**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.

Open to Public

Department of the Treasury Internal Revenue Service

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

ntern	ial Reve	nue Service do to www.iis.gov/Formago for instructions and the late.	Jt IIII	ormation.		inspection			
A F	or the	e 2024 calendar year, or tax year beginning and ending	<u> </u>						
	heck if	C Name of organization		D Employer iden	tific	cation number			
а	pplicabl	e:							
	Addre chang	SS NONPROFIT NEW YORK, INC.							
	Name chang	e Doing business as		13-32164	8 0				
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)  Room/s	suite	E Telephone num	her	,			
	Final	320 EAST 43RD STREET 3RD FLOOR	Juito	212-502-41					
	return termir ated		G Gross receipts \$		1,519,686.				
	Amen	ded NEW YORK NY 10018		- ×					
	return Applio	,		H(a) Is this a group return					
	tion pendi	F Name and address of principal officer. The golden and address of principal officer.		for subordinates? Yes X No					
				<b>H(b)</b> Are all subordinate					
			527	•		list. See instructions			
_	Vebsi	· · · · · · · · · · · · · · · · · · ·		H(c) Group exemp	$\neg$				
<u>( F</u>	orm of		Year o	f formation: 1984	N	1 State of legal domicile: NY			
Pa	rt I	Summary							
a)	1	Briefly describe the organization's mission or most significant activities: TO CHAMPION	AND	STRENGTHEN					
& Governance		NONPROFITS THROUGH CAPACITY BUILDING AND ADVOCACY TO CULTIVATE A							
na L	2	Check this box if the organization discontinued its operations or disposed of m	nore t	han 25% of its net	ass	ets.			
Š	3	Number of voting members of the governing body (Part VI, line 1a)		L	3	15			
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	15			
οğ	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)			5	12			
Activities	ı	Total number of volunteers (estimate if necessary)			6	23			
흦		Total unrelated business revenue from Part VIII, column (C), line 12			7a	0.			
ĕ		Net unrelated business taxable income from Form 990-T, Part I, line 11			7b	0.			
		The difference business taxable moome from our firm our firm and firm into the	T	Prior Year	•	Current Year			
	8	Contributions and grants (Part VIII, line 1h)		771,20	2	907,890.			
ne	l			486,38	$\overline{}$	479,031.			
Revenue	l	, , , , , , , , , , , , , , , , , , , ,		29,30	$\overline{}$	32,762.			
Be	l .	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		78,85	$\overline{}$	100,003.			
	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-		-				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	1,365,74	$\overline{}$	1,519,686.			
	l	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.	0.			
	l	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.			
es	l .	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,142,06	$\overline{}$	1,281,492.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			٥.	0.			
ă	l .	Total fundraising expenses (Part IX, column (D), line 25) 178,887.							
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		660,73	$\rightarrow$	560,282.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,802,80	$\overline{}$	1,841,774.			
		Revenue less expenses. Subtract line 18 from line 12		-437,05	5.	-322,088.			
let Assets or ind Balances			Beg	inning of Current Ye	ar	End of Year			
sets	20	Total assets (Part X, line 16)		1,942,41	9.	1,607,322.			
ASS	21	Total liabilities (Part X, line 26)		1,104,52	2.	1,078,168.			
₽.E	22	Net assets or fund balances. Subtract line 21 from line 20		837,89	7.	529,154.			
Pa	ırt II	Signature Block							
Jnde	er pena	 ulties of perjury, I declare that I have examined this return, including accompanying schedules and sta	temer	its, and to the best of	my	knowledge and belief, it is			
	•	ct, and complete. Declaration of preparer (other than officer) is based on all information of which prep		•	,	,			
Sign		Signature of officer		Date					
_									
ler	G.	Type or print name and title							
			Da	ate Check		PTIN			
) o : A		Preparer's name  ALEXANDER LAZZARUOLO  Preparer's signature  Alexander Lazzaruolo  Alexander Lazzaruolo		6/27/2025					
aid		A Copusitive Last total Co		1 1 2000 2000					
	arer			Firm's EIN		13-3628255			
JSE	Only	Firm's address ONE BATTERY PARK PLAZA, 7TH FL.			.1.0	661 7777			
		NEW YORK, NY 10004		I Phone no. 2	7 T Z	-661-7777			

No

X Yes

13-3216408

Ра	Check if Schedule O contains a response or note to any line in this Part III	Х
1	Briefly describe the organization's mission: SEE SCHEDULE O.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
•	If "Yes," describe these new services on Schedule O.	Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L Yes A No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured to Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$	443,796.
4b	(Code:) (Expenses \$344,945. including grants of \$) (Revenue \$	6,367.)
<b>4c</b>	(Code:) (Expenses \$332,042. including grants of \$) (Revenue \$ CAPACITY BUILDING - SEE SCHEDULE O	102,968.
4d		332.)
4e	Total program service expenses 1,304,869.	Form <b>990</b> (2024)
		Form <b>330</b> (2024)

13-3216408

# Form 990 (2024) NONPROFIT NEW YORK, INC. 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		х
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? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
Ŭ	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	٣		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7		-		<del></del>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
	Schedule D, Part III	8		
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		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.			
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	Х	
b	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? If "Yes," complete Schedule D, Part VII	11b		Х
С	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		Х
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? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	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		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the appropriation projection of the construction of the Light of Object	14a		х
b	Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	<u></u>		
	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	- 1.5		
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<del></del>
10		16		X
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	10		<del></del>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		x
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<del>                                     </del>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4.0		x
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		├^
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<del> </del>
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		X

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Form	1990 (2024) NONPROFIT NEW YORK, INC. 13-3216	408	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)		T	T
00	Did the executation report more than \$5,000 of grants or other assistance to be for demostic individuals on		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	. 22		<del></del>
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
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		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
	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?			
	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? If "Yes," complete Schedule L, Part I	. 25a		Х
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? If "Yes," complete			
	Schedule L, Part I	25b		Х
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		Х
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? If "Yes," complete Schedule L, Part III	27		Х
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? If			
	"Yes," complete Schedule L, Part IV			Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	. 28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV			X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	. 29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32		Х
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		Х
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		Х
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?			₩
07	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	0.7		<sub>v</sub>
00	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?	00	х	
Pa	Note: All Form 990 filers are required to complete Schedule O	.   38	Λ	
. <b>u</b>	Check if Cahadula Coordina a vacanana av nata ta anu lina in this Part V			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	Yes	No
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	14	162	140
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  1b	0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners?

Form 990		13-3210400	Page
Part V	Statements Regarding Other IRS Filings and Tax Complian	ice (continued)	

			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return 2a 12									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х						
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	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		Х						
b	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).									
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
С	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?									
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
	any contributions that were not tax deductible as charitable contributions?	6a		X						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7с		Х						
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		v						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X						
Ť	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?									
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/A N/A	_						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/A							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  N/A	8								
9	sponsoring organization nave excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.	0								
а	Did the sponsoring organization make any taxable distributions under section 4966?  N/A	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  N/A	9b								
10	Section 501(c)(7) organizations. Enter:	0.0								
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b									
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders N/A 11a									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
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									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a								
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans									
	Enter the amount of reserves on hand									
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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		Х						
4.0	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 investment income?	16		X						
47	If "Yes," complete Form 4720, Schedule O.									
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?  N/A	47								
		17								
	If "Yes," complete Form 6069.									

