cash-non-interest-bearing	Pa	ırt X	Balance Sheet				
1			Check if Schedule O contains a response or note to any line	in this Part IX			
1 Cash-non-interest-bearing 468,718 1 523,617 2 Savings and temporary cash investments 2 3 Releges and grants receivable, net 3 3 Releges and grants receivable, net 4 4 Accounts receivable, net 4 4 Accounts receivable from any current or former officer, director, trustee, key employee, creative or founder, substantial contributor, or 35% 5 5 Laans and other receivables from any current or former officer, director, trustee, key employee, creative or founder, substantial contributor, or 35% 5 5 Laans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 Robert Saving (1), and persons described in section 4958(c)(3)(B). 7 Notes and loans receivable, net 7 22,422 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 538,522 b Less: accumulated depreciation 10b 268,991 228,532 10c 288,531 11 Investments—publicly traded securities 11 1 12 12 13 Investments—publicly traded securities 11 1 13 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15							
2 Savings and temporary cash investments		1	Cash-non-interest-bearing		468,718	1	523,617
A Accounts receivable, net A		2	Savings and temporary cash investments			2	
10 1 1 1 1 1 1 1 1 1		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 Loans and other receivables from other disqualified persons (as defined under section 4958(r)(1) and persons described in section 4958(c)(3)(8) . 6 7 Notes and loans receivable, net		4	Accounts receivable, net	[4	
Section 498K(r)(1), and persons described in section 495K(c)(3)(8). 6		5	trustee, key employee, creator or founder, substantial contril			5	
section 4958(f)(11)), and persons described in section 4958(c)(3)(8) . 6 7 Notes and loans receivable, net		6		as defined under			
8 Inventories for sale or use 92,160 8 270,058 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D 10b 266,991 226,532 10c 268,531 11 Investments—publicly traded securities 1 11 Investments—publicly traded securities 1 12 Investments—publicly traded securities 1 12 Investments—publicly traded securities 1 12 Investments—program-related. See Part IV, line 11 1 13 Investments—program-related. See Part IV, line 11 1 14 Intangible assets 1 15 Intended I						6	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 266.991 226.532 10c 268.531 11 Investments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—program-related. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 13 Intangible assets 14 16 14 16 16 16 16 16	S	7	Notes and loans receivable, net	[7	22,422
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 266.991 226.532 10c 268.531 11 Investments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—program-related. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 13 Intangible assets 14 16 14 16 16 16 16 16	set	8	Inventories for sale or use	[92,160	8	270,058
basis. Complete Part Vi of Schedule D b Less: accumulated depreciation 11 Investments—publicity traded securities 12 Investments—publicity traded securities 13 Investments—publicity traded securities 14 Intangible assets 15 Other assets. See Part IV, line 11	As	_		-		9	
11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program—related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 1		10a	basis. Complete Part VI of Schedule D	·			
12 Investments—other securities. See Part IV, line 11				266,991	226,532		268,531
13 Investments—program-related. See Part IV, line 11			• •				
14 Intangible assets			·	· · ·			
15 Other assets. See Part IV, line 11							
16 Total assets. Add lines 1 through 15 (must equal line 33)				462,081		365,869	
18 Grants payable			•	<u> </u>	1,249,491	16	1,450,497
Deferred revenue		17			64,563	17	67,258
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	
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	
24 Unsecured notes and loans payable to unrelated third parties	SS	21	Escrow or custodial account liability. Complete Part IV of Scho	edule D		21	
24 Unsecured notes and loans payable to unrelated third parties	bilitie	22	employee, creator or founder, substantial contributor, or 35%	controlled entity			
24 Unsecured notes and loans payable to unrelated third parties	Lia	22	, , ,	L L			
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				-	49.900		51.593
Total liabilities. Add lines 17 through 25			Other liabilities (including federal income tax, payables to rel	<u>-</u>	,		
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions			•	_	500.007	26	F0F 070
29 Capital stock or trust principal, or current funds	S	26			500,997	26	505,672
29 Capital stock or trust principal, or current funds	ce		-	and complete			
29 Capital stock or trust principal, or current funds	ılar	27			660,494	27	944,625
29 Capital stock or trust principal, or current funds	B	28	Net assets with donor restrictions			28	
29 Capital stock or trust principal, or current funds	nuc		-	here 🕨 🗌 and			
30 Paid-in or capital surplus, or land, building or equipment fund	r Fi	29				29	
31 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances			• • •	, 			_
	set			<u> </u>			
33 Total liabilities and net assets/fund balances	11-000	32	Total net assets or fund balances		660,494	32	944,625
	Net	33	Total liabilities and net assets/fund balances $\ \ . \ \ . \ \ .$	[1,249,491	33	1,450,497

Part XI	Reconcilliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1 Total re	evenue (must equal Part VIII, column (A), line 12)		1		2	,785,033
	xpenses (must equal Part IX, column (A), line 25)	:	2			,500,902
	ue less expenses. Subtract line 2 from line 1		3			284,131
4 Net ass	sets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<u> </u>	4			660,494
5 Net un	realized gains (losses) on investments	. [5			
6 Donate	ed services and use of facilities	. [6			
7 Investr	ment expenses	. [7			
	eriod adjustments	· ·	8			
	changes in net assets or fund balances (explain in Schedule O)	.	9			
	sets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	column (B))	10			944,625
Part XII	Financial Statements and Reporting Charlet General Constrains a grant and a partition in this Port VII					
	Check if Schedule O contains a response or note to any line in this Part XII		• •	· i	Yes	No
			Г		res	NO
_	nting method used to prepare the Form 990: Cash Accrual Other organization changed its method of accounting from a prior year or checked "Other," explain	on.				
Schedu		OII				
2a Were t	he organization's financial statements compiled or reviewed by an independent accountant?			2a		No
	' check a box below to indicate whether the financial statements for the year were compiled te basis, consolidated basis, or both:	or reviewed o	n a			
_ S	eparate basis Consolidated basis Both consolidated and separate basis					
b Were t	he organization's financial statements audited by an independent accountant?			2b	Yes	
	$^\prime$ check a box below to indicate whether the financial statements for the year were audited or dated basis, or both:	n a separate b	asis,			
_ S	eparate basis					
of the	," to line 2a or 2b, does the organization have a committee that assumes responsibility for or audit, review, or compilation of its financial statements and selection of an independent acco	untant?		2c	Yes	
If the o	organization changed either its oversight process or selection process during the tax year, ex	plain in Sched	ule O.			
	esult of a federal award, was the organization required to undergo an audit or audits as set for ice, 2 C.F.R. Part 200, Subpart F?	orth in the Uni	form	За		
b If "Yes, audit o	," did the organization undergo the required audit or audits? If the organization did not unde or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	rgo the requir	ed	3b		
				F	orm 99	0 (2023)
Form 990 (20 Additio	nal Data		R	eturr	ı to Fo	orm
	Software ID:					
	Software Version:					
Form 990,	Special Condition Description:					
	Special Condition Description					
efile Publ	ic Visual Render ObjectId: 202423209349306772 - Submission: 20	24-11-15		TI	N: 45-	·477399
SCHEDI	II F A Public Charity Status and Bublic Sur	nort		0	MB No.	1545-004
(Form 990) Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.			n	2023		
Department of the Treasury Attach to Form 990 or Form 990-EZ.						-

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

Internal Revenue Service

Form 990 (2023)

