

## **Note:** The draft you are looking for begins on the next page. **Caution: DRAFT**—**NOT FOR FILING**

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Most forms and publications have a page on IRS.gov: <u>IRS.gov/Form1040</u> for Form 1040; <u>IRS.gov/Pub501</u> for Pub. 501; <u>IRS.gov/W4</u> for Form W-4; and <u>IRS.gov/ScheduleA</u> for Schedule A (Form 1040), for example, and similarly for other forms, pubs, and schedules for Form 1040. When typing in a link, type it into the address bar of your browser, not a Search box on IRS.gov.

If you wish, you can submit comments to the IRS about draft or final forms, instructions, or pubs at IRS.gov/FormsComments. Include "NTF" followed by the form or pub number (for example, "NTF1040", "NTFW4", "NTF501", etc.) in the body of the message to route your message properly. We cannot respond to all comments due to the high volume we receive and may not be able to consider many suggestions until the subsequent revision of the product, but we will review each "NTF" message. If you have comments on reducing paperwork and respondent (filer) burden, with respect to draft or final forms, please respond to the relevant information collection through the Federal Register process; for more info, click <u>here</u>.

			nark icons to display help windows. In will enable you to file a more complete return and reduce the chances the IRS will nee	d to contact you.	]
	00	<b>90-EZ</b>	Short Form		OMB No. 1545-0047
Forn	n <b>J</b> J	<b>JO-EZ</b>	<b>Return of Organization Exempt From Income</b>	Гах	2024
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private Do not enter social security numbers on this form, as it may be made put		Open to Public
		of the Treasury nue Service	Go to www.irs.gov/Form990EZ for instructions and the latest informatio	-	Inspection
AF	or the	2024 calenda	ar year, or tax year beginning , 2024, and ending		, 20
Bc	heck if ap	oplicable:	C Name of organization	D Employer iden	tification number
	Address c		Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Talasha	h
	Name cha nitial retu		Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telephone num	lber
		rn/terminated	City or town, state or province, country, and ZIP or foreign postal code	F Group Exem	otion
	Amended Applicatio	return on pending		Number	
		ting Method:	Cash Accrual Other (specify):	Check 🗌 if the c	rganization is <b>not</b>
	Vebsite			required to attac	h Schedule B
				(Form 990).	
			Corporation Trust Association Other:		
			500,000 or more, file Form 990 instead of Form 990-EZ	· · · \$	
<u> </u>	art I		e, Expenses, and Changes in Net Assets or Fund Balances (see the		or Part I)
			the organization used Schedule O to respond to any question in this Part I		
	1		ns, gifts, grants, and similar amounts received	1	
	2		ervice revenue including government fees and contracts	2	
	3		ip dues and assessments	3	
	4 5a	Investment		4	
	b		unt from sale of assets other than inventory <b>5a</b> or other basis and sales expenses <b>5b</b>	_	
	C		s) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
	6		d fundraising events:		
	а		ome from gaming (attach Schedule G if greater than		
Revenue		\$15,000) .	6a 6a	_	
eve	b		me from fundraising events (not including <u></u> of contributio aising events reported on line 1) (attach Schedule G if the	ins	
č			h gross income and contributions exceeds \$15,000)   6b		
	с		t expenses from gaming and fundraising events 6c	_	
	d		e or (loss) from gaming and fundraising events (add lines 6a and 6b and sul	otract	
		line 6c) .		· · 6d	
	7a		s of inventory, less returns and allowances		
	b		of goods sold	7.	
	с 8	•	nue (describe in Schedule O)		
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		
	10		similar amounts paid (list in Schedule O)		
	11	Benefits pa	lid to or for members	11	
ses	12		her compensation, and employee benefits		
Expenses	13		al fees and other payments to independent contractors		
Хp	14		/, rent, utilities, and maintenance		
ш	15 16		ublications, postage, and shipping  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .		
	17		nses (describe in conecute of		
S	18	Excess or (	deficit) for the year (subtract line 17 from line 9)	18	
Assets	19	Net assets	or fund balances at beginning of year (from line 27, column (A)) (must agree	e with	
As		-	r figure reported on prior year's return)		
Net	20		ges in net assets or fund balances (explain in Schedule O)		
	21		or fund balances at end of year. Combine lines 18 through 20	21	
⊦or	Paper	work Reduct	ion Act Notice, see the separate instructions. Cat. No. 106421		Form <b>990-EZ</b> (2024)