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	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	_	,	2 100 1	espor	36
						Х
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	1	5		
	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	1b	1	5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	any other			
	officer, director, trustee, or key employee?			2		х
3	Did the organization delegate control over management duties customarily performed by or under the					
	of officers, directors, trustees, or key employees to a management company or other person?			3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		Х
6	Did the organization have members or stockholders?			6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?			7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					
	persons other than the governing body?			7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, 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	/ befo	e filing the form?	11a	Х	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," a	escribe			
	on Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	l by in	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	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 arrangen	nent w	ith a			
	taxable entity during the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its p	articipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NY		_,			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990	-T (section 501(c)(3)	s only)	availa	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain		•			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict (	of interest policy, an	d finan	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks an	d records			
	JACQUELINE EBANKS, C/O NONPROFIT NEW YORK - 212-502-4191 320 EAST 43RD STREET, 3RD FLOOR, NEW YORK, NY 10018					
	ON THE TOUR SINDIF, SER INCOM, MEM TOWN, MI TOUTO					

# 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.

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

- 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			one	(D) Reportable	<b>(E)</b> Reportable	(F) Estimated
	hours per	box	, unle	ss per	son is	s both	n an	compensation	compensation	amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) MEG BARNETTE	40.00									
PRESIDENT & CEO - ENDED 11/2024		Х		Х				207,408.	0.	10,063.
(2) JENNIFER DODD	40.00									
VICE PRESIDENT, FINANCE & OPS						Х		115,858.	0.	52,541.
(3) SONALI JHURANI	40.00									
VICE PRESIDENT, DEV. & COMM.						Х		112,522.	0.	27,365.
(4) JACQUELINE EBANKS	40.00									
INT. PRESIDENT & CEO- STARTED 11/202		Х		Х				38,801.	0.	3,729.
(5) LISA PILAR COWAN	7.00									
CO-CHAIR		Х		Х				0.	0.	0.
(6) RICHARD SOUTO	2.00									
VICE-CHAIR		Х		Х				0.	0.	0.
(7) KAMESH MOOLA	2.00									
TREASURER		Х		Х				0.	0.	0.
(8) MERIDITH MASKARA	2.00									
SECRETARY		Х		Х				0.	0.	0.
(9) CAROL BULLOCK	2.00									
DIRECTOR		Х						0.	0.	0.
(10) GARY BAGLEY	2.00									
DIRECTOR		Х						0.	0.	0.
(11) ALEJANDRA DUQUE CIFUENTES	2.00									
DIRECTOR		Х						0.	0.	0.
(12) JILL BREGENZER	2.00									
DIRECTOR		Х						0.	0.	0.
(13) MORGAN MONACO	2.00									
DIRECTOR		Х						0.	0.	0.
(14) TUHINA DE O'CONNOR	2.00									
DIRECTOR		Х						0.	0.	0.
(15) BROOKE RICHIE-BABBAGE	2.00									
DIRECTOR		Х						0.	0.	0.
(16) AMARAH SEDREDDINE	2.00									
DIRECTOR		Х						0.	0.	0.
(17) JOANNE SMITH	2.00									
DIRECTOR		Х						0.	0.	0.

432007 12-10-24

Form 990 (2024) NONPROFIT	NEW YORK, INC	•							13-321640	Page <b>o</b>
Part VII   Section A. Officers, Directors, To	rustees, Key Em	oloy	ees,	and	Hig	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)					Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional 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
(18) SARAH (BJ) SUNG	2.00									
DIRECTOR		Х						0.	0.	0.
(19) MARIKO TADA	2.00									
DIRECTOR		Х						0.	0.	0.
(20) MURRAY ABELES	2.00									
DIRECTOR- STARTED 6/2024		Х						0.	0.	0.
(21) LOLLY BOWEAN	2.00									
DIRECTOR- STARTED 6/2024		Х						0.	0.	0.
(22) CHITRA AIYAR	2.00									
DIRECTOR- STARTED 6/2024		Х						0.	0.	0.
(23) KEMI ILESANMI	2.00									
DIRECTOR- STARTED 6/2024		Х						0.	0.	0.
(24) RICH LEIMSIDER	2.00									
DIRECTOR- STARTED 6/2024		Х						0.	0.	0.
(25) ROBERT ACTON	2.00									
DIRECTOR- ENDED 6/2024		х						0.	0.	0.
(26) IAN BENJAMIN	2.00									
DIRECTOR- ENDED 3/2024		Х						0.	0.	0.
1b Subtotal								474,589.	0.	93,698.
c Total from continuation sheets to Part	t VII, Section A							0.	0.	0.
d Total (add lines 1b and 1c)								474,589.	0.	93,698.
2 Total number of individuals (including by								saired mare than \$100	000 of roportable	

compensation from the organization

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

#### **Section B. Independent Contractors**

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

(A) Name and business address	NONE	(B) Description of services	(C) Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

SEE PART VII, SECTION A CONTINUATION SHEETS

(A) Name and title  Average hours per week (list any hours for related organizations below line)  (27) YESENIA MATA  (28) CHLOE BREYER  (A)  (B)  Average hours (check all that apply)  Average hours per week (list any hours for related organizations below line)  (28) CHLOE BREYER  (B)  (C)  Reportable compensation from the companization (w-2/1099-MISC)  (C)  Reportable compensation from the organization (w-2/1099-MISC)  (W-2/1099-MISC)  (B)  (C)  Reportable compensation from related organization (w-2/1099-MISC)  (W-2/1099-MISC)  (D)  Reportable compensation from related organization (w-2/1099-MISC)  (W-2/1099-MISC)  (O)  Reportable compensation from related organization (w-2/1099-MISC)  (W-2/1099-MISC)  (D)  Reportable compensation from related organization (w-2/1099-MISC)  (W-2/1099-MISC)  (O)  Reportable compensation from related organization (w-2/1099-MISC)  (W-2/1099-MISC)  (O)  Reportable compensation from related organization (w-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)  (D)  Reportable compensation from related organization (w-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)  (D)  Reportable compensation from related organization (w-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)	Form 990 NONPROFIT NEW YORK, INC. 13-3216408											
(A) Name and title    A	Part VII Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, aı	nd H	lighe	est (	Compensated Employe	es (continued)		
Name and title    Average   Position   Posit				, ,	(F)							
Nours   Check all that apply)   Compensation   Compensation   Compensation   Check all that apply)   Experiment   Compensation   Check all that apply)   Experiment   Compensation   Check all that apply)   Experiment   Check all that apply   Check all that apply)   Experiment   Check all that apply   Experiment   Check all that apply												
Park   Week   (list any   Park   Week   W		_	(cl	(check all that apply)				ly)				
(list any bullows for related organizations   1		per					Ė		1		other	
(27) YESENIA MATA							yee				compensation	
(27) YESENIA MATA			ector				eg m			(W-2/1099-MISC)		
(27) YESENIA MATA			ordir	9.			ated e		(W-2/1099-MISC)			
(27) YESENIA MATA			stee	truste		ao	ben S					
(27) YESENIA MATA			al tru	onal		ploye	Com				organizations	
(27) YESENIA MATA			divid	stitut	ficer	y em	ghest	rmer				
DIRECTOR- ENDED 12/2024	T	· · ·	드	드	10	Ž,	王	Fc				
(28) CHLOE BREYER  2.00 X  0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		2.00							_	_	_	
DIRECTOR - ENDED 6/2024			Х						0.	0.	0.	
		2.00										
Total to Part VII, Section A, line 1c	DIRECTOR- ENDED 6/2024		Х						0.	0.	0.	
Total to Part VII, Section A, line 1c												
Total to Part VII, Section A, line 1c												
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Total to Part VII, Section A, line 1c												
Total to Part VII, Section A, line 1c												
Total to Part VII, Section A, line 1c												
	Total to Part VII, Section A, line 1c											

Form 990 (2024) NONPROFIT 1
Part VIII Statement of Revenue NONPROFIT NEW YORK, INC.