Open to Public

Inspection

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Pa	rt I	Reason for Public Char	ity Status (A	l organization	must comp	ete th	is part.) S	ee ins		
The o	organiz	ation is not a private foundatio								
1		A church, convention of churc	hes, or associat	on of churches	lescribed in se	ction 1	L70(b)(1)	(A)(i).		
2		A school described in section	170(b)(1)(A)	(ii). (Attach Sch	edule E (Form	990).)				
3		A hospital or a cooperative ho	spital service or	ganization descr	ibed in sectio i	n 170(b)(1)(A)(i	iii).		
4		A medical research organizati name, city, and state:	on operated in c	onjunction with	a hospital desc	ribed in	n section 1	.70(b)	(1)(A)(iii). En	ter the hospital's
5		An organization operated for 1170(b)(1)(A)(iv). (Complet		college or univer	sity owned or	operate	ed by a gove	ernmen	tal unit describ	ed in section
6		A federal, state, or local gove	rnment or gover	nmental unit de	scribed in sect	ion 17	0(b)(1)(A)(v).		
7 8		An organization that normally section 170(b)(1)(A)(vi). A community trust described	(Complete Part 1	I.)		-	rnmental u	nit or fr	om the genera	public described in
9		•	`		•	•	anium atian .	امطائس	and avent cells	
9		An agricultural research organ non-land grant college of agri								ge or university or a
10		An organization that normally from activities related to its e investment income and unrela 30, 1975. See section 509(a	xempt functións ated business ta	—subject to cert xable income (le	ain exceptions	, and (2	2) no more	than 33	3 1/3% of its sup	port from gross
11		An organization organized and			public safety.	See se	ction 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12q.								
а		Type I. A supporting organization(s) the power to a complete Part IV, Sections	ation operated, s regularly appoin	supervised, or co	ntrolled by its	suppor	ted organiz	ation(s), typically by g	
b		Type II. A supporting organizmanagement of the supportin	zation supervise g organization v	ested in the san						
С		must complete Part IV, Sec Type III functionally integ			operated in c	onnecti	on with, an	d funct	ionally integrat	ed with, its
	_	supported organization(s) (se	e instructions).	You must com	olete Part IV,	Sectio	ns A, D, a	nd E.		
d		Type III non-functionally i functionally integrated. The o								
_	_	instructions). You must com Check this box if the organiza	-		-		:- : T			
е		integrated, or Type III non-fu				IKS UI	atitis a Typ	pe i, iy	pe II, Type III I	unctionally
f	Enter	the number of supported orga	nizations						· · · · <u> </u>	
g		de the following information ab		ed organization(: iii) Type of	s). (iv) Is the or	aanizat	ion listed	(11)	Amount of	(vi) Amount of
	(1)	organization	o (des	rganization cribed on lines	in your gover					other support (see instructions)
				.0 above (see structions))	Yes	N	lo			
Tota		work Reduction Act Notice, s	oo the Instruc	tions for	Cat. No. 1128	055			Schodulo /	A (Form 990) 2023
		or 990-EZ.	see the Instruc	cions for	Cat. No. 1126	551			Schedule A	((FOI III 990) 2023
				Pag	je 2 ———					
Sche	dule A	(Form 990) 2023								Page 2
Pa	rt II	Support Schedule for (Complete only if you ch	necked the box	on line 5, 7,	or 8 of Part I	or if t	he organiz	zation	failed to qual	
Se	ection	If the organization failed A. Public Support	a to qualify un	uer trie tests i	steu below,	Jiease	complete	rdi(l.	11.)	
Cale	endar		(a) 2019	(b) 2020	(c) 2021		(d) 2022		(e) 2023	(f) Total
1 (Gifts, g membe nclude	rants, contributions, and ership fees received. (Do not any "unusual grant.")	1,570,3	10 1,013	,721	847,700	1,	180,286	1,386,0	5,998,021
_ (organiz to or ex	enues levied for the ation's benefit and either paid opended on its behalf								
	The val	ue of services or facilities								+

	furnished by a governmental unit to	Ī					
4	the organization without charge Total. Add lines 1 through 3	1,570,310	1,013,721	847,700	1,180,286	1,386,004	5,998,021
5	The portion of total contributions by	1,3,0,310	1,013,721	017,700	1,100,200	1,300,001	3,330,021
	each person (other than a						
	governmental unit or publicly supported organization) included on						396,294
	line 1 that exceeds 2% of the						353,25
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from						5,601,727
_	line 4.						3,601,727
	Section B. Total Support		ı	ı	I	ı	<u> </u>
	r fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	1,570,310	1,013,721	847,700	1,180,286	1,386,004	5,998,021
8	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties and				11	24	35
_	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							5,998,056
12	10 Gross receipts from related activities, e	etc. (see instruction	ns)	<u> </u>		12	3,543,894
13		•	•				· · · · · · · · · · · · · · · · · · ·
	this box and stop here	-			-		iization, thetk
_	Section C. Computation of Public						
14	D 1 II			column (f))		14	93.390 %
15	Public support percentage for 2022 Sch	nedule A, Part II,	line 14			15	96.800 %
16	$_{\mathbf{a}}$ 33 $_{\mathbf{1/3}\%}$ support test—2023. If the $_{0}$						
	and stop here. The organization qualif	• •					
ı	33 1/3% support test—2022. If the box and stop here. The organization	_					
ı	a 10%-facts-and-circumstances test and if the organization meets the "facts meets the "facts-and-circumstances" to 10%-facts-and-circumstances test more, and if the organization meets the meets the "facts-and-circumstances" to private foundation. If the organization	s-and-circumstanest. The organizat t—2022. If the one "facts-and-circ test. The organizat	ces" test, check the cion qualifies as a rganization did no umstances" test, co ation qualifies as a	is box and stop h publicly supported t check a box on l check this box and publicly supporte	nere. Explain in Pa I organization ine 13, 16a, 16b, I stop here. Expla d organization	ort VI how the organizers or 17a, and line 19 hin in Part VI how the control of t	anization
18	Private foundation. If the organization instructions				•		▶□
_	instructions						Form 990) 2023
						Jeneuale // (I	· · · · · · · · · · · · · · · · · · ·
_			Page 3				
Sch	nedule A (Form 990) 2023						Page 3
_	Part III Support Schedule fo	or Organizatio	ns Described i	n Section 509	(a)(2)		
	(Complete only if you	checked the bo	x on line 10 of F	Part I or if the o	rganization faile		er Part II. If
_	the organization fails t	to qualify under	the tests listed	below, please of	complete Part II.	.)	
	Section A. Public Support lendar year	T	T	T		T	T
	r fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1							
	membership fees received. (Do not include any "unusual grants.") .						
2	Gross receipts from admissions,						
	merchandise sold or services performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose		1		1		<u> </u>
3	Gross receipts from activities that are not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the organization's benefit and either paid						
	to or expended on its behalf						
5							
	furnished by a governmental unit to the organization without charge			1	<u> </u>		<u> </u>
6			I	I		I	I

