## Form 990

## EXTENDED TO NOVEMBER 15, 2023 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public Inspection

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

and ending A For the 2022 calendar year, or tax year beginning Check if applicable C Name of organization D Employer identification number Address PRODUCTS THAT COUNT Name 46-4993127 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return 408-781-2046 419 14TH STREET 348,065. G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code Amende SAN FRANCISCO, CA 94103 H(a) Is this a group return F Name and address of principal officer: SOPHIE C. MOATTI Yes X No for subordinates? 419 14TH STREET, SAN FRANCISCO, CA H(b) Are all subordinates included? Yes No 94103 I Tax-exempt status: ■ 501(c)(3) ■ 501(c) ( ) (insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.PRODUCTSTHATCOUNT.COM H(c) Group exemption number K Form of organization: X Corporation Trust Association L Year of formation: 2015 M State of legal domicile: CA Other Part I Summary 1 Briefly describe the organization's mission or most significant activities: PRODUCTS THAT COUNT IS A COMMUNITY OF PRODUCT MAKERS, DATA-MINDED THINKERS AND INNOVATORS WHO if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 3 Number of voting members of the governing body (Part VI, line 1a) Š 0 4 Number of independent voting members of the governing body (Part VI, line 1b) Activities & 0 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 6 Total number of volunteers (estimate if necessary) 6 0 7 a Total unrelated business revenue from Part VIII, column (C), line 12 150. 0. b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** 1,347,915. 8 Contributions and grants (Part VIII, line 1h) 954,825. Revenue 9 Program service revenue (Part VIII, line 2g) 95,428. 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 82. 150. 0. 112,175. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,162,510. 1,348,065. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. 0. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 399,806. 508,658. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 673,217. 796,390. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,073,023. 1,305,048. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 89,487. 43,017. 19 Revenue less expenses. Subtract line 18 from line 12 ö **Beginning of Current Year** End of Year 1,902,499. 1,878,525. 20 Total assets (Part X, line 16) 1,146,143. 21 Total liabilities (Part X, line 26) 213,135. 689,364. Net assets or fund balances. Subtract line 21 from line 20 732,382. Part II | Signature Block 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 any knowledge. Signature of officer Date Sign SOPHIE C. MOATTI, PRESIDENT Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature MICHAEL W. CALLAHAN P00286130 SPICER JEFFRIES LLP Preparer Firm's name Firm's EIN 84-1210311 Firm's address 4601 DTC BOULEVARD, SUITE 700 Use Only DENVER, CO 80237 Phone no. (303) 753-1959

May the IRS discuss this return with the preparer shown above? See instructions

	le the annual action described by a set of Education and E	_	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	X	-
3	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	OR S
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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
5	during the tax year? If "Yes," complete Schedule C, Part II	4	-	1^
Š	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	A PE	x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
9	Schedule D, Part III	8		
•	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for		110	
	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	177	x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.	Adapte		
8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	200	E	
	Part VI	11a	Х	
t	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	300	10	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
•	bid 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		x
•	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	6.37		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	VE.
1	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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	Disc.		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1 11	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	54		
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15	-	X
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	97		1
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
19	1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes"	18		X
13	complete Schedule G, Part III	40	4	X
20=	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a	100	X
h	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	-	-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200	1.417	77.7
7575 100	domestic government on Part IX, column (A), line 1? // "Yes," complete Schedule I. Parts I and II	21		x