Form 9	90-EZ (2024)				Page 2
Par	t II Balance Sheets (see the instructions	for Part II)			i
	Check if the organization used Schedule	e O to respond to a	ny question in this	Part II	🗆
	•	·	• ·	(A) Beginning of year	
22	Cash, savings, and investments		[		22
23	Land and buildings		†		23
24	Other assets (describe in Schedule O)				24
25	Total assets				25
26	Total liabilities (describe in Schedule O)				26
27	Net assets or fund balances (line 27 of column	(B) <b>must</b> agree wit	n line 21)		27
Part				Part III)	
r ar c	Check if the organization used Schedule				Expenses
What	is the organization's primary exempt purpose?				(Required for section
					501(c)(3) and 501(c)(4) organizations; optional for
as m	ribe the organization's program service accomple easured by expenses. In a clear and concise n ins benefited, and other relevant information for e	nanner, describe the	e services provideo	I, the number of	others.)
					-
		t includes foreign gra			28a
29					
	(Oversta (	tingludes fausian and			00-
30	(Grants \$) If this amount	t includes foreign gra	ants, check here .	🗆	29a
30					
	(Grants \$ ) If this amount	t includes foreign gra	unto oback horo		30a
	Other program services (describe in Schedule O)				Jua
		t includes foreign gra			31a
	Total program service expenses (add lines 28a				32
Part					
	Check if the organization used Schedule				∏
			(c) Reportable		_
	(a) Name and title	(b) Average hours per week devoted to position		(d) Health benefits, contributions to employed benefit plans, and deferred compensation	ee (e) Estimated amount of other compensation
		-			
		-1			

