

The White Family Foundation
Grant Request #789
Ready for Life, Inc.
February 21, 2023

| | |
|--|---|
| Date of grant proposal submission | Tuesday, February 21, 2023 |
| Are you an IRS compliant 501(c)3 public charity/ nonprofit? | Yes |
| Legal name of organization | Ready for Life, Inc. |
| Address | 2300 Tall Pines Dr., Suite 100 Largo, Florida 33771 United States |
| Website | https://www.readyforlifepinellas.org/ |
| Telephone | 7274262501 |
| Fax | NA |
| Organization Director/ Title | Kathy Mize, CEO |
| Contact Person/Title | Patsy Stills, Grants Coordinator |
| Contact Person's Telephone | 7279543989 |
| Contact Person's Email | pstills@readyforlifepinellas.org |
| Grant Request Amount | \$10,000.00 |

Please provide us with a brief description of your organization (no more than 500 words).

Ready For Life Inc. (RFL) was started in 2009 as a grassroots effort to help young adults, alone at 18, facing adulthood on their own. RFL is a solution-based skill center supporting former foster care youth in homelessness prevention, education & employment, and lifeline support networks. RFL serves Pinellas County 15 - 25 years old's who are in foster care or have aged out and are now on their own. RFL offers an educational learning lab; a full-time Mental Health Counselor through a partnership with the Pinellas County Public Defender's Office; legal services by Community Law Program supported by the St. Petersburg Bar Association; a mentor program; youth council; parent-child support; driving assistance through Keys to Independence and more. RFL helps change lives beyond foster care and increase opportunities to be productive, healthy, loving community members. To date RFL has helped over 1000 young adults and 145 of their own children.

RFL is a family environment where young people find basic needs like food and meal kits, personal and hygiene supplies, caring support, and access to laundry and shower facilities. Until immediate basic needs are met, it is nearly impossible to contemplate the future, and RFL believes that all young people deserve the opportunity for a successful future. Volunteer 1:1 mentors help clients navigate transitioning into adulthood because even the most privileged young adults will tell you that, "adulthood" is hard. Imagine being raised in foster care instead of with your biological family, then turning 18 and being on your own. RFL and mentors help youth focus on health, job skills, education, employment and stable housing. RFL services help empower young adults to feel loved and able to navigate resources to help break the cycle of generational child abuse and neglect.

According to the American Society for the Positive Care of Children, roughly 30% of child abuse victims will continue the cycle of abuse with their own children RFL currently serves 65 parents and their 145 little ones. That's 145 little ones NOT in foster care. The project is

called Mommy & Me (for the moms) and Wingmen (for the dads). The Mommy & Me and Wingmen groups are specifically designed to build protective factors and break the cycle of generational child abuse.

Raising children is hard work. RFL takes a research-based approach as described by childwelfare.gov which tells us: “By using a protective factors approach, child welfare professionals and others can help parents find resources and supports that emphasize their strengths while also identifying areas where they need assistance, thereby reducing the chances of child abuse and neglect.” The six protective factors are: 1: Nurturing and attachment; 2: Knowledge of parenting for child and youth development; 3: Parental resilience; 4: Social connections; 5: Concrete supports for parents; 6: Social and emotional competence of children.

Help us stop the cycle of generational child abuse by increasing Mommy & Me and Wingmen services.

Grant Purpose (one paragraph)

The purpose of this grant is to make happy memories and give young parents an opportunity to thrive in our community. Our biggest accomplishment is that RFL clients in Mommy & Me and Wingmen have a higher success rate of keeping custody of their children. Currently 89% of young RFL parents have custody of their children, but not all of them attend Mommy & Me or Wingmen. For those parents who do participate in Mommy & Me and Wingmen support groups, 93% have custody of their children. Mommy & Me and Wingmen services are held separately, monthly. Male staff and volunteers mentor the fathers while female staff and volunteers mentor the mothers. Former foster youth are part of the staffing pattern at RFL, and they bring an authentic voice to all services while gaining the respect and trust of the clients. Protective factor approaches are built into events and services through outings and new traditions including attending Rays games; Easter egg hunts; Mother’s Day events, Father’s Day events and other holidays, as well as how to shop and prepare healthy food; bowling; game nights; pool parties and pool tournaments. With a \$10,000 investment from White Family Foundation, more targeted services and evidence-informed trainings can be provided for staff and clients, more data on what works can be collected and more effort can be put toward recruiting other new parents to join in the activities. Thank you