		-	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? # "Yes," complete Scheckile I, Parts I and III	22	_	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	1 700		100
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
94.	Did the committee have a true appeared based from with an extension of the committee of the	23	-	X
244	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			10
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
	Schoolule K. If "No," go to line 25a	24a	-	X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b	-	+
	any tax-avernot books?			
d	any tax-exempt bonds?  Did the organization and as an "on boball of issue for both and is	24c	-	+
25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Section 50 (c)(3), 50 (c)(4), and 50 (c)(4) and 50 (c)(5) (c)(6)	24d	-	-
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	1		x
b	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a	-	1
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		
		000		x
26	Schedule L, Part I  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b	-	1
	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	100		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	26		-
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		77	
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		-
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	None and	Contraction of the Contraction o	-
	"Yes, * complete Schedule L, Part IV	28a		x
ь	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? # "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	-	100	
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
(Day	Note: All Form 990 filers are required to complete Schedule O	38	X	
Par		AMERICA STATE		
-	Check if Schedule Q contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter 0- if not applicable	4		
	Enter the number of Forms W-2G included on line 1a. Enter 0 if not applicable 1b 0	4	10	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		samil/is	Livina
_	(gambling) winnings to prize winners?	1c	ليا	
23200	12-13-22	Form	990	2022

2021110	of \$1.50 miles have been also as the control of the	and a production of		T	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	mu denta commencial				. 100
	filed for the calendar year ending with or within the year covered by this return	2a	0	-	1 de comp	ulausia
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ms?		2b	X	3/
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a				
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?		4a		X
b	If "Yes," enter the name of the foreign country		- 1			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		-	dian	i de la constitución de la const	-
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	The state of gas made of that it was or is a party to a profibited tax shorter transaction			5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit				1.8
			.	ба		X
ь	If "Yes," did the organization include with every solicitation an express statement that such contribution were not tax deductible?		L	6b		3
7	Organizations that may receive deductible contributions under section 170(c).				-	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices provided to the payo	?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		. L	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				.8	
	to file Form 8282?		Ŀ	7c	111	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		-	-	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		. 🗀	7f		X
9	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g	Total .	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		1	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		-	-	-	77
_	sponsoring organization have excess business holdings at any time during the year?			8		X
9	Sponsoring organizations maintaining donor advised funds.		100	-	-	v
a				9a		X
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	**************************************	1,	ЭЬ		Δ
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	14001				- 154
a 5	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-		-	
11	Section 501(c)(12) organizations. Enter:		-			
	Gross income from members or shareholders	11a				
	Gross income from other sources. (Do not net amounts due or paid to other sources against	110	-			- 4
	amounts due or received from them.)	116				
120	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		٦,	2a		
		12b		-	-	-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>			T	
	Is the organization licensed to issue qualified health plans in more than one state?		1	13a		
-	Note: See the instructions for additional information the organization must report on Schedule O.					-
ь	Enter the amount of reserves the organization is required to maintain by the states in which the				- 1	
	organization is licensed to issue qualified health plans	136				
c	Enter the amount of reserves on hand	130				
	6/4 # 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		
15	is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			-		
16	is the organization an educational institution subject to the section 4968 excise tax on net investmen	t income?		16		X
	If "Yes," complete Form 4720, Schedule O.	Million				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		. L	17		
	If "Yes," complete Form 6069.				and desired.	
					DOD.	120221

PRODUCTS THAT COUNT 46-4993127 Form 990 (2022) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. b Enter the number of voting members included on line 1a, above, who are independent 0 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X 8a b Each committee with authority to act on behalf of the governing body? X 86 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 on Schedule O X 0 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Did the organization have local chapters, branches, or affiliates? X 10a 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? X 11a 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 X 12a X 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? If "Yes," describe X on Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? X 14 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? a The organization's CEO, Executive Director, or top management official X 15a b Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed <u>CA</u> 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website X Upon request Own website Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records SOPHIE C. MOATTI - 408-781-2046 419 14TH STREET, SAN FRANCISCO, CA 94103

Form 990 (2022)