Center Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.    So Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O.  Image: Schedule O. Schedule O. Schedule O. Schedule O. There's, and tab. a conformed charge on Schedule O. Sche	Form 99	90-EZ (2024)		P	age <b>3</b>
33  Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule 0.  33    34  Were any significant changes made to the organization of the organizations name; Otherwise, explain the change on Schedule 0. See instructors.  34    35a  Did the organization have unrelated business gross informed of the organization in activity in Schedule 0.  35a    35a  Did the organization have unrelated business gross informed of the organization in a Schedule 0.  35b    35a  Did the organization in description of a Sin 000 or more during the section 6033(en notice, reporting, and proys tax regurrements during the section 6033(en notice, reporting, and proys tax regurrements during the section 6033(en notice, reporting, and proys tax regurrements during the section 6033(en notice, reporting, and proys tax regurrements during the section 6033(en notice, reporting, and proys tax regurrements during the section 6033(en notice, reporting, and proys tax regurrements during the section 6033(en notice, reporting, and proys tax regurrements during the section 6033(en notice, reporting, and proys tax regurrements during the section 6033(en notice).  37a    37a  37b  37a    37a  37a  37a    37a  37a  37a    37a  37a  37a    37a  37a  37a    37b  37a  37a    37a	Part			e	
34    Were any significant changes made to the organization of source in the year intervent of the organization of source intervent of source interve	33			Yes	No
35a  Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those exponded on incess?  35b    b  If "Yes" to line 35a, has the organization filed a Form 990-T for the year? II "No," provide an explanation in Schedule 0  35c    c  Was the organization a section 501(c)(d), 601(c)(d), or 501(c)(d) organization subject to section 6033(e) notice, reporting, and proxy tax is completed splitolito, termination, or significant disposition of net assets during the year? II "No," completed splitolito, the significant disposition of net assets during the year? II "No," for NI 20-PCI for this year?  36c    37a  Enter amount of political expenditures, direct or indirect, as desorbed in the instructions  37a  37b    38a  Did the organization file form 1120-PCI for this year?  37b  37b  37b    39a  Section 501(c)(3), control the total amount involved  38b  38a  38a    39  Section 501(c)(3), control the total amount involved  38b  38a  38a    39  Section 501(c)(3), control the total amount involved  38b  38a  38a  38a    39  Section 501(c)(3), control the organization endage in any section 4955.  38b  38a  38a  38a  38a    40  Section 501(c)(3), control the organization endage in any section 4912. <th>34</th> <th>Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the</th> <th></th> <th></th> <th></th>	34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
c  Was the organization a section 501(c)(4), 501(c)(6), or 501(c)(6) organization subject to section 6033(e) notes, as dearboard in the instructions or significant disposition of net assets during the yaar? If Yes," complete splicable path solution to managers, as dearboard in the instructions 37a  36    37a  Enter amount of political expendatures, circct or instreet, as dearboard in the instructions 37a  37a    37b  Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employed; or were any such loans made in a proryear and still outstanding at the and of the tax year covered by this return?  37b    37b  Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employed; or were any such loans made in a proryear and still outstanding at the and of the tax year covered by this return?  37b    37b  Did the organization contribution included on line 9  37b    37b  Section 501(c)(7) organizations. Enter amount of tax imposed on the organization during the year under: section 4912;  37b    36c  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization in a prory year that has not been reported on any of its prior Forms 990 or 990-E271 If 'Yes,' complete Scheedite L, Part I  40b    40c  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization.  40c    41  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c	35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
36  Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? (if Yes," complete applicable parts of Schodule N  37a  37a  37a    37a  Enter amount of political expenditures, direct or indirect, as described in the instructions (strate and the organization brown from, or make any laars to, any officer, functor, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the and of the tax year covered by this return?  38a    39  Did the organization borded on line 9		Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
37a  Enter amount of political expenditures: direct or indirect, as described in the instructions  37a  37b    38  Did the organization file Form 1120-POL for this year?  37b  38a    39  Section 501(0/1) organizations. Enter:  38a  39b    39  Section 501(0/1) organizations. Enter:  33a  39b    30a  39b  Section 501(0/1) organizations. Enter:  33a    30b  Genes and capital contributions included on line 9  33a    30a  39b  Section 501(0/1) organizations. Enter amount of tax imposed on the organization engage in any section 4958    30b  Section 501(0/3), 501(0/4), and 501(0/29) organizations. Enter amount of tax imposed on organization manages in any section 4958    30b  Section 501(0/3), 501(0/4), and 501(0/29) organizations. Enter amount of tax inposed on organization manages or disqualified persons during the year under sections 4912.    4955, and 4956  Section 501(0/3), 501(0/4), and 501(0/29) organizations. Enter amount of tax on line    40c  Section 501(0/3), 501(0/4), and 501(0/29) organizations. Enter amount of tax on line    40c  Section 501(0/3), 501(0/4), and 501(0/29) organizations. Enter amount of tax on line    40c  Section 501(0/3), 501(0/4), and 501(0/29) organizations. Enter amount of tax on line    40c  Section 5	36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
38a  Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38a    39  Section 501(c)(7) organizations. Enter  39a    40  Section 501(c)(3) organizations. Enter  39a    40a  Section 501(c)(3) organizations. Enter  39a    40a  Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911.  :section 4911.  :section 4955.    40a  Section 501(c)(3). 501(c)(4). and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction. during the year, or did if rengage in an excess benefit analysis of the organizations. Section 501(c)(3). 501(c)(4). and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or clisqualified persons during the year under: section 501(c)(3). 501(c)(4). and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or clisqualified persons during the year or did if the organization and section 1 and 501(c)(29). S01(c)(4). and 501(c)(29) organizations. Enter amount of tax on line 40c embursed by the organization managers or clisqualified persons during the year or did if the organization control.  40b    41  List the states with which a copy of this return is filed:  Telephone no.    42a  Located at:  ZIP + 4  Located at:  ZIP + 4  A tany time during the calendar year, did the					
39  Section 501(c)(7) organizations. Enter:  36a  36a    a Initiation fees and capital contributions included on line 9  36a  36b  36a    40  Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4915:  36a  36b  36b    40  Section 501(c)(3). 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E27. If "Yes," complete Schedule L, Part I  40b    c  Section 501(c)(3). 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912. 4955, and 4958  40b    d  Section 501(c)(3). 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization	38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?			
b  Gross receipts, included on line 9, for public use of club facilities  39b  39b    40a  Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under; section 4911  section 4912;  section 4955;    b  Section 501(c)(4), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I  40b    c  Section 501(c)(4), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  40c    d  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  40c    d  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 40c  40c    d  It is the states with which a copy of this return is filed:  Telephone no.  20c    d  The organization's books are in care of:  Telephone no.  21P + 4    Located at:  X any time during the calendar year, did the organization maintain an office outside the United States?  42b	39	Section 501(c)(7) organizations. Enter:	-		