			Check if Schedule O contain	s a response	or note to any lin	e in this Part VIII			
					<b>,</b>	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts									
ية ق			Fundraising events						
ffs,			Related organizations						
ig ig									
ons,			Government grants (contribution						
utic		T	All other contributions, gifts, grants,		907 890				
ë			similar amounts not included above		907,890.				
o d		_	Noncash contributions included in lines 1a-1			907,890.			
Oa		n	Total. Add lines 1a-1f		Business Code	307,030.			
			MEMBERGHIE DHEG		900099	402 401	422 401		
<u>ic</u> e	2	_	MEMBERSHIP DUES		-	423,481.	423,481.		
er Je		b	CONFERENCE		900099	55,550.	55,550.		
n S		С							
irar 3ev		d							
Program Service Revenue		е							
Δ.			All other program service revenu						
_		g	Total. Add lines 2a-2f			479,031.			
	3		Investment income (including div						
						32,762.			32,762.
	4		Income from investment of tax-ex	kempt bond p	proceeds				
	5		Royalties						
				(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
		b	Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
		d	Net rental income or (loss)						
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory <b>7a</b>						
		b	Less: cost or other basis						
ne			and sales expenses <b>7b</b>						
her Revenue		С	Gain or (loss)7c						
Re			Net gain or (loss)	<u></u>					
ē			Gross income from fundraising event						
₹			including \$	of					
			contributions reported on line 1c	). See					
			Part IV, line 18	8a	1				
		b	Less: direct expenses						
			Net income or (loss) from fundrai						
			Gross income from gaming activ	_					
			Part IV, line 19	9a	ı				
		b	Less: direct expenses						
			Net income or (loss) from gaming						
			Gross sales of inventory, less ret						
			and allowances	a					
		b	Less: cost of goods sold		o				
			Net income or (loss) from sales of						
			,		Business Code				
snc	11	а	OTHER INCOME		900099	99,932.	99,932.		
Miscellaneous Revenue	-		CARES ACT - ERC		900099	71.			71.
ella		c							
<u>is</u>			All other revenue						
Σ			Total. Add lines 11a-11d			100,003.			
	12		Total revenue. See instructions			1,519,686.	578,963.	0.	32,833.

432009 12-10-24

13-3216408

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 respons	se or note to any line in the (A)	nis Part IX(B)	(C)	(D)
	nclude amounts reported on lines 6b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	ants and other assistance to domestic organizations domestic governments. See Part IV, line 21				
<b>2</b> Gra	ants and other assistance to domestic				
	ants and other assistance to foreign				
	ganizations, foreign governments, and foreign				
•	lividuals. See Part IV, lines 15 and 16				
	nefits paid to or for members				
	mpensation of current officers, directors,				
	stees, and key employees	260,001.	187,221.	41,388.	31,392
	mpensation not included above to disqualified	,	,	,	,
	rsons (as defined under section 4958(f)(1)) and				
-	sons described in section 4958(c)(3)(B)				
	her salaries and wages	736,550.	530,339.	117,253.	88,958
	nsion plan accruals and contributions (include		-	·	
	tion 401(k) and 403(b) employer contributions)	38,345.	27,645.	6,093.	4,607
	her employee benefits	177,005.	127,614.	28,125.	21,266
	yroll taxes	69,591.	50,172.	11,058.	8,361
	es for services (nonemployees):				
<b>a</b> Ma	nagement				
	gal				
	counting	88,258.	52,821.	34,252.	1,185
	bbying				
	ofessional fundraising services. See Part IV, line 17				
f Inv	restment management fees				
	her. (If line 11g amount exceeds 10% of line 25,				
colu	umn (A), amount, list line 11g expenses on Sch O.)	162,422.	97,208.	63,034.	2,180
<b>12</b> Ad	vertising and promotion	346.		346.	
	fice expenses	4,227.	1,771.	2,203.	253
	ormation technology	34,395.	22,950.	8,601.	2,844
	yalties				
	cupancy	105,811.	77,215.	16,245.	12,351
	avel	13,348.	7,535.	5,813.	
<b>18</b> Pay	yments of travel or entertainment expenses				
for	any federal, state, or local public officials				
1 <b>9</b> Co	nferences, conventions, and meetings				
20 Inte	erest				
21 Pay	yments to affiliates				
22 De <sub>l</sub>	preciation, depletion, and amortization	1,564.		1,564.	
23 Ins	surance				
abo line	ner expenses. Itemize expenses not covered bye. (List miscellaneous expenses on line 24e. If a 24e amount exceeds 10% of line 25, column (A), ount, list line 24e expenses on Schedule 0.)				
	RVICES AND EVENTS	69,812.	65,902.	2,259.	1,651
b OTI	HER	43,602.	33,486.	8,298.	1,818
c DUI	ES AND SUBSCRIPTIONS	36,497.	22,990.	11,486.	2,021
	other expenses				
	cal functional expenses. Add lines 1 through 24e	1,841,774.	1,304,869.	358,018.	178,887
	nt costs. Complete this line only if the organization	, . == , = .	, ,	, , , , , , , , , , , , , , , , , , ,	= : ; ; = : :
	orted in column (B) joint costs from a combined				
	ucational campaign and fundraising solicitation.				
	eck here if following SOP 98-2 (ASC 958-720)				

# Form 990 (2024) Part X | Balance Sheet

Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to any	line in this Part X			
					<b>(A)</b> Beginning of year		(B) End of year
	1					1	
	2				916,768.	2	836,408
	3				250,000.	3	34,888
	4	Accounts receivable, net			4,661.	4	3,28
	5	Loans and other receivables from any curren	nt or former	officer, director,			
		trustee, key employee, creator or founder, su	ubstantial co	ontributor, or 35%			
		controlled entity or family member of any of	these perso	ns		5	
	6	Loans and other receivables from other disq	ualified pers	ons (as defined			
		under section 4958(f)(1)), and persons descri				6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ĕ	9	Prepaid expenses and deferred charges			33,710.	9	31,92
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D	10a	33,357.			
	b	Less: accumulated depreciation	10b	23,808.	4,113.	10c	9,549
	11	Investments - publicly traded securities			304,595.	11	327,47
	12	Investments - other securities. See Part IV, li			12		
	13	Investments - program-related. See Part IV, li		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	428,572.	15	363,79		
	16	Total assets. Add lines 1 through 15 (must of	1,942,419.	16	1,607,32		
	17	Accounts payable and accrued expenses	18,961.	17	57,51		
	18	Grants payable		18			
	19	Deferred revenue			161,635.	19	178,38
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
ဂ္ဂ	22	Loans and other payables to any current or f	ormer office	r, director,			
IIIe		trustee, key employee, creator or founder, su	ubstantial co	ontributor, or 35%			
Liabilities		controlled entity or family member of any of	these perso	ns		22	
5	23	Secured mortgages and notes payable to un	related third	parties		23	
	24	Unsecured notes and loans payable to unrela	ated third pa	arties		24	
	25	Other liabilities (including federal income tax	, payables t	related third			
		parties, and other liabilities not included on I	ines 17-24).	Complete Part X			
		of Schedule D	923,926.	25	842,260		
	26	Total liabilities. Add lines 17 through 25			1,104,522.	26	1,078,168
		Organizations that follow FASB ASC 958,	check here	X			
Sec		and complete lines 27, 28, 32, and 33.					
au	27	Net assets without donor restrictions			488,547.	27	387,418
Ва	28	Net assets with donor restrictions			349,350.	28	141,736
u u		Organizations that do not follow FASB AS					
<u> </u>		and complete lines 29 through 33.					
ğ	29	Capital stock or trust principal, or current fur	nds			29	
Set	30	Paid-in or capital surplus, or land, building, o				30	
As	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			837,897.	32	529,154
_	33	Total liabilities and net assets/fund balances			1,942,419.	33	1,607,322

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form **990** (2024)