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

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

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

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter 0 in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)
   who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and title	(B) Average	(do	not c	Pos	more	than	one	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	offi	cer ar	ss pe nd a d	rson irecto	is bot or/true	tee)	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) YANN KRONBERG	0.00		Г							
TREASURER		X		X				0.	0.	0
(2) SOPHIE C. MOATTI PRESIDENT	10.00	x		x				0.	0.	0
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	ALEX DESIGNATION					18	25	syst marker file	G. Permille, J.	
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(A) Name and title	(B) Average hours per week	ber	met e	Pos	more reon	than i	nan .	(D) Reportable compensation from	(E) Reportable compensation from related	arr	(F) Estimated amount of other compensation from the organization and relate organization	
	(list any hours for related organization below line)	Individual Evistee or Selector	lestitutional trustee	Officer	Kay employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1009-MISC/ 1099-NEC)	com fr orga		
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	Law E	1							A TOTAL CONTRACTOR OF THE PARTY	100,000		
1b Subtotal		1	L					0.	0.		_	0.
c Total from continuation sheets to Part V	/II, Section A	*****						0.	0.			0.
	not limited to	_				) uh		0.	0.			0.
<ol> <li>Total number of individuals (including but compensation from the organization</li> </ol>	not minted to t	11056	IISIC	u au	OVE	, w.	o i e	ceived more than \$100,0	ACC OF Tepca table			0
Comments of the Comments of th											Yes	No
3 Did the organization list any former office line 1a? If "Yes." complete Schedule J for:								nest compensated empl		3	-	x
4 For any individual listed on line 1a, is the s	um of reportal	ole co	mpe	ensa	tion	and	othe	er compensation from th	e organization	and the same		
and related organizations greater than \$15										4	e vine	X
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes." cor										5		x
Section B. Independent Contractors		5/										
1 Complete this table for your five highest co										tion fro	m	
the organization. Report compensation for (A)	the calendar	eare	ridir	gw	unc	wit	T	(B)	sar.	(C	)	
Name and business	address	N	ONE	3			4	Description of se	ervices (	Compen		n
			V.									
2 Total number of independent contractors (iii	ncluding but n	ot lin	nited	to t			ed a	above) who received mo	re than			
\$100,000 of compensation from the organic	zation	-		-	0					Form 9	90 1	2022

		Check if Schedule O contains a	- portod		(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
		The state of the s		tage til je om	Total revenue	function revenue	business revenue	from tax under sections 512 - 51
9 9	1 a	a Federated campaigns	1a					
	ь		1b			The second second second	3 3 10 4 1	
5 8	c		10					
2	d	d Related organizations	1d					
2 7	e	e Government grants (contributions)	1e					
5	f	f All other contributions, gifts, grants, and	10					
Ĕ		similar amounts not included above	# 1.	347,915.				
ä	0		1g \$					
and Other Similar Amounts	h	h Total. Add lines 1a-1f			1,347,915.			
		The state of the s		Business Code				
.	2 a	and the state of t		Dubilious Cour				
1	- b							
E S	c							
E 8	d		_	A 2 H 3 C A	and the second second	at their self-order to the self-order		
Be		A MILES NEEDS AND A STATE OF THE STATE OF TH						
Program Service Revenue		f All other program service revenue						
	-	g Total. Add lines 2a-2f				green en	(A), D(3),4-3-12-1 (mm-4)-1.	12 / 12 / 12 / 12 / 12 / 12 / 12 / 12 /
	3	Investment income (including divide				Marine (1907) (Section of the Section of the Sectio	4.4535, p. (5.556, 900, 900)	<u> </u>
10		other similar amounts)		CP-2016 TES	150.		150.	
	4	Income from investment of tax-exem			130.		130.	
	5	Royalties						
			i) Real	(ii) Personal		THE THE PROPERTY OF		Contract to
	6 -	a Gross rents 6a	, riou	(ii) i Gradinai			0.8960043.0000	
		b Less: rental expenses 6b						
		c Rental income or (loss) 6c						
		d Net rental income or (loss)		L	G11167846560728178957816		Marchenson V Science	
			ecurities	(ii) Other	grander and a second	17/14/19/15/27/75/9/15/	C/1990 SERVICES AND SET	98 51277 (900)
		assets other than inventory 7a		A 1 3				
		b Less: cost or other basis						
	100	and sales expenses 75					4 5 5 5 5	
2		c Gain or (loss) 7c						
ě		d Net gain or (loss)	1916			220240000000000000000000000000000000000	VIII JURIU ALVIETA SERVE	MATERIAL SAME AND
Other Revenue		a Gross income from fundraising events (r				ANGER MANIET STATESTON AND ANTICA	NO. PERMIT	
ŧ		including \$					2.4	
_		contributions reported on line 1c). So						
		Part IV, line 18						
	6	b Less: direct expenses			Sanisarana anakana			
		c Net income or (loss) from fundraising			E Protection			
	9 a	a Gross income from gaming activities	. See			Marian Augustin	100	THE PERSON NAMED IN
		Part IV, line 19	9a	- A -			14 70	
	b	b Less: direct expenses	100	R. a. Calu	Constant Anthropy (Constant)	- W-94/4 - 19 - 11 - 12 - 1		
- 1		Net income or (loss) from gaming act						
		a Gross sales of inventory, less returns		No The State of	1000 F000 44 F100 F100 F100 F100 F1	(MOTHER PORT TO SECURITY OF THE SECURITY OF TH		
		and allowances	10a	4				
	b	Less: cost of goods sold			A		100	
		Net income or (loss) from sales of inv					about the same	
				<b>Business Code</b>				
Miscellaneous Revenue	11 a			14.1				
튭	b	<b>.</b>						
8 S	c				A CHARLES			
P	d	All other revenue			A			
2		Total, Add lines 11a-11d						
-	12	Total revenue. See instructions			1,348,065.	0.	150.	0.