section 4911:  :section 4912:  :section 4955:    b  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I    c  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912.  40b    4955, and 4958.	b	Gross receipts, included on line 9, for public use of club facilities			
on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  4955, and 4958.    d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization  40c    e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.  40c    11  List the states with which a copy of this return is filed:  40c    42a  The organization's books are in care of:  Image: Comparison of 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)?  Yes No    If "Yes," enter the name of the foreign country:  See the instructions for exceptions and filing requirements for FinCEN Form 1041–Check here and enter the anount of tax-exempt interest received or accrued during the tax year .  43    44a  Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  44a    b Did the organization noer ormore hospital facilities during the year?  If "Yes," row 990-EZ  44a    44b  44c  44a    b Did the organization neceive any payments for indoor tanning services during the year?  If "Yes," Form 990-EZ  44a    b Did the organization neceive any payments for indoor tanning services dur	b	section 4911:; section 4912:; section 4955:; section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year	40b		
40c reimbursed by the organization  40c    e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  40e    41  List the states with which a copy of this return is filed:  40e    42a  The organization's books are in care of:  Telephone no.    Located at:  ZIP + 4  40e    b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  Yes  No    fi "Yes," enter the name of the foreign country:  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  42c	С	on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
transaction? If "Yes," complete Form 8886-T  40e    41  List the states with which a copy of this return is filed:    42a  The organization's books are in care of:  Telephone no.    Located at:  ZIP + 4    b  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  Yes  No    If "Yes," enter the name of the foreign country:  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  42c  42c  42c    c  At any time during the calendar year, did the organization maintain an office outside the United States?  42c  42c  42c    if "Yes," enter the name of the foreign country:  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here  43    44a  Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  44a  44a    b  Did the organization receive any payments for indoor tanning services during the year?  44c  44d    c  Did the organization neeive any payments for indoor tanning services during the year?  44c  44c    d <th>d</th> <th>40c reimbursed by the organization</th> <th></th> <th></th> <th></th>	d	40c reimbursed by the organization			
42a  The organization's books are in care of:  ZIP + 4    b  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  Yes  No    if "Yes," enter the name of the foreign country:  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  42b  42c  42c  42c  42c  42c  42c  42c  42c  44a  42c  44a  42c  44a  42c  44a		transaction? If "Yes," complete Form 8886-T	40e		
Located at:  ZIP + 4    b  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:  Yes  No    See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  42c  42c    c  At any time during the calendar year, did the organization maintain an office outside the United States?  42c  42c    43  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year .  43  Yes  No    44a  Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  44a  <					
b  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:  Yes  No    See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  42b  42b    c  At any time during the calendar year, did the organization maintain an office outside the United States?  42c  42c    43  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here	42a				
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  42c    c At any time during the calendar year, did the organization maintain an office outside the United States?  42c    lf "Yes," enter the name of the foreign country:  43    43  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here .  43    44a  Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ .  44a    b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ .  44b    c Did the organization receive any payments for indoor tanning services during the year? If "No," provide an explanation in Schedule O .  44c    45a  Did the organization nave a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions .  45b	b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	Νο
Financial Accounts (FBAR).  42c    c At any time during the calendar year, did the organization maintain an office outside the United States?  42c    lf "Yes," enter the name of the foreign country:  43    43  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here					
If "Yes," enter the name of the foreign country:    43  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		Financial Accounts (FBAR).			
and enter the amount of tax-exempt interest received or accrued during the tax year		If "Yes," enter the name of the foreign country:	42c		
44a  Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  44a    b  Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  44a    c  Did the organization receive any payments for indoor tanning services during the year?  1f "Yes," Form 990 must be completed instead of Form 990-EZ  44b    d  If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  44d    45a  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45a    b  Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?  45a    b  Did the organization filed section 512(b)(13)?  45a    b  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45a    b  Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?  45a    b  Did the organization section 512(b)(13)?  45b	43		· ·	 Yes	No
completed instead of Form 990-EZ  44b    c Did the organization receive any payments for indoor tanning services during the year?  44c    d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  44d    45a  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45a    b  Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?  45a    b  Did the organization 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions  45b	44a	completed instead of Form 990-EZ	44a		
d  If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  44d    45a  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45a    b  Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?  45a    c  Form 990-EZ. See instructions  Form 990 and Schedule R may need to be completed instead of 45b	b	completed instead of Form 990-EZ			
b  Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions  45b		If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	_	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b		

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			Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition			
	to candidates for public office? If "Yes," complete Schedule C, Part I	46		
Part	VI Section 501(c)(3) Organizations Only			

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

	Check if the organization used Schedule O to respond to any question in this Part VI			
			Yes	No
47	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	47		
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		
b	If "Yes," was the related organization a section 527 organization?	49b		

50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key
	employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Sentem	h	r 2	$\mathbf{R}$	<b>N9Z</b>
			· ,	

f Total number of other employees paid over \$100,000 . . . .

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

•

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
	_	
	_	
	-	
	_	
d Total number of other independent contractors each receiving	over \$100,000	

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a

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

Sign Here	Signature of officer			Date		
	Type or print name and title					
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date		Check if self-employed	PTIN
Use Only	Firm's name			Firm's EIN		
	Firm's address	Phone no.				
May the IRS	discuss this return with the preparer	shown above? See instructions			[	Yes 🗌 No