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#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Open to Public

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

Open to Public Inspection

**Employer identification number** 

OMB No. 1545-0047

	NONPRO	OFIT NEW YORK, I	NC.					13-3216408
Part I	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	See instructions		
The organ	nization is not a private found	lation because it is: (F	For lines 1 through 12, cl	neck only	one box.)			
1	A church, convention of ch	urches, or association	n of churches described	in <b>sectio</b>	n 170(b)(1	1)(A)(i).		
2	A school described in sect	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Form	n 990).)				
3	A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).		
4	A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(	iii). Enter	the hospital's name,
	city, and state:							
5	An organization operated for	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental uni	t describe	ed in
	section 170(b)(1)(A)(iv).	Complete Part II.)						
6	A federal, state, or local go	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7 X	An organization that norma	-					general r	oublic described in
	section 170(b)(1)(A)(vi). (C	•		· ·				
8	A community trust describe		1)(A)(vi). (Complete Part	t II.)				
9 🔲	An agricultural research org			•	ed in conju	unction with a la	and-grant	college
	or university or a non-land-g	-			-		-	•
	university:	, ,	,		, ,	,	J	
10	An organization that norma	ally receives (1) more t	than 33 1/3% of its supp	ort from c	ontribution	ns, membership	fees, and	d gross receipts from
	activities related to its exen							
	income and unrelated busir		·					-
	See section 509(a)(2). (Co				•	, ,		
11 🔲	An organization organized		vely to test for public sat	ety. See	section 50	09(a)(4).		
12	An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	he functio	ns of, or to carr	y out the	purposes of one or
	more publicly supported or	ganizations described	d in <b>section 509(a)(1)</b> o	r <b>section</b> :	509(a)(2).	See section 50	09(a)(3). (	Check the box on
	lines 12a through 12d that	describes the type of	f supporting organization	and com	plete lines	12e, 12f, and 1	l2g.	
а	Type I. A supporting orga	anization operated, si	upervised, or controlled	by its supp	orted org	anization(s), typ	ically by	giving
	the supported organization	on(s) the power to rec	gularly appoint or elect a	majority o	of the direc	ctors or trustees	s of the su	pporting
	organization. You must o	complete Part IV, Se	ections A and B.					
b _	Type II. A supporting org	janization supervised	or controlled in connect	ion with its	s supporte	ed organization	s), by hav	ring
	control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage	the supp	oorted
	organization(s). You mus	t complete Part IV,	Sections A and C.	-		_		
с 🗆	Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally	integrate	ed with,
	its supported organization	n(s) (see instructions)	). You must complete F	Part IV, Se	ctions A,	D, and E.		
d 🗌	Type III non-functionally	y integrated. A supp	orting organization oper	ated in cor	nnection v	vith its supporte	ed organiz	zation(s)
	that is not functionally int	tegrated. The organiz	ation generally must sati	sfy a distr	ibution red	quirement and a	an attentiv	/eness
	requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	<b>V</b> .		
е 🗌	Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type II,	Type III	
	functionally integrated, or	r Type III non-function	nally integrated supportir	ng organiz	ation.			
<b>f</b> Ent	er the number of supported o	organizations						
<b>g</b> Pro	vide the following information	n about the supporte	d organization(s).					
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount of r	•	(vi) Amount of other
	organization		above (see instructions))	Yes	No	support (see ins	tructions)	support (see instructions)
Total								

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	405,829.	2,103,224.	963,374.	771,202.	907,890.	5,151,519.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	405,829.	2,103,224.	963,374.	771,202.	907,890.	5,151,519.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						2,253,032.
6	Public support. Subtract line 5 from line 4.						2,898,487.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7	Amounts from line 4	405,829.	2,103,224.	963,374.	771,202.	907,890.	5,151,519.
8	Gross income from interest,						_
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1,894.	5,502.	11,165.	29,306.	32,762.	80,629.
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.)	35,448.	100,950.	118,667.	78,854.	100,003.	433,922.
11	<b>Total support.</b> Add lines 7 through 10						5,666,070.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	2,132,891.
	First 5 years. If the Form 990 is for th	•		ourth, or fifth tax ye	ear as a section 5	01(c)(3)	
	organization, check this box and stop	here					
Se	ction C. Computation of Publi	c Support Perd	centage				
14	Public support percentage for 2024 (li	ine 6, column (f), di	vided by line 11, co	olumn (f))		14	51.16 %
15	Public support percentage from 2023	Schedule A, Part II	l, line 14			15	54.13 %
16a	33 1/3% support test - 2024. If the o	organization did not	check the box on	line 13, and line 14	1 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly suppo	rted organization				X
k	33 1/3% support test - 2023. If the o						
	and stop here. The organization quali	ifies as a publicly su	upported organizat	ion			
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts	s-and-circumstance	s test, check this b	oox and stop here	e. Explain in Part	VI how the organiza	ation
	meets the facts-and-circumstances te	st. The organizatior	n qualifies as a pub	licly supported org	anization		
k	10% -facts-and-circumstances test	-	•				
	more, and if the organization meets th	_					
	organization meets the facts-and-circu				-		
_18	Private foundation. If the organizatio						
	<u></u>		,	, , ,			Form 990) 2024

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

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

Sed	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		1	T	T		
	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Amounts from line 6						
10a	Gross income from interest, 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						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•		•	•	.,.,	
<u>C - </u>	check this box and stop here						
	ction C. Computation of Publi					T I	
	Public support percentage for 2024 (I					15	<u>%</u>
	Public support percentage from 2023					16	%
	ction D. Computation of Inves			no 12 nolume (A)		17	0/
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from					18	7 is not
198	33 1/3% support tests - 2024. If the						
ı.	more than 33 1/3%, check this box ar						
i.	33 1/3% support tests - 2023. If the line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

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Schedule A (Form 990) 2024

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#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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.
- **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.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 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.
  - **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.)

		Yes	NO
	1		
	2		
	За		
	3b		
	3с		
	4a		
	4b		
	4c		
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Schedule A (Form 990) 2024

	art IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	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		
Ŀ	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Se	ction B. Type I Supporting Organizations	,		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		103	110
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, 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		
2	3 1			
	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,			
80	supervised, or controlled the supporting organization. ction C. Type II Supporting Organizations	2		
36	Stion 6. Type if Supporting Organizations		T.,	
			Yes	<u>No</u>
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
80	the supported organization(s). ction D. All Type III Supporting Organizations	1		
30	Stion B. All Type III Supporting Organizations		V	NI -
			Yes	<u>No</u>
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	, , , , , , , , , , , , , , , , , , , ,			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
80	supported organizations played in this regard. ction E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	5).		
	<u> </u>			
t				
C				
2	entity (see instructions). Activities Test. Answer lines 2a and 2b below.		Yes	No.
2			162	<u>No</u>
a	3 · · · · · · · · · · · · · · · · · · ·			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain the state of the state of the first organizations and explain			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	20		
L	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ŀ	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	<b>2</b> a		
k	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  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	2a		
t	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  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			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  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.	2a 2b		
3	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  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.  Parent of Supported Organizations. Answer lines 3a and 3b below.			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  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.  Parent of Supported Organizations. Answer lines 3a and 3b below.  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2b		
3	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  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.  Parent of Supported Organizations. Answer lines 3a and 3b below.			