	Check if Schedule O contains a respons				X
	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				
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	W W W W W W W W		the straight to be	
Sec. 17	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				والمتكاف والمتعلق
5	Compensation of current officers, directors,			4 E	
	trustees, and key employees				
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	428,071.		428,071.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	46,879.		46,879.	
10	Payroll taxes	33,708.		33,708.	
11	Fees for services (nonemployees):			C - 18 / L	
а	Management	Andrew March			
	Legal			D. S. S. S. S. W. S. W. S.	
c	Accounting	3,900.		3,900.	
d	Lobbying	3,300.		1 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Professional fundraising services. See Part IV, line 17		Marie Ma	P17779200779897779997728753	
f	Investment management fees	and they be of the winds	VI.	Apple and the apple of the second	
	Other. (If line 11g amount exceeds 10% of line 25,	he mix officer desertor			
-	column (A), amount, list line 11g expenses on Sch O.)	463,839.	100	463,839.	
12	Advertising and promotion	219,977.		219,977.	
13	Office expenses	59,355.		59,355.	
14	Information technology	33,333.		33,333.	
15		Laurence Commission			
-0.01-00	Royalties				
16	Occupancy	16,701.		16,701.	Tax to the same of the same
17	Payments of travel or entertainment expenses	10,701.		10,701.	
18		PARTY OF THE PARTY SHAPE	Marine Marine Hereit		
	for any federal, state, or local public officials		201		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	The state of the s			
22	Depreciation, depletion, and amortization				
23	Insurance		1797/95/175077 7/10; 1547 M/17700	#1848107.138.5780.511943.888555.51555.5C.4.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	15 051	Carrier Survey Survey Survey	a transportation of the second	What had been been a
a	DUES & SUBSCRIPTIONS	15,951.		15,951.	
b	REPAIRS & MAINTENANCE	12,990.	and the second second	12,990.	4.3 (4.2)
C	OTHER BUSINESS EXPENSES	1,793.		1,793.	State V
d	MEALS	1,525.			1,525.
e	All other expenses	359.		359.	
25	Total functional expenses. Add lines 1 through 24e	1,305,048.	0.	1,303,523.	1,525.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here				