7a	Amounts included on lines 1, 2, and								
	3 received from disqualified persons								
b	Amounts included on lines 2 and 3 received from other than disqualified								
	persons that exceed the greater of								
	\$5,000 or 1% of the amount on line 13 for the year.								
С	Add lines 7a and 7b								
8	Public support. (Subtract line 7c								
	from line 6.)								
	ection B. Total Support	ı	1		1				
	fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f)	Total	
9	Amounts from line 6								
10a	•								
	dividends, payments received on securities loans, rents, royalties and								
	income from similar sources								
b	Unrelated business taxable income (less section 511 taxes) from								
	businesses acquired after June 30,								
	1975.								
C	Add lines 10a and 10b. Net income from unrelated business								
11	activities not included on line 10b,								
	whether or not the business is								
12	regularly carried on. Other income. Do not include gain or						-		
12	loss from the sale of capital assets								
	(Explain in Part VI.)								
13	Total support. (Add lines 9, 10c, 11, and 12.)								
14	First 5 years. If the Form 990 is for t	he organization's	first, second, thir	d, fourth, or fifth	tax year as a section	on 501(c)(3) or	ganiza	tion, cl	neck
	this box and stop here							!	
Se	ection C. Computation of Public	Support Perce	ntage						
15	Public support percentage for 2023 (lin		-			15			
16	Public support percentage from 2022 S	Schedule A, Part I	II, line 15			16			
	ection D. Computation of Invest								
17	Investment income percentage for 20	•				17			
18	Investment income percentage from 2					18			
19a		_							
_	more than 33 1/3%, check this box and 33 1/3% support tests—2022. If the								10 ic
b	not more than 33 1/3%, check this box								10 15
20									
20	Private foundation. If the organization	on did not check a	i box on line 14, 1	19a, or 19b, check	k this box and see	Schedule A			2022
						Schedule A	(1011)	990)	2023
			Page 4						
			rage 4						
. .	L L A (5 000) 2002								
	dule A (Form 990) 2023							P	Page 4
Pai	t IV Supporting Organization (Complete only if you checked a		f Down I If you als	asked boy 12a of	Dowt I commiste C	Sections A and	D If wa		ادمط
	box 12b, of Part I, complete Se								
	12d, of Part I, complete Section			,,,	,				
Se	ection A. All Supporting Organiz	ations							
								Yes	No
1	Are all of the organization's supported								
	If "No," describe in Part VI how the sidescribe the designation. If historic an			tea. If aesignatea	by class or purpos	se,			
	2	J	., .				1		
2	Did the organization have any support 509(a)(1) or (2)? If "Yes," explain in F								
	described in section 509(a)(1) or (2).	rart vi now the of	rganization deteri	mineu that the su	pporteu organizatio	on was			
_					(a) = = = = = = = = = = = = = = = = = = =		2		
3а	Did the organization have a supported 3c below.	organization desc	cribed in section 5	ou1(c)(4), (5), or	(6)? If "Yes," answ	er lines 3b and	—		
							3a		
b	Did the organization confirm that each	supported organi		ndor costion FO1/	a)(4) (E) an (C) a	nd satisfied	I		
		500(5)(2)2 75 "X	zation qualified u	nder section 501(c)(4), (5), or (6) a	n mad - +'			
	the public support tests under section determination.	509(a)(2)? <i>If "Yes</i>	s," describe in Pa	rt VI when and h	ow the organization	n made the			
	determination.	509(a)(2)? If "Yes	s," describe in Pa	rt VI when and h	ow the organizatio	n made the	3b		
c	determination. Did the organization ensure that all su	509(a)(2)? <i>If "Yes</i> pport to such orga	s," describe in Pa anizations was us	rt VI when and h ed exclusively for	ow the organization section 170(c)(2)(n made the			
c	determination.	509(a)(2)? <i>If "Yes</i> pport to such orga	s," describe in Pa anizations was us	rt VI when and h ed exclusively for	ow the organization section 170(c)(2)(n made the	3b 3c		

4a	was any supported organization not organized in the officed states (noteign supported organization): It rest and it you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4-		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported	4a		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or	4b		
_	supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections			
С	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 .			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in	6		
,	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).	7		
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	90		
	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).			
	Schedule A	10b (Form	990)	2023
	School A	(. 0	, ,,,,	_0_0
	Page 5 ————			
Sche	dule A (Form 990) 2023		F	age 5
Par	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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		
b	A family member of a person described on 11a above?	11b		
С	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 VI .	11c		
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	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		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that			
	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization.	2		
Se	ction C. Type II Supporting Organizations			
			Yes	No

1	y of the directors or trustees of ol or management of the ported organization(s).	1					
S	ection D. All Type III Supporting Organizations						
					Yes	No	
1	Did the organization provide to each of its supported organizations, by the last day of tax year, (i) a written notice describing the type and amount of support provided durin Form 990 that was most recently filed as of the date of notification, and (iii) copies of	ng the the or	prior tax year, (ii) a copy of the				
	documents in effect on the date of notification, to the extent not previously provided?			1			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or el organization(s) or (ii) serving on the governing body of a supported organization? If "organization maintained a close and continuous working relationship with the supported	No," e	xplain in Part VI how the	2		<u> </u>	
3	By reason of the relationship described in line 2 above, did the organization's supporte	ed ora	anizations have a significant	_			
	voice in the organization's investment policies and in directing the use of the organization during the tax year? If "Yes," describe in Part VI the role the organization's supported	tion's i	ncome or assets at all times	3			
	ection E. Type III Functionally-Integrated Supporting Organizations						
1	Check the box next to the method that the organization used to satisfy the Integral Pa	art Tes	t during the year (see instruct	ions):			
	The organization satisfied the Activities Test. Complete line 2 below.						
	The organization is the parent of each of its supported organizations. Complete						
	The organization supported a governmental entity. Describe in Part VI how yo	ou supp	oorted a government entity (see	instru	ctions)		
2	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 ex	empt purposes of the		res	NO	
	supported organization(s) to which the organization was responsive? If "Yes," then in organizations and explain how these activities directly furthered their exempt purp responsive to those supported organizations, and how the organization determined the	Part Noses, I	/I identify those supported now the organization was				
	substantially all of its activities.			2a		<u> </u>	
	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.						
3							
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No", provide details in Part VI. 						
	b Did the organization exercise a substantial degree of direction over the policies, progr						
	supported organizations? If "Yes," describe in Part VI. the role played by the organizations	ation ii	n this regard.	3b			
			Schedule A	(Forn	ո 990)	2023	
	Page 6						
	Page 6						
Sch	edule A (Form 990) 2023				r)240 6	
	art V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations			Page 6	
1				/T) Se			
	instructions. All other Type III non-functionally integrated supporting organiza						
	Section A - Adjusted Net Income		(A) Prior Year		rent Yea onal)	r	
1	Net short-term capital gain	1		(0)	J. 14.7		
2		2					
3		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		rent Yea onal)	r	
1	tax year or assets held for part of year):	1					
	Average monthly value of securities	1a					
	b Average monthly cash balances	1b					