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ing Organ	izations	. aga a				
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.							
	All other Type III non-functionally integrated supporting organizations mu		· ·					
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)				
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
_3	Other gross income (see instructions)	3						
4	Add lines 1 through 3.	4						
_5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or							
	collection of gross income or for management, conservation, or							
	maintenance of property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
_8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8						
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see							
	instructions for short tax year or assets held for part of year):							
а	Average monthly value of securities	1a						
b	Average monthly cash balances	1b						
С	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
е	Discount claimed for blockage or other factors							
	(explain in detail in Part VI):							
2		2						
3	Subtract line 2 from line 1d.	3						
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,							
	see instructions).	4						
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by 0.035.	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
Sect	ion C - Distributable Amount			Current Year				
1	Adjusted net income for prior year (from Section A, line 8, column A)	1						
2	Enter 0.85 of line 1.	2						
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3						
4	Enter greater of line 2 or line 3.	4						
5	Income tax imposed in prior year	5						
6	Distributable Amount. Subtract line 5 from line 4, unless subject to							
	emergency temporary reduction (see instructions).	6						
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting orga	nization (see				
	instructions).							

Schedule A (Form 990) 2024

Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)										
Secti	tion D - Distributions Current Year										
1	Amounts paid to supported organizations to accomplish exe	1									
2	Amounts paid to perform activity that directly furthers exemp										
	organizations, in excess of income from activity		2								
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3								
4	Amounts paid to acquire exempt-use assets		4								
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5								
_6	Other distributions (describe in Part VI). See instructions.		6								
_7_	Total annual distributions. Add lines 1 through 6.		7								
8	Distributions to attentive supported organizations to which the	ne organization is responsive									
	(provide details in Part VI). See instructions.		8								
9	Distributable amount for 2024 from Section C, line 6		9								
10	Line 8 amount divided by line 9 amount		10								
		(i)	(ii)	(iii)							
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2024	Distributable Amount for 2024							
1	Distributable amount for 2024 from Section C, line 6										
2	Underdistributions, if any, for years prior to 2024 (reason-										
	able cause required - explain in Part VI). See instructions.										
_3_	Excess distributions carryover, if any, to 2024										
<u>a</u>	From 2019										
<u>b</u>	From 2020										
c	From 2021										
d	From 2022										
е	From 2023										
<u>f</u>	Total of lines 3a through 3e										
<u>g</u>	Applied to under distributions of prior years										
<u>h</u>	Applied to 2024 distributable amount										
<u>_i</u>	Carryover from 2019 not applied (see instructions)										
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.										
4	Distributions for 2024 from Section D,										
	line 7: \$										
<u>a</u>	Applied to underdistributions of prior years										
<u> </u>	Applied to 2024 distributable amount										
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.										
5	Remaining underdistributions for years prior to 2024, if										
	any. Subtract lines 3g and 4a from line 2. For result greater										
	than zero, explain in Part VI. See instructions.										
6	Remaining underdistributions for 2024. Subtract lines 3h										
	and 4b from line 1. For result greater than zero, explain in										
	Part VI. See instructions.										
7	Excess distributions carryover to 2025. Add lines 3j										
	and 4c.										
_8_	Breakdown of line 7:										
	Excess from 2020										
	Excess from 2021										
	Excess from 2022										
<u>a</u>	Excess from 2023  Excess from 2024										

Schedule A (Form 990) 2024

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
	Part IV Section A lines 1 2 3h 3c 4h 4c 5a 6 a 9h 9c 11a 11h and 11c Part IV Section R lines 1 and 2 Part IV Section C
	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	Section D. lines 5. 6. and 8. and Part V. Section F. lines 2. 5. and 6. Also complete this part for any additional information
	(See instructions.)
	(dee instructions.)
_	

#### SCHEDULE C (Form 990)

## Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

2024

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

	( / ( // ( // )	•			
Nam	ne of organization			Emplo	yer identification number (EIN)
		NEW YORK, INC.			13-3216408
Pa	rt I-A Complete if the org	ganization is exempt und	der section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campa	tures		in Part IV. \$	
Pa	rt I-B Complete if the org	ganization is exempt und	der section 501(c)	(3).	
2 3 4a	Enter the amount of any excise tax Enter the amount of any excise tax If the organization incurred a section Was a correction made?  If "Yes," describe in Part IV.	incurred by organization mana on 4955 tax, did it file Form 4720	gers under section 4955 O for this year?	\$	Yes No
Pa	rt I-C Complete if the org	ganization is exempt und	der section 501(c),	, except section 501(c	)(3).
2	Enter the amount directly expended Enter the amount of the filing organ exempt function activities	nization's funds contributed to o	other organizations for s	ection 527 \$	
3	Total exempt function expenditures			·	
4	line 17b  Did the filing organization file <b>Form</b>			\$	Yes No
5	Enter the names, addresses, and E organization listed, enter the amou promptly and directly delivered to a If additional space is needed, provi	INs of all section 527 political o nt paid from the filing organizati a separate political organization,	rganizations to which th on's funds. Also enter t	ne filing organization made pa he amount of political contrib	ayments. For each outions received that were
	<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0

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

Schedule C (Form 990) 2024

Part II-A Complete if the organization 501(h)).	anization is exem		501(c)(3) and file	d Form 5768 (ele	ction under
A Check if the filing organization	tion belongs to an affili		Part IV each affiliated o	group member's name	, address, EIN,
	tion checked box A an	• •	visions apply.		
Limit	s on Lobbying Expen	ditures	The same sapery.	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion (a	rassroots lobbying)		257.	
<b>b</b> Total lobbying expenditures to influ		, ,,		2,597.	
c Total lobbying expenditures (add lin		, , , , , , , , , , , , , , , , , , , ,		2,854.	
d Other exempt purpose expenditure				1,838,920.	
e Total exempt purpose expenditures				1,841,774.	
f _Lobbying nontaxable amount. Ente	,			242,089.	
IF the amount on line 1e, column (a) o		ne lobbying nontaxab		•	
not over \$500,000	1 1	he amount on line 1e.			
over \$500,000 but not over \$1,000		0 plus 15% of the exce	ess over \$500.000.		
over \$1,000,000 but not over \$1,50		0 plus 10% of the exce			
over \$1,500,000 but not over \$17,0		0 plus 5% of the exces			
over \$17,000,000	\$1,000,0				
g Grassroots nontaxable amount (en			'	60,522.	
h Subtract line 1g from line 1a. If zero	, ,,,,			0.	
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than zer		ne 1i. did the organiza	tion file Form 4720		
reporting section 4911 tax for this y					Yes No
(Some organizations th	at made a section 50	raging Period Under ነ1(h) election do not h ite instructions for lin	nave to complete all of	the five columns be	low.
	Lobbying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2021	<b>(b)</b> 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount	237,286.	241,705.	240,140.	242,089.	961,220.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					1,441,830.
c Total lobbying expenditures	4,391.	9,162.	4,097.	2,854.	20,504.
d Grassroots nontaxable amount	59,322.	60,426.	60,035.	60,522.	240,305.
e Grassroots ceiling amount (150% of line 2d, column (e))					360,458.
<b>f</b> Grassroots lobbying expenditures	1,103.	5,676.	1,028.	257.	8,064.

Schedule C (Form 990) 2024

# Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k	<b>)</b>	
	e lobbying activity.	Yes	No	Amount		
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?tIII-A Complete if the organization is exempt under section 501(c)(4), section	- E01/a\/E\		tion		
Par	till-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 50 1 (0)(5)	, or sec	uon		
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?					
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		3			
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "	No;" OR (	b) Part	III-A, line	3, is	
	answered "Yes."		Π.			
1	Dues, assessments, and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al				
	expenses for which the section 527(f) tax was paid):					
	Current year					
	Carryover from last year					
_	Total		١ ۾			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce		3			
4	· · · · · · · · · · · · · · · · · · ·					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po expenditures next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions		. 5			
Par			<u> <sub> </sub> J</u>			
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group lactions); and Part II-B, line 1. Also, complete this part for any additional information.	ist); Part II-A	, lines 1 a	nd 2 (see		

### SCHEDULE D (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

### **Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

NONPROFIT NEW YORK, INC.