		Check if Schedule O contains a response or n	ote to any	line in this Part X	***********************		
					(A) Beginning of year		(B) End of year
	1				1,388,530.	1	1,131,998
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		[	504,648.	4	634,113
	5	Loans and other receivables from any current					
1		trustee, key employee, creator or founder, sub	ostantial o	ontributor, or 35%		NAME OF THE OWNER, OF THE OWNER, OF THE OWNER, OF THE OWNER, OWNER, OWNER, OWNER, OWNER, OWNER, OWNER, OWNER,	
		controlled entity or family member of any of the	nese perso	ns		5	
	6	Loans and other receivables from other disqu					
	1122.0	under section 4958(f)(1)), and persons describ	Angel Service T	6			
2	7	Notes and loans receivable, net			1	7	4.3.33
455613	8	Inventories for sale or use		8			
2	9	Dropaid synanase and deferred the				9	
	10a	Land, buildings, and equipment: cost or other				137	A Transport
1	1	basis. Complete Part VI of Schedule D		23,968.			
1	b	Less: accumulated depreciation		12,000.	9,321.	10c	11,968
0	11	Investments - publicly traded securities			and the second	11	
1	12	Investments - other securities. See Part IV, lin	e 11			12	
1	13	Investments - program-related. See Part IV, lin			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	0.	15	100,446		
	16	Total assets, Add lines 1 through 15 (must e	1,902,499.	16	1,878,525		
	17	Accounts payable and accrued expenses		13,097.	17	9,344	
	18	Grants payable	ewe have a	18			
	19	Deferred revenue			Children and Children	19	valore a series de
1	20	Tax-exempt bond liabilities			and the second second	20	
	21	Escrow or custodial account liability. Complet	te Part IV	f Schedule D		21	
	22	Loans and other payables to any current or fo	ormer offic	er, director,			
		trustee, key employee, creator or founder, sul	ostantial c	ontributor, or 35%			
BOILINGS	French	controlled entity or family member of any of the	nese perso	ns	and the second	22	
5	23	Secured mortgages and notes payable to unr	elated thir	d parties	Sa I	23	
	24	Unsecured notes and loans payable to unrela	ted third p	arties		24	
1	25	Other liabilities (including federal income tax,	payables t	o related third			
		parties, and other liabilities not included on lin	nes 17-24).	Complete Part X			
		of Schedule D			1,200,038.	25	1,136,799
	26	Total liabilities. Add lines 17 through 25	******		1,213,135.	26	1,146,143
		Organizations that follow FASB ASC 958, o	heck here	X			
		and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions			689,364.	27	732,382
	28	Net assets with donor restrictions				28	
2		Organizations that do not follow FASB ASC	958, che	k here			
2		and complete lines 29 through 33.					
1	29	Capital stock or trust principal, or current fund	is			29	
1		Paid in or capital surplus, or land, building, or				30	
		Retained earnings, endowment, accumulated				31	
Met Assets of Fully Dailer		Total net assets or fund balances			689,364.		732,382
.		Total liabilities and net assets/fund balances			1,902,499.		1,878,525

75	m 990 (2022) PRODUCTS THAT COUNT	46-45	993127	Page	e 12
11	art XI Reconciliation of Net Assets				
_	Check if Schedule O contains a response or note to any line in this Part XI	· · · · · · · · · · · · · · · · · · ·			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,348	3,06	55.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,305		
3	Revenue less expenses, Subtract line 2 from line 1	3		,01	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	689	,36	4.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	8			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	732	2,38	11.
1		01		Yes	No
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	9	-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.			
22			Street, Square, Square		
	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis  Both consolidated and separate basis	I on a			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?	lona			x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	lona			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	lona			
ь	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis	l on a			
ь	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	on a  basis,  audit,	2b		
ь	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	on a basis,	2b		
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on Sch	on a basis,	2b		
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	l on a  basis,  audit,  edule O.	2b		X
b c	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	l on a  basis,  audit,  edule O.	2b		
b c	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	e basis, e audit, edule O.	2b		X