			_				+	
	Fair market value of other non-exempt-use assets		1c					
	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	e assets	2					
3	Subtract line 2 from line 1d		3					
4	Cash deemed held for exempt use. Enter 0.015 of line instructions).	3 (for greater amount, see	4					
5	Net value of non-exempt-use assets (subtract line 4 fr	rom 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						Curre	nt Year
1	Adjusted net income for prior year (from Section A, lin	ne 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, u temporary reduction (see instructions)	nless subject to emergency	6					
7	Check here if the current year is the organizatio instructions)	n's first as a non-functionally-i	ntegrate	ed Type	III su	porting o	rganization (s	ee
						Sche	dule A (Forr	n 990) 2023
		Dago 7						
		Page 7						
6.1	L L A (F 000) 2022							_
	tt V Type III Non-Functionally Integrated	LEOO/a)/2) Summorting			- (cc	ntinued)		Page 7
	rt V Type III Non-Functionally Integrated tion D - Distributions	i 509(a)(5) Supporting (Jigaiii	Zatioi	15 (00	intinucu)	Current Ye	aar
							current re	
1	Amounts paid to supported organizations to accomplish	avampt purpagag						
		exempt purposes			1			
	Amounts paid to perform activity that directly furthers e		organiza	ations,				
in	Amounts paid to perform activity that directly furthers excess of income from activity		organiza	ations,	2			
in		exempt purposes of supported		ations,				
in 3	excess of income from activity Administrative expenses paid to accomplish exempt pur	exempt purposes of supported		ations,	2			
3 4	excess of income from activity Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets	exempt purposes of supported proses of supported proses of supported organization		ations,	2 3 4			
3 4 5	excess of income from activity Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require	exempt purposes of supported roses of supported organization of supported organization of the provide details in Part VI)		ations,	2 3 4 5			
3 4 5	excess of income from activity Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets	exempt purposes of supported roses of supported organization of supported organization of the provide details in Part VI)		ations,	2 3 4			
3 4 5 6	excess of income from activity Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require	exempt purposes of supported roses of supported organization of supported organization of the provide details in Part VI)		ations,	2 3 4 5			
3 4 5 6 7 1 8	excess of income from activity Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require Other distributions (describe in Part VI). See instruction	exempt purposes of supported rooses of supported organization of supported organization of the supported organization of the supported organization	ons		2 3 4 5 6			
3 4 5 6 7 1 8	Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (<i>prior IRS approval require</i> Other distributions (<i>describe in Part VI</i>). See instruction of the control	exempt purposes of supported rooses of supported organization of supported organization of the supported organization of the supported organization	ons		2 3 4 5 6 7			
3 4 5 6 7 1 8 9	Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (<i>prior IRS approval require</i> Other distributions (<i>describe in Part VI</i>). See instruction Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to whe details in Part VI). See instructions	exempt purposes of supported rooses of supported organization of supported organization of the supported organization of the supported organization	ons		2 3 4 5 6 7 8			
3 4 5 6 7 1 8 9	Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require Other distributions (describe in Part VI). See instruction Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to whe details in Part VI). See instructions Distributable amount for 2023 from Section C, line 6	exempt purposes of supported rooses of supported organization of supported organization of the supported organization of the supported organization	ons		2 3 4 5 6 7 8 9 10	ons	(iii Distribu Amount f	itable
3 4 5 6 7 1 8 9	Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require Other distributions (describe in Part VI). See instruction Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to what details in Part VI). See instructions Distributable amount for 2023 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations	exempt purposes of supported rooses of supported organization of a provide details in Part VI) and the organization is responsich the organization is responsible to the organization is responsible t	ons	(ii	2 3 4 5 6 7 8 9 10	ons	Distribu	itable
3 4 5 6 7 1 8 9 10 L	Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require Other distributions (describe in Part VI). See instruction Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to what details in Part VI). See instructions Distributable amount for 2023 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions)	exempt purposes of supported rooses of supported organization of a provide details in Part VI) and the organization is responsich the organization is responsible to the organization is responsible t	ons	(ii	2 3 4 5 6 7 8 9 10	ons	Distribu	itable
3 4 5 6 7 1 8 9 10 L	Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require Other distributions (describe in Part VI). See instruction Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to what details in Part VI). See instructions Distributable amount for 2023 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 reasonable cause required explain in Part VI).	exempt purposes of supported rooses of supported organization of a provide details in Part VI) and the organization is responsich the organization is responsible to the organization is responsible t	ons	(ii	2 3 4 5 6 7 8 9 10	ons	Distribu	itable
3 4 5 6 7 1 8 9 10 1 2 (Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require Other distributions (describe in Part VI). See instruction Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to what details in Part VI). See instructions Distributable amount for 2023 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 reasonable cause required explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023: From 2018	exempt purposes of supported rooses of supported organization of a provide details in Part VI) and the organization is responsich the organization is responsible to the organization is responsible t	ons	(ii	2 3 4 5 6 7 8 9 10	ons	Distribu	itable
3 4 5 6 7 1 8 9 10 L C C S 3 E a b	Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require Other distributions (describe in Part VI). See instruction Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to what details in Part VI). See instructions Distributable amount for 2023 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 reasonable cause required explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023: From 2018 From 2019	exempt purposes of supported rooses of supported organization of a provide details in Part VI) and the organization is responsich the organization is responsible to the organization is responsible t	ons	(ii	2 3 4 5 6 7 8 9 10	ons	Distribu	itable
3 4 5 6 7 1 8 9 10 L C S 3 E a b c	Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require Other distributions (describe in Part VI). See instruction Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to what details in Part VI). See instructions Distributable amount for 2023 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 reasonable cause required explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023: From 2018 From 2019 From 2020	exempt purposes of supported rooses of supported organization of a provide details in Part VI) and the organization is responsich the organization is responsible to the organization is responsible t	ons	(ii	2 3 4 5 6 7 8 9 10	ons	Distribu	itable
3 4 5 6 7 1 8 9 10 L (S 3 E a b c d	Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require Other distributions (describe in Part VI). See instruction Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to what details in Part VI). See instructions Distributable amount for 2023 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 reasonable cause required explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023: From 2018 From 2020 From 2021	exempt purposes of supported rooses of supported organization of a provide details in Part VI) and the organization is responsich the organization is responsible to the organization is responsible t	ons	(ii	2 3 4 5 6 7 8 9 10	ons	Distribu	itable
3 4 5 6 7 1 8 9 10 L (Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require Other distributions (describe in Part VI). See instruction Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to what details in Part VI). See instructions Distributable amount for 2023 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 reasonable cause required explain in Part VI). Seceinstructions. Excess distributions carryover, if any, to 2023: From 2018 From 2020 From 2021	exempt purposes of supported rooses of supported organization of a provide details in Part VI) and the organization is responsich the organization is responsible to the organization is responsible t	ons	(ii	2 3 4 5 6 7 8 9 10	ons	Distribu	itable
3 4 5 6 7 1 8 9 10 L C S 3 E a b c c d e e f 1 g	Administrative expenses paid to accomplish exempt pur Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval require Other distributions (describe in Part VI). See instruction Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to what details in Part VI). See instructions Distributable amount for 2023 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 reasonable cause required explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023: From 2018 From 2020 From 2021 From 2021 From 2022	exempt purposes of supported rooses of supported organization of a provide details in Part VI) and the organization is responsich the organization is responsible to the organization is responsible t	ons	(ii	2 3 4 5 6 7 8 9 10	ons	Distribu	itable