Employer identification number

13-3216408

Pai			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) z oner daniece iande	(2) and and and account
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor advis	ed funds
_	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		Yes No
Pai			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recreat	cion or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	cture included on line 2a	2c
d	Number of conservation easements included on line 2c acqui	red after July 25, 2006, and not	
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax
	year		
4	Number of states where property subject to conservation eas	ement is located	
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing cons	servation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, handle	ling of violations, and enforcing conserva	tion easements during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170/h	)(4)(B)(i)
Ū			
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footne	•	
	organization's accounting for conservation easements.	3	
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fu	rtherance of public
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describes these item	S.
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and I	palance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	nerance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		\$ <u> </u>
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under FASB AS	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
h	Assets included in Form 990, Part X		\$

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

Par	t III Organizations Maintaining Col	lections of Art	t, Hist	orical Tre	asures, o	r Other	Simila	r Assets	S (continu	ued)
3	Using the organization's acquisition, accession,								(COTTENT	
	collection items (check all that apply).		,		one mig man	······································	y			
а	Public exhibition	d		Loan or exc	hange progra	am				
b	Scholarly research	e			nango progre					
c	Preservation for future generations	J								
4	Provide a description of the organization's colle	ctions and explain	how th	ev further th	ne organizatio	n's exem	nt nurno	se in Part	XIII	
5	During the year, did the organization solicit or re	-		-	-			oc iiii ait	7.III.	
Ŭ	to be sold to raise funds rather than to be maint								Yes	☐ No
Pai	t IV Escrow and Custodial Arrange									110
	reported an amount on Form 990, Part X			organization	ranoworda	100 0111	01111 000			
	Is the organization an agent, trustee, custodian		liary for	contribution	s or other as	sets not i	ncluded			
	on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in Part XIII and									
-	The rest, explain are arrangement in real vinit arr			a					Amount	
c	Beginning balance						1c			
	Additions during the year									
	Distributions during the year									
f	Ending balance									
	Did the organization include an amount on Forn								Yes	No
	If "Yes," explain the arrangement in Part XIII. Ch						•			
Par										
		a) Current year		rior year	(c) Two year			ears back	(e) Four	years back
1a	Beginning of year balance	,	. ,		, , ,		. ,		, ,	
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities									
·										
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curren	t vear end halance	line 1	r column (a)	I) held as:	L				
a	Board designated or quasi-endowment	t your one balance	% %	y, 001011111 (d)	n noia ao.					
b	Permanent endowment	%	_′°							
	Term endowment %									
·	The percentages on lines 2a, 2b, and 2c should	equal 100%								
32	Are there endowment funds not in the possessi	•	tion tha	t are held ar	nd administer	ed for the	2			
ou	organization by:	on or the organiza	tion tha	t are riola ar	ia aarriiriistor	ou for the	•		Γ	Yes No
	(i) Unrelated organizations?								3a(i)	
	(ii) Related organizations?								3a(ii)	
h	If "Yes" on line 3a(ii), are the related organization	ns listed as require	ed on S	chedule R2						
4	Describe in Part XIII the intended uses of the or									<u> </u>
	t VI Land, Buildings, and Equipmer			arrao.						
	Complete if the organization answered "	Yes" on Form 990	, Part IV	/, line 11a. S	See Form 990	, Part X, I	ine 10.			
	Description of property	(a) Cost or o			or other		cumulate	ed	(d) Book	value
	2000	basis (investm			(other)		reciation		(4, 200	74.00
1a	Land	` ` `			. ,					
	Buildings									
	Leasehold improvements									
	Equipment				33,357.		23.	808.		9,549.
	Other				,					
	. Add lines 1a through 1e. (Column (d) must equ	al Form 990 Part	X line 1	Oc column	(B))					9,549.

Schedule D (Form 990) (Rev. 12-2024)

	O (Form 990) (Rev. 12-2024) NONPROFIT NEW YO	ORK, INC.	<u> </u>	13-3216408	Page 3
Part VII	J				
	Complete if the organization answered "Yes" of		T		
(a) Descri	ption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or el	nd-of-year market	value
(1) Financ	ial derivatives				
(2) Closely	held equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	(b) must equal Form 990, Part X, line 12, col. (B))				
	I Investments - Program Related.				
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market	value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Part IX	(b) must equal Form 990, Part X, line 13, col. (B))  Other Assets				
Faitix	J	Faura 000 David IV lina	11d Con Farms 000 Bort V line 15		
	Complete if the organization answered "Yes" o		Tra. See Form 990, Part X, line 15.	(h) Daale	
	• • • • • • • • • • • • • • • • • • • •	Description		(b) Book v	
	GHT-OF-USE ASSET OPERATING LEASE			-	363,792.
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Cold	umn (b) must equal Form 990, Part X, line 15, col.	(B))			363,792.
Part X	Other Liabilities				
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	:5.	
1.	(a) Description of liability			(b) Book v	<i>v</i> alue
(1) Fe	deral income taxes				
(2) OP	ERATING LEASE				777,265.
(3) RE	FUNDABLE ADVANCES				64,995.
(4)					
(5)					
(6)				1	
(7)				1	
(8)				1	
(9)				+	
	(h) mount amount 5 200 D . (V. " 65 )	(D))		+ ,	842,260.
	<i>umn (b) must equal Form 990, Part X, line 25, col.</i> y for uncertain tax positions. In Part XIII, provide				,,
organiz	zation's liability for uncertain tax positions under	raob aoc 740. Check h	ere ii trie text of the foothote has been p	rovided in Part XI	/II [

Schedule D (Form 990) (Rev. 12-2024)

Par	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With R	evenue per Re	turn	9
	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	1,582,966.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	13,345.		
b	Donated services and use of facilities		49,935.		
С	Recoveries of prior year grants				
d					
е	Add lines 2a through 2d			2e	63,280.
3	Subtract line 2e from line 1			3	1,519,686.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	1,519,686.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents With E	Expenses per R	leturn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	1,891,709.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	49,935.		
b	Prior year adjustments	2b			
С	Other losses				
d					
е	Add lines 2a through 2d			2e	49,935.
3	Subtract line 2e from line 1			3	1,841,774.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	, , , ,				
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)rt XIII Supplemental Information			5	1,841,774.
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit				
_					

#### SCHEDULE J (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

NONPROFIT NEW YORK, INC.

Part I Questions Regarding Compensation

Employer identification number
13-3216408

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958.6(c)2	a		

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

Schedule J (Form 990) (Rev. 12-2024)

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS/ compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MEG BARNETTE	(i)	201,289.	0.	6,119.	10,063.	0.	217,471.	0.
PRESIDENT & CEO - ENDED 11/2024	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JENNIFER DODD	(i)	115,503.	0.	355.	6,333.	46,208.	168,399.	0.
VICE PRESIDENT, FINANCE & OPS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
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	(i)							
	(ii)						0.1.1.1/5	200) (D 40,0004)