Form 990 or 990-EZ	501(c)() (enter numb	ber) organization			
Filers of:	Section:				
Organization type (che	еск опе):				
INCORPORATED Organization type (cha	ook ono):			45-4773997	
Name of the organization SUNSHINE ON A RANNEY				Employer id	dentification number
(Form 990) Department of the Treasury Internal Revenue Service		tach to Form 990, 990-EZ, or <u>v.irs.gov/Form990</u> for the late			2023
Schedule B	Sch	nedule of Contribu	utors		OMB No. 1545-0047
efile Public Visual Ren	der Objectid: 2024232093493	306772 - Submission: 2024	-11-15		TIN: 45-4773997
		tware Version:			
		Software ID:			
Additional Data	1			R	eturn to Form
Additional Date					
			·	Schedule	e A (Form 990) 2023
Return Refere	nce		Explanation		
	Fa	acts And Circumstances Te	st		
Section A, li Part IV, Sec	ntal Information. Provide the explaines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9tion D, lines 2 and 3; Part IV, Section E, 6, and 8; and Part V, Section	9b, 9c, 11a, 11b, and 11c; Pa on E, lines 1c, 2a, 2b, 3a and	art IV, Section B, lines 1 3b; Part V, line 1; Part V	and 2; Part I\ , Section B, li	V, Section C, line 1; ne 1e; Part V
		Page 8			
e Excess from 2023.				Schedule	A (Form 990) (2023)
d Excess from 2022.					
b Excess from 2020.c Excess from 2021.					
7 Excess distributions 3j and 4c. 8 Breakdown of line 7:	s carryover to 2024. Add lines				
lines 3h and 4b from	ibutions for 2023. Subtract I line 1. If the amount is greater Part VI. See instructions.				
2023, if any. Subtractify the amount is greated as See instructions.	ibutions for years prior to at lines 3g and 4a from line 2. ater than zero, explain in Part VI .				
c Remainder. Subtract	lines 4a and 4b from line 4.				
b Applied to dilderdist	· ,				_
\$ a Applied to underdist	ributions of prior years				
4 Distributions for 2023	lines 3g, 3h, and 3i from line 3f. from Section D, line 7:				_
i Carryover from 2018 instructions)					
: C f 2016)		†		-

	_ ··· · · ·								
	4947(a)(1) nonexempt charitable trust not treated	as a private foundation							
	527 political organization								
Form 990-PF	501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation								
	anization is covered by the General Rule or a Special Rule . ion 501(c)(7), (8), or (10) organization can check boxes for both th	e General Rule and a Spec	cial Rule. See instructions.						
General Rule									
	rganization filing Form 990, 990-EZ, or 990-PF that received, durin r other property) from any one contributor. Complete Parts I and II ions.								
Special Rules									
under sect received fr	anization described in section 501(c)(3) filing Form 990 or 990-EZ tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (For om any one contributor, during the year, total contributions of the vIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	m 990 or 990-EZ), Part II, I	ine 13, 16a, or 16b, and that						
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, lit	rom any one contributor, erary, or educational						
during the If this box 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 year	ses, but no such contribution suring the year for an excluse This organization because	ons totaled more than \$1,000. ively religious, charitable, etc., it received nonexclusively						
990-EZ, or 990-PF	nization that isn't covered by the General Rule and/or the Special F), but it must answer "No" on Part IV, line 2, of its Form 990; or clopF, Part I, line 2, to certify that it doesn't meet the filing requireme F).	neck the box on line H of its	s Form 990-EZ						
For Paperwork Redu for Form 990, 990-EZ	action Act Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 990) (2023)						
	Page 2								
Schedule B (Form	990) (2023)	Pag	e 2						
Name of organization SUNSHINE ON A RAINCORPORATED			Employer identification number 45-4773997						
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
	rano, addices, and Eli 1.7	Total Contributions	Person						
RESTRICTED		- \$ RESTRICTED	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	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			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	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			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.) Schedule B (Form 990) (2023)
			Concadio 2 (i onii 600) (2020)
	Page 3		
Schedule E	3 (Form 990) (2023)		Page 3
Name of or		Employer identificati	
INCORPORA		45-4773997	
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.	(5)	
(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
		\$	
-			
(a)		(c)	

No. from Part I	(b) Description of noncash p	roperty giver	1		or estimate)	(d) Date received		
-					\$_			
(a) No. from Part I	(b) Description of noncash p	roperty giver	1	(c) FMV (or estimate) (See instructions)		(d) Date received		
-					\$			
(a) No. from Part I	(b) Description of noncash p	roperty giver	1	(c) FMV (or estima (See instructions		(d) Date received		
-					\$			
(a) No. from Part I			1		(c) or estimate) instructions)	(d) Date received		
-					\$			
	L					Schedule B (Form 990) (2023)		
		P	age 4 ————					
	B (Form 990) (2023)					Page 4		
Name of or SUNSHINE INCORPOR	ON A RANNEY DAY				Employer iden 45-4773997	tification number		
Part III	Exclusively religious, charitable, etc., contribute than \$1,000 for the year from any one contribute organizations completing Part III, enter the year. (Enter this information once. See instruction Use duplicate copies of Part III if additional spanning.)	ibutor. Completotal of excluse uctions.)	ete columns (a) th ively religious, ch	rough (e)	and the followin	g line entry. For		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descri	ption of how gift is held		
-								
	Transferee's name, address, and Z		(e) Transfer of gift Relationship of			of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descrip	ption of how gift is held		
-	Transferee's name, address, and Z		Transfer of gift	elationsh	ip of transferor to	o transferee		
(a)		<u>_</u>						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descri	ption of how gift is held		
-								
	Transferee's name, address, and Z		Transfer of gift R	elationsh	ip of transferor to	o transferee		

(a) No. fr Par	om	(b) Purpos	e of gift	 		(c) Use of g	ift	(c	l) Descrip	otion of how gift is held
-		Transferee's ı	name, address, and	d ZIP 4	(e	r) Transfer of		p of tra	insferor to	o transferee
									Sch	edule B (Form 990) (2023)
Ad	ditional D	ata								Return to Form
				S Softwa		are ID: rsion:				
efile	Public Visu	al Render	ObjectId: 202	42320934	1930	6772 - Sub	mission: 2024	-11-1	5	TIN: 45-4773997
(Form Departm	EDULE D 990) ent of the Treasury Revenue Service			he organiza 3, 9, 10, 11a ▶ Atta	ation a a, 11l ch to	answered " b, 11c, 11d, Form 990.		r 12b.	on.	OMB No. 1545-0047 2022 Open to Public Inspection
	e of the orga	•								ntification number
	HINE ON A RANN RPORATED	EY DAY						45-4	- 1773997	
Par		izations Mai	ntaining Donor	Advised F	unds	or Other	Similar Funds			
			nization answere		Form	990, Part I	V, line 6.			_
					(a)) Donor advis	sed funds		(b) Funds	and other accounts
		•								
		e of grants from	ns to (during year)					1		
	33 3	3	·							
5	Did the organiz	zation inform al	donors and donor at to the organization						funds are t	the Yes No
6	charitable purp	oses and not fo	grantees, donors, and the benefit of the	donor or dor	nor ad	lvisor, or for a	ny other purpose	n be use conferr	ed only for ing impern	nissible Yes No
Part		rvation Ease ete if the orga	ements. anization answere	d "Yes" on	Form	990, Part I	V, line 7.			
1	Purpose(s) of o	conservation ea	sements held by the	organizatio	n (che	eck all that ap	pply).			_
	Preservati	on of land for p	ublic use (e.g., recre	eation or edu	ıcatior	n) 🗌	Preservation of ar	histori	cally impoi	rtant land area
	Protection	of natural habi	tat				Preservation of a	certified	l historic s	tructure
	Preservati	on of open spa	ce							
2	Complete lines	2a through 2d	if the organization h	neld a qualifi	ed cor	nservation co	ntribution in the fo	orm of a		
		he last day of the f conservation of	easements					2a	Held a	t the End of the Year
			servation easement					2b		
	_	•	nents on a certified h					2c		
d	Number of cons	servation easen	nents included in (c) National Register	acquired aft				2d		
	Number of con tax year -	servation easer	nents modified, tran	sferred, rele	ased,	extinguished	, or terminated by	the org	ganization	during the
4	Number of stat	es where prope	erty subject to conse	rvation ease	ment	is located _			_	
			written policy regard rvation easements it					of viola	ations,	Yes No
6	Staff and volur	nteer hours dev	oted to monitoring,	inspecting, h	nandlir	ng of violation	ns, and enforcing	conserv	ation ease	ments during the year

7	Amount of expenses incurred in monitoring, i	nspecting, handling	of violations, and	enforcing o	conservati	on easemen	ts durin	ig the	year
8	Does each conservation easement reported o and section 170(h)(4)(B)(ii)?		•		-	n)(4)(B)(i)	☐ Ye	es '	□ No
9	In Part XIII, describe how the organization re balance sheet, and include, if applicable, the the organization's accounting for conservation	text of the footnote							
Par	t III Organizations Maintaining Col Complete if the organization answ				r Other	Similar A	ssets.		
1a	If the organization elected, as permitted under historical treasures, or other similar assets he Part XIII, the text of the footnote to its finance.	er FASB ASC 958, no eld for public exhibiti	ot to report in its re ion, education, or	evenue sta research ir	tement ai furthera	nd balance s nce of public	heet wo	orks of	f art, vide, in
b	If the organization elected, as permitted undenstorical treasures, or other similar assets he following amounts relating to these items:	er FASB ASC 958, to eld for public exhibiti	report in its rever ion, education, or	nue statem research ir	ent and b furthera	alance shee nce of public	t works service	of art ∍, pro\	., vide the
(i) Revenue included on Form 990, Part VIII, lin	ie 1				. 🕨 \$			
(i	i)Assets included in Form 990, Part X					🕨 \$			
2	If the organization received or held works of following amounts required to be reported un	ider FASB ASC 958 r	elating to these ite	ems:			ide the		_
а	Revenue included on Form 990, Part VIII, line					· -			
b	Assets included in Form 990, Part X					🕨 \$			
For I	Paperwork Reduction Act Notice, see the I	nstructions for Fo	rm 990.	Ca	t. No. 522	283D Sch	edule [D (Fo	rm 990) 20
			D 2						
			Page 2 ———						
Sche	dule D (Form 990) 2022								Page
Par	t III Organizations Maintaining Col	lections of Art,	Historical Trea	sures, o	r Other	Similar A	ssets ((contir	nued)
3	Using the organization's acquisition, accession items (check all that apply):	n, and other records	, check any of the	following t	hat are a	significant (use of it	s colle	ection
а	Public exhibition		d Loa	n or excha	inge prog	rams			
b	Scholarly research		e Oth	ner				<u>.</u>	
C	Preservation for future generations								
4	Provide a description of the organization's col Part XIII.	lections and explain	how they further	the organiz	zation's ex	empt purpo	se in		
5	During the year, did the organization solicit o assets to be sold to raise funds rather than to						☐ Ye	es	□ No
Pai	Escrow and Custodial Arrange Complete if the organization answ line 21.		rm 990, Part IV,	line 9, or	reporte	d an amou	nt on F	-orm	990, Part)
1a	Is the organization an agent, trustee, custodi								
	included on Form 990, Part X?						☐ Ye	:S	□ No
	75 110 11 11 11 11 11 11 11 11 11 11 11 11								
b c	If "Yes," explain the arrangement in Part XIII	•	_		1c	A	mount		
d	Beginning balance				1d				
e	Distributions during the year				1e				
f	Ending balance				1f				
	-					. L. III O			□ No
2a b	Did the organization include an amount on For If "Yes," explain the arrangement in Part XIII							:5	
		. Check here if the e	explanation has be	en provide	u III Fait /	(111			
Ра	rt V Endowment Funds. Complete if the organization answ	vered "Yes" on For	rm 990. Part IV.	line 10.					
		(a) Current year	(b) Prior year		ears back	(d) Three ye	ars back	(e) F	our years back
	Beginning of year balance							Щ	
	Contributions							ــــــ	
	Net investment earnings, gains, and losses							ــــــ	
	Grants or scholarships							—	
	Other expenditures for facilities and programs								
f	Administrative expenses	1		I				1	

_	- 1 6							
_	End of year balance							
2	Provide the estimated perce Board designated or quasi-e	-	nt year end b	alance (line 1g,	column	(a)) held as:		
a	Permanent endowment	indowinent -						
b	Term endowment	<u>.</u>						
С	The percentages on lines 2a		d equal 100%					
3a	Are there endowment funds				re held	and administered	for the	
	organization by:	·	_					Yes No
	(i) Unrelated organizations							3a(i)
b	(ii) Related organizations If "Yes" on 3a(ii), are the re							3a(ii)
4	Describe in Part XIII the inte	_	-					30
	t VI Land, Buildings,							
	Complete if the or	ganization answ	ered "Yes" o					X, line 10.
	Description of property	(a) Cost or oth (investme		b) Cost or other ba	sis (othe	r) (c) Accumulate	d depreciation	(d) Book value
	Land							
	Buildings							
	Leasehold improvements					+		
	Equipment				535,5	22	266,991	268,531
	Other	Column (d) must e	gual Form 990	0. Part X. colum			200,991	268,531
		(2)	4	, ,	. (-//		Sched	dule D (Form 990) 2022
(1) F		ganization answ ion of security or ing name of securi	ered "Yes" o	on Form 990, F	Part IV, (b) Book value	Cos	orm 990, Part) (c) Method of st or end-of-year	valuation:
(A) (B)								
(C)								
(D)								
(E)								
(F)								
(G)								
(H)								
Total	. (Column (b) must equal Form 99	00, Part X, col. (B) lin	e 12.)	•				
Parl	Investments - F Complete if the o			on Form 990, F	Part IV,	line 11c. See Fo	orm 990, Part	X, line 13.
		Description of inve			·	(b) Book value	(c) Me	ethod of valuation: d-of-year market value
(1)								,
(2)								
(3)								
(4)								

(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.) Part IX Other Assets.	>		
Complete if the organization answered 'Yes' on Form 990, P	art IV, line 11d. Se		
(a) Description (1)RIGTH-OF-USE-ASSETS-OPERATING LEASES			(b) Book value 356,470
(2)SECURITY DEPOSITS			9,399
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)		>	365,869
Part X Other Liabilities.			
Complete if the organization answered 'Yes' on Form 990, P	art IV, line 11e or 1		
1. (a) Description of liability			(b) Book value
(1) Federal income taxes LEASE LIABILITIES-OPERATING LEASES			379,765
OTHER PAYABLE			7,256
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)			387,021
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnot	te to the organization'	s financial statements th	
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check			
		Schedule	D (Form 990) 2022
Page 4			
Schedule D (Form 990) 2022			Page 4
Part XI Reconciliation of Revenue per Audited Financial Stat	 ements With Rev	enue per Return.	1 age 4
Complete if the organization answered 'Yes' on Form 990,	Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements		. 1	2,785,033
Amounts included on line 1 but not on Form 990, Part VIII, line 12:	la. I		
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		