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### SCHEDULE O (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization NONPROFIT NEW YORK INC 13-3216408 FORM 990. LINE 1 DESCRIPTION OF ORGANIZATION MISSION: PART I JUST AND POWERFUL SECTOR. PART III - LINE 1 NONPROFIT NEW YORK CHAMPIONS AND STRENGTHENS NONPROFITS THROUGH CAPACITY BUILDING AND ADVOCACY TO CULTIVATE A UNIFIED. POWERFUL SECTOR. PART III, LINE 4A FORM 990. MEMBERSHIP: AS A MEMBERSHIP ORGANIZATION SUPPORTING NONPROFITS IN NEW YORK NONPROFIT NEW YORK STRIVES TO PROVIDE THE HOLISTIC, RESPONSIVE, FUTURE-ORIENTED SUPPORT THAT THESE ORGANIZATIONS REQUIRE TO ADVANCE THEIR MISSIONS AND ALIGN PRACTICES WITH THEIR VALUES. WE ARE COMMITTED TO PROVIDING A COMPREHENSIVE BENEFIT AND SERVICE MODEL THAT ENSURES NONPROFITS GAIN ACCESS TO SELF-DIRECTED LEARNING OPPORTUNITIES THAT ENHANCE MANAGEMENT, GOVERNANCE. AND TECHNOLOGY KNOW-HOW; SUPPORTIVE NETWORKS THAT HELP NONPROFITS OF EVERY SIZE AND ACROSS ALL SUBSECTORS; INFORMATION AND RESOURCES THAT ADDRESS THEIR MOST PRESSING CONCERNS IN REAL TIME; TOOLS AND TECHNOLOGY THAT STREAMLINE OPERATIONS AND ENABLE ADAPTABILITY; AND RESOURCES THAT HELP NONPROFITS BE THE EMPLOYERS THEY WANT AND NEED TO BE. 2024 ACCOMPLISHMENTS: -MEMBERSHIP: NONPROFIT NEW YORK SERVED 600 NONPROFIT MEMBER ORGANIZATIONS AND WELCOMED 104 NEW NONPROFITS, WITH 84% INDICATING THAT OUR SERVICES AND RESOURCES MET THEIR NEEDS "WELL" OR "VERY WELL, -MEMBER BENEFITS: NONPROFIT NEW YORK LAUNCHED A NEW MEMBERS' STREAMLINE BENEFIT ACCESS FOR MEMBERS TO AVAILABLE RESOURCES INFORMATION, AND TOOLS FORM 990, PART III, LINE 4B POLICY & ADVOCACY: NONPROFIT NEW YORK BRINGS NONPROFITS TOGETHER ACROSS SECTOR MISSION AND SIZE TO ADVOCATE COLLECTIVELY FOR THE SUPPORT, RECOGNITION RESPECT NONPROFITS DESERVE AND HEIGHTEN THE SECTOR'S ABILITY TO INFLUENCE DECISIONS THAT IMPACT THE COMMUNITIES AND INDIVIDUALS WE SERVE AND EMPLOY. WE WORK WITH PARTNER ORGANIZATIONS AND COALITIONS TO MAKE THE CASE TO POLICYMAKERS AND THE GENERAL PUBLIC THAT NONPROFITS DRIVE THE REGION'S ECONOMY; CREATE AND MAINTAIN THE SAFETY NET; COMMUNITIES TO MAKE MEANING ART AND CHANGE TOGETHER; AND FACILITATE CIVIC ENGAGEMENT NEEDED TO FUEL OUR DEMOCRACY. NONPROFIT NEW YORK ALSO ENGAGES IN PUBLIC POLICY ADVOCACY AIMED AT ALLOWING NONPROFITS TO A VOICE IN POLICY MAKING AND ENSURING THAT NONPROFITS CAN FOCUS ON

2024 ACCOMPLISHMENTS

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

RATHER THAN ADMINISTRATION.

Schedule O (Form 990) (Rev. 12-2024)

MISSION.

<u>Schedule O (Form 990) 2024</u>

**Employer identification number** Name of the organization NONPROFIT NEW YORK, INC. 13-3216408 POLICY PRODUCTS: NONPROFIT NEW YORK RELEASED SEVERAL POLICY PRODUCTS TO EDUCATE THE NYC NONPROFIT SECTOR ON ISSUES CHALLENGING THE SECTOR INCLUDING AN ANNUAL POLICY PLATFORM; LEGISLATIVE TRACKERS FOR CITY AND STATE POLICY PRIORITIES, POSITIONS, AND PROGRESS; AND ELEVEN ROBUST POLICY ROUNDUP NEWSLETTERS THAT SHARED FEDERAL, STATE, AND CITY UPDATES AND ADVOCACY OPPORTUNITIES. POLICY FORUMS: NONPROFIT NEW YORK HOSTED FIVE POLICY BRIEFINGS AND FORUMS ATTENDED BY MORE THAN 500 NONPROFIT PROFESSIONALS. INCLUDING A HALF-DAY SUMMIT ABOUT ADVOCACY OPPORTUNITIES, A ROUNDTABLE TO EXPLORE POLICY PROPOSALS THAT ADDRESS NEW YORK CITY'S NONPROFIT RACIAL LEADERSHIP GAP, AND A NONPROFIT CONTRACTING PANEL. COALITIONS: NONPROFIT NEW YORK'S COALITION TO ADVANCE NONPROFITS (CAN) AND THE GOVERNMENT RELATIONS COUNCIL (GRC) PROVIDED SIGNIFICANT ADVICE, PERSPECTIVE, AND CROSS-SECTOR MOVEMENT-BUILDING OPPORTUNITIES. A TOTAL OF TEN GRC MEETINGS WERE HELD AND 172 MEMBERS OF CAN ENGAGED IN THE COORDINATION OF A SECTOR-WIDE RESPONSE TO THE BUDGET CUTS PROPOSED BY THE NEW YORK CITY'S MAYOR'S OFFICE,

FORM 990, PART III, LINE 4C

CAPACITY BUILDING:

NONPROFIT NEW YORK PROVIDES HIGH-QUALITY CAPACITY BUILDING AND EDUCATIONAL PROGRAMMING TO NONPROFIT ORGANIZATIONS; CONNECTS NONPROFIT ORGANIZATIONS TO INFORMATION, RESOURCES, PARTNERS, AND EXPERTISE THAT ENHANCE THEIR GOVERNANCE, OPERATIONS, AND PROGRAMMING; AND STRIVES TO BE THE GO-TO SOURCE FOR INFORMATION ABOUT TRENDS AND POLICIES IMPACTING NONPROFITS' DAY-TO-DAY OPERATIONS. ANNUAL MEMBERSHIP WITH NONPROFIT NEW YORK PROVIDES PROFESSIONAL DEVELOPMENT FOR ALL STAFF MEMBERS, INCLUDING BOARD MEMBERS AND VOLUNTEERS; ACCESS TO SELF-DIRECTED LEARNING OPPORTUNITIES THAT ENHANCE MANAGEMENT, GOVERNANCE, AND TECHNOLOGY KNOW-HOW; SUPPORTIVE NETWORKS THAT HELP NONPROFITS OF EVERY SIZE AND ACROSS ALL SUBSECTORS; AN ONLINE MEMBER HUB WITH MORE THAN 500 RESOURCES SUCH AS TRAININGS, SECTOR-SPECIFIC REPORTS, AND CHECKLISTS: TOOLS AND TECHNOLOGY THAT STREAMLINE OPERATIONS AND ENABLE ADAPTABILITY; AND HR RESOURCES THAT HELP NONPROFITS BE THE EMPLOYERS THEY WANT AND NEED TO BE.

#### 2024 ACCOMPLISHMENTS:

-NONPROFIT NEW YORK ENGAGED A TOTAL OF 2,107 UNIQUE NONPROFIT
ORGANIZATIONS THROUGH OUR PROGRAMMING, SERVICES, AND CAMPAIGNS.

- WORKSHOPS & TRAININGS: NONPROFIT NEW YORK OFFERED 74 INTERACTIVE
WORKSHOPS, EVENTS, AND FORUMS THROUGHOUT THE YEAR, WHICH WERE ATTENDED
BY 2,686 NONPROFIT PROFESSIONALS.

- NONPROFIT HELPLINE: OUR HELPLINE RECEIVED 366 INQUIRIES WITH MEMBERS
REPORTING AN 98% SATISFACTION RATE.