d Other	r (Describe in Pa	art XIII.)		2d			
e Add li	ines 2a through	2d				. 2e	
3 Subtr	ract line 2e fron	ı line 1				3	2,785,033
4 Amou	unts included on	Form 990, Part VIII, line 12,	, but not on line 1:				
a Inves	stment expenses	s not included on Form 990, F	Part VIII, line 7b .	4a			
b Other	r (Describe in Pa	art XIII.)		4b			
c Add li	ines 4a and 4b					4c	
5 Total	revenue. Add li	nes 3 and 4c. (This must equ	ual Form 990, Part I, line 1	.2.)		5	2,785,033
Part XII		tion of Expenses per A				per Return	
1 Total	expenses and lo	osses per audited financial sta	atements			1	2,500,902
2 Amou	unts included on	line 1 but not on Form 990,	Part IX, line 25:				<u> </u>
a Donat	ted services and	d use of facilities		2a			
b Prior	year adjustmen	ts		2b			
c Other	r losses			2c			
d Other	r (Describe in Pa	art XIII.)		2d			
e Add li	ines 2a through	2d				2e	
3 Subtr	ract line 2e fron	n line 1				3	2,500,902
4 Amou	unts included on	Form 990, Part IX, line 25, b	out not on line 1:				
a Inves	stment expenses	s not included on Form 990, F	Part VIII, line 7b	4a			
b Other	r (Describe in Pa	art XIII.)		4b			
c Add li	ines 4a and 4b					4c	
5 Total	expenses. Add	lines 3 and 4c. (This must eq	qual Form 990, Part I, line	18.)		5	2,500,902
Part XII	I Supplem	ental Information				<u> </u>	
lines 2d ar	nd 4b; and Part	equired for Part II, lines 3, 5, XII, lines 2d and 4b. Also cor Reference	mplete this part to provide	any additions	Explana		le D (Form 990) 2022
	nd 4b; and Part	XII, lines 2d and 4b. Also cor	mplete this part to provide	any additions		Schedu	le D (Form 990) 2022
Additio	nd 4b; and Part Return onal Data	XII, lines 2d and 4b. Also con Reference	Software ID: Software Version:		Explana	Schedu	Return to Form
Additio	onal Data	XII, lines 2d and 4b. Also con Reference Reference ObjectId: 202	Software ID: Software Version: 2423209349306772	- Submiss	Explana on: 2024-1	Schedu	Return to Form TIN: 45-477399
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Addition	onal Data Dic Visual Re LE G	ender ObjectId: 202 Supple Fund Complete if the organiza	Software ID: Software Version: 2423209349306772 mental Information answered "Yes" on Formation entered more than \$15,00	- Submissi ation Re ning Act 1990, Part IV, II	on: 2024-1 garding ivities	Schedu	TIN: 45-477399 OMB No. 1545-0047
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efile Pub SCHEDUL Form 990	nd 4b; and Part Return Conal Data Colic Visual Report E G D) The Treasury The Service The organization	ender ObjectId: 202 Supple Fund Complete if the organizati Go to www.	Software ID: Software Version: 2423209349306772 mental Information answered "Yes" on Formition answered "Yes" on Formition entered more than \$15,00 Attach to Form 990 or	- Submissing Act	on: 2024-1 garding ivities nes 17, 18, or 19	Schedu 1-15 9, or if the	TIN: 45-477399 OMB No. 1545-0047 2023 Open to Public
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to be compensated at leas		_					
(i) Name and address of individual or entity (fundraiser)		y (iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No				
List all states in which the o	rganization is regis	tered or lice	🕨 ensed to s	olicit contributions or has	been notified it is exempt	from registration or	
licensing.		=======	ensed to s	=======================================		:::::::::::::::::::::::::::::::::::::::	
licensing.		=======	ensed to s	=======================================		:::::::::::::::::::::::::::::::::::::::	
licensing.		=======	ensed to s	=======================================		from registration or	
licensing.		=======	ensed to s	290-EZ. Cat. No		Schedule G (Form 990)	
licensing. Paperwork Reduction Act Note edule G (Form 990) 2023	ice, see the Instruct	cions for For	m 990 or 9	Page 2	. 50083H s	Schedule G (Form 990)	
Paperwork Reduction Act Not edule G (Form 990) 2023 art II Fundraising Ev	ice, see the Instruct	if the organt contribu	m 990 or 9	Page 2 answered "Yes" on Ford gross income on Forr	тт 990, Part IV, line 18 n 990-EZ, lines 1 and	Schedule G (Form 990) Page 18, or reported more	
Paperwork Reduction Act Note edule G (Form 990) 2023 Fundraising Event than \$15,000 of	ice, see the Instruct	tions for For	m 990 or 9	Page 2 answered "Yes" on For	. 50083H s	Page 15 or reported more 6b. List events with	
Paperwork Reduction Act Note edule G (Form 990) 2023 Fundraising Event than \$15,000 of	ice, see the Instruct	if the organt contribu	m 990 or 9 anization utions an	answered "Yes" on Ford gross income on Forr (b) Event #2 VARIOUS FUNDRAI	. 50083H Some series of the se	Page 15 or reported more 6b. List events with	
Paperwork Reduction Act Note edule G (Form 990) 2023 rt II Fundraising Ev than \$15,000 of	ice, see the Instruct	if the organt contribu	m 990 or 9 anization utions an	Page 2 answered "Yes" on Ford gross income on Form (b) Event #2	тт 990, Part IV, line 18 n 990-EZ, lines 1 and	Postported more 6b. List events with (ad) Total events (add col. (a) through	
Paperwork Reduction Act Note edule G (Form 990) 2023 Fundraising Event than \$15,000 of	ice, see the Instruct	if the organt contribu	m 990 or 9 anization utions an	answered "Yes" on Ford gross income on Forr (b) Event #2 VARIOUS FUNDRAI	. 50083H Some series of the se	Page 1 of the properties of th	
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Paperwork Reduction Act Note edule G (Form 990) 2023 Fundraising Event 11 Fundraising Event 15,000 of	ice, see the Instruct	if the organt contribu	m 990 or 9 anization utions an	answered "Yes" on Ford gross income on Forr (b) Event #2 VARIOUS FUNDRAI	. 50083H Some series of the se	Page 1 of the properties of th	
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Paperwork Reduction Act Note edule G (Form 990) 2023 Fundraising Event 11 Fundraising Event 15,000 of	ice, see the Instruct	if the organt contribu	m 990 or 9 anization utions an	answered "Yes" on Ford gross income on Forr (b) Event #2 VARIOUS FUNDRAI (event type)	m 990, Part IV, line 18 n 990-EZ, lines 1 and (c)Other events (total number)	Page 3, or reported more 6b. List events with (d) Total events (add col. (a) through col. (c))	
nedule G (Form 990) 2023 art II Fundraising Ev than \$15,000 of gross receipts gross gross receipts gross gross gross receipts gross gr	ice, see the Instruct	if the organt contribu	m 990 or 9 anization utions an at #1 GALA ype)	answered "Yes" on Ford gross income on Forr (b) Event #2 VARIOUS FUNDRAI (event type)	m 990, Part IV, line 18 n 990-EZ, lines 1 and (c)Other events (total number)	Page 3, or reported more 6b. List events with (d) Total events (add col. (a) throu	

u ___ m-person soncitations

	line 2) . `	593,382	42,588		635,970
	4 Cash prizes				
	5 Noncash prizes				
ses	6 Rent/facility costs				
Expenses	7 Food and beverages				
Ð	8 Entertainment				
Direct	9 Other direct expenses	70.070			70.070
Ω	10 Direct expense summary. Add lines 4 th	70,970			70,970
					70,970
Par	rt III Gaming. Complete if the orga		• • • • • • • • • • • • • • • • • • •	V line 19 or reported	565,000 I more than \$15,000
гаі	on Form 990-EZ, line 6a.	inization answered Te		v, line 15, or reported	1 more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col.(c))
Re	1 Gross revenue				
es	- Cook prizes				
ens	2 Cash prizes				
Expenses	3 Noncash prizes				
Direct	4 Rent/facility costs				
ក់	5 Other direct expenses				
		Yes %	Yes %	Yes %	
	6 Volunteer labor	No	□ No	No	
	L Divert				
	7 Direct expense summary. Add lines 2 th	nrough 5 in column (a)			
	8 Net gaming income summary. Subtract	line 7 from line 1, colum	n (d)	<u> </u>	
9	Enter the state(s) in which the organization				
a	Is the organization licensed to conduct ga If "No," explain:		these states?		Yes No
b					
10a b	Were any of the organization's gaming lice If "Yes," explain:				Yes No
•					
					J
				s	chedule G (Form 990) 2023
		Po	3003		
			age 5		
	edule G (Form 990) 2023				Page 3
11 12	Does the organization conduct gaming act Is the organization a grantor, beneficiary				Yes No
12	formed to administer charitable gaming?				· Yes No
13	Indicate the percentage of gaming activity	•			
a L	The organization's facility				
ь 14	An outside facility				
	·				
	Name				
	Address				
15a	Does the organization have a contract wit	h a third party from who	m the organization receive	e gaming	

	2000 the organ		conduct man a ama po	,	. ga2ao	בי	
	revenue? .					·	· Yes No
b	If "Yes," enter t	the amount of	gaming revenue receive	ed by the organizatio	n ▶ \$		0.00 0.10
_			etained by the third part				
_				·/ = +	·		
С	ir "Yes," enter i	name and addi	ress of the third party:				
	Name 🕨						
	Address 🕨 🗀						
	/ ladi coo F						
16	Gaming manag	er information	ı:				
	Name 🕨						
			. No. a				
	Gaming manag	er compensati	ion 🕨 \$				
	Description of s	services provid	led 🕨				
	Director/off	ficer	Employe	e	Independent contra	ctor	
17	Mandatory dist	ributions:					
а	Is the organization	tion required u	under state law to make	charitable distribution	ns from the gaming proce	eds to	
	retain the state	•					· Yes No
b	Enter the amou	ınt of distributi			other exempt organizations		
			mpt activities during th		p 5.		
Par					quired by Part I, line 2b	n columns (iii) and (v): and Part
1 (11					Also provide any additi		
		Reference	<u>, , , , , , , , , , , , , , , , , , , </u>				
	Return	Reference			Explanation		
						Schedule G	i (Form 990) 2023
Ad	Iditional D	ата					Return to Form
				Software ID:			
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- CI	- BI-I' - W	- I B I	01:1-17:1-202425	200240206772	C	4 4 5 1	TTN: 45 4772007
	e Public Visua	i Kender	Objectia: 202423	1209349306772 -	Submission: 2024-1	1-15	TIN: 45-4773997
_	EDULE M		None	cash Contri	butions		OMB No. 1545-0047
(For	m 990)		11011				2022
		► Complete	if the organizations a	nswered "Yes" on F	orm 990, Part IV, lines 2	29 or 30.	2023
		► Attach to I	Form 990.				
Departr	ment of the Treasury	► Go to www	<u>w.irs.gov/Form990</u> fo	r the latest informa	tion.		Open to Public
Internal	Revenue Service						Inspection
	of the organizat					Employer ider	ntification number
	HINE ON A RANNEY	DAY				45-4773997	
Pa	rt I Types	of Property					
	1,7,000		(a)	(b)	(c)		(d)
				er of contributions or	Noncash contribution	Metho	od of determining
			applicable it	ems contributed	amounts reported on	noncash o	contribution amounts
					Form 990, Part VIII, line		
1	Art—Works of ar	t			19	+	
	Art—Works of an Art—Historical tr					+	
	Art—Fractional ir					†	
	Books and public		. –			1	
	•			-		1	
	Clothing and hou	ısenola					
_	goods						
		ehicles					

	Intellectual property											
	Securities—Publicly traded .											
	Securities—Closely held stock .											
11	Securities—Partnership, LLC, or trust interests											
12	Securities—Miscellaneous											
13	Qualified conservation contribution—Historic											
14	structures											
15	Real estate—Residential .											
16	Real estate—Commercial											
17	Real estate—Other											
18	Collectibles											
19	Food inventory											
	Drugs and medical supplies .											
	Taxidermy											
	Historical artifacts											
	Scientific specimens											
	Archeological artifacts				1							
	Other • (_)	X		1		505,966						
	Other ▶ ()					303/300						
	Other ▶ ()											
	Other ► ()											
b 31 32a b	During the year, did the organization must hold for at least three years purposes for the entire holding pe If "Yes," describe the arrangement Does the organization have a gift of Does the organization hire or use contributions?	from the date riod? t in Part II. acceptance po third parties o	e of the initial c olicy that required organ	es the revie	w of any nonstan	equired to b dard contrib r sell noncas	e used outions sh	for exer	npt <u>:</u>	30a 31 32a		No No
33	If the organization didn't report ar	i amount in c	olumn (c) for a	type of prop	erty for which co	olumn (a) is	cnecke	ea,				
	describe in Part II.											
or Pa	aperwork Reduction Act Notice, see t	he Instruction	ns for Form 990.		Cat.	No. 51227J		Sch	edule M ((Form	990)	(2023)
				- Page 2								
				-								
												Page 2
Sched	dule M (Form 990) (2023)				v Part I lines 20	h 32h and	33 an	d wheth	er the o			
	Supplemental Informa is reporting in Part I, colu	ımn (b), the r	number of conti							h. Als	50	
	art II Supplemental Informa	ımn (b), the r	number of conti		number of item	s received, o				h. Als	50	
	is reporting in Part I, colucomplete this part for an	ımn (b), the r	number of conti			s received, o	or a co	mbinatio	on of bot			2022
	is reporting in Part I, colucomplete this part for an	ımn (b), the r	number of conti		number of item	s received, o	or a co	mbinatio				2023
	is reporting in Part I, colucomplete this part for an	ımn (b), the r	number of conti		number of item	s received, o	or a co	mbinatio	on of bot			2023)

Software ID: Software Version:

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ObjectId: 202423209349306772 - Submission: 2024-11-15

TIN: 45-4773997

OMB No. 1545-0047

SCHEDULE 0 Supplemental Information to Form 990 or 990-EZ (Form 990)

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 www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization SUNSHINE ON A RANNEY DAY

Department of the Treasury

Internal Revenue Service

LINE 2 FORM 990,

PAGE 6. PART VI, LINE 11B FORM 990. **Employer identification number**

INCORPORATED 45-4773997 Return **Explanation** Reference FORM 990. HOLLY RANNEY PETER RANNEY PRESIDENT CO-FOUNDER MARRIED PAGE 6, PART VI,

PAGE 6, REQUEST. PART VI. LINE 19

A DRAFT OF THE FORM 990 IS GIVEN TO THE BOARD OF DIRECTORS FOR REVIEW AND COMMENT

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

Cat. No. 51056K

THE ORGANIZATION MAKES ITS FORM 1023, FORM 990 AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON

Schedule O (Form 990) 2023

Additional Data Return to Form

> Software ID: **Software Version:**