- REPORTS: NONPROFIT NEW YORK RELEASED THE 2024 NONPROFIT COMPENSATION
REPORT WITH COMPREHENSIVE BENCHMARKING DATA ON SALARIES, BENEFITS, AND
RETIREMENT CONTRIBUTIONS FOR NYC-AREA NONPROFITS.

-RESOURCES: NONPROFIT NEW YORK INCREASED THE NUMBER OF TRAININGS,
ARTICLES, TOOLS, AND TEMPLATES IN OUR KNOWLEDGE CENTER BY 18% FOR A
TOTAL OF 577 RESOURCES OFFERED.

- ANNUAL CONFERENCE: ON NOVEMBER 13, 2024, MORE THAN 300 NONPROFIT PROFESSIONALS GATHERED AT OUR ANNUAL CONFERENCE, A FULL-DAY EVENT

Schedule O (Form 990) 2024

Schedule O (Form 990) 2024 Page 2

**Employer identification number** Name of the organization NONPROFIT NEW YORK, INC. 13-3216408 FEATURING PANEL DISCUSSIONS, WORKSHOPS, KEYNOTE ADDRESS, AND NETWORKING OPPORTUNITIES. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: COMMUNICATIONS: EFFECTIVE COMMUNICATION IS AN ESSENTIAL COMPONENT OF KEEPING OUR MEMBERS INFORMED AND ENGAGED WITH NONPROFIT NEW YORK'S MISSION-DRIVEN WORK. OUR MULTI-PRONGED COMMUNICATIONS STRATEGY ENSURES MEMBERS ARE AWARE OF AND ABLE TO ACT ON OPPORTUNITIES RELATED TO OUR ADVOCACY EFFORTS, CAPACITY-BUILDING OFFERINGS, AND OTHER COMPLIANCE-RELATED MATTERS. WE UTILIZE A VARIETY OF CHANNELS TO INFORM MEMBERS AND ENCOURAGE DIALOGUE, INCLUDING E-NEWSLETTERS, ADVOCACY CAMPAIGNS, SOCIAL MEDIA, OUR ONLINE MEMBER HUB THE COMMUNITY, AND OUR NONPROFIT HELPLINE. ADDITIONALLY NONPROFIT NEW YORK ALSO HOSTS AN ANNUAL MEETING OF MEMBERS THAT PROVIDES A FORUM FOR MEMBERS TO ELECT NONPROFIT NEW YORK'S BOARD OF DIRECTORS AND PARTICIPATE IN A SECTOR-WIDE DISCUSSION THAT WILL HELP SHAPE OUR PROGRAM PRIORITIES. 2024 ACCOMPLISHMENTS: -LANGUAGE ACCESSIBILITY: NONPROFIT NEW YORK IDENTIFIED AND TRANSLATED SIX CRUCIAL RESOURCES IN SPANISH AND SIMPLIFIED AND TRADITIONAL VERSIONS OF CHINESE. INCLUDING STEPS FOR STARTING A NONPROFIT IN NEW YORK. SELECT DOCUMENTS WERE ALSO TRANSLATED INTO ARABIC. -WEBSITE: NONPROFIT NEW YORK'S WEBSITE SERVES AS A VALUABLE RESOURCE FOR THOUSANDS OF NONPROFITS SEEKING TRAINING, GUIDANCE, SECTOR UPDATES ADVOCACY OPPORTUNITIES, AND SERVICES. WE LAUNCHED A NEW, ACCESSIBLE WEBSITE TO MAKE IT EASIER FOR OUR VISITORS TO FIND ESSENTIAL INFORMATION. -DIGITAL COMMUNICATIONS: NONPROFIT NEW YORK'S REGULAR EMAILS MAINTAINED AN AVERAGE OPEN RATE OF 40% WITH AN AVERAGE CLICK-TO-OPEN RATE OF 5%. EXPENSES \$ 246.806. INCLUDING GRANTS OF \$ 0. REVENUE \$ 25.832. FORM 990, PART VI, SECTION A, LINE 6: NONPROFIT NEW YORK, INC. WAS INCORPORATED AS A MEMBERSHIP ORGANIZATION. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS SHALL HOLD AN ANNUAL MEETING TO ELECT DIRECTORS. AT THE DATE PLACE AND TIME FIXED BY THE BOARD. AT THE ANNUAL MEETING OF MEMBERS, THE MEMBERS ENTITLED TO VOTE WHO ARE PRESENT IN PERSON OR BY PROXY. BY A PLURALITY OF THE VOTES CAST, SHALL ELECT DIRECTORS TO REPLACE THOSE WHOSE TERMS ARE EXPIRING TO A TERM OF THREE YEARS AND SHALL ELECT DIRECTORS TO FILL ANY NEWLY CREATED DIRECTORSHIPS. THE BOARD, BY VOTE OF A MAJORITY OF THE DIRECTORS THEN IN OFFICER, MAY CREATE NEW DIRECTORSHIPS AND ELECT DIRECTORS TO FILL THEM, AND MAY ELECT DIRECTORS TO FILL ANY VACANCIES AMONG

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY THE AUDIT AND EXECUTIVE COMMITTEES AND APPROVED

THE DIRECTORS. THESE DIRECTORS SHALL SERVE UNTIL THE NEXT ANNUAL MEETING OF

BY THE AUDIT COMMITTEE. IT IS THEN REPORTED AND DISTRIBUTED TO THE FULL

BOARD. COPIES ARE PROVIDED FOR FULL BOARD REVIEW BEFORE FILING WITH THE

Schedule O (Form 990) 2024

MEMBERS

Schedule O (Form 990) 2024 Page 2 **Employer identification number** Name of the organization NONPROFIT NEW YORK, INC. 13-3216408 INTERNAL REVENUE SERVICE. FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST FORMS MUST BE SUBMITTED BY OFFICERS, DIRECTORS AND KEY EMPLOYEES ANNUALLY TO THE CHAIR OF THE AUDIT COMMITTEE. THE PRESIDENT & CEO REVIEWS THE FORM AND PREPARES A SUMMARY, IDENTIFYING ANY CONFLICTS. ANY CONFLICTS ARE DISCUSSED WITH THE BOARD CHAIR AND AUDIT COMMITTEE CHAIR. FORM 990, PART VI, SECTION B, LINE 15: THE PRESIDENT & CEO SUBMITS A REPORT ON HER ACCOMPLISHMENTS IN THE PRECEDING YEAR TO THE BOARD CHAIR. THE ORGANIZATION OBTAINS COMPARABLE SALARIES FOR EACH POSITION VIA GUIDESTAR AND NONPROFIT SALARY SURVEYS (INCLUDING NONPROFIT NEW YORK SURVEY OF ITS MEMBERS) AND DOCUMENTS THE RESEARCH AS PART OF YEARLY BUDGET PREPARATION. THE PRESIDENT & CEO MEETS WITH THE BOARD CHAIR TO REVIEW PREVIOUS YEAR'S PERFORMANCE. THE BOARD CHAIR PROPOSES SALARY FOR THE UPCOMING YEAR. THE PRESIDENT & CEO'S SALARY IS PRESENTED TO THE EXECUTIVE COMMITTEE AS PART OF THE BUDGET FOR THE UPCOMING FISCAL YEAR. IF APPROVED BY THE COMMITTEE, THE PRESIDENT & CEO'S SALARY IS SUBMITTED TO THE FULL BOARD OF DIRECTORS FOR APPROVAL AS PART OF THE PROPOSED BUDGET. FORM 990, PART VI, SECTION C, LINE 19: NONPROFIT NEW YORK, INC. MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. THE AUDITED FINANCIAL STATEMENTS, ANNUAL REPORT AND FORM 990 ARE AVAILABLE ON THE WEBSITE: HTTPS://WWW.NONPROFITNEWYORK.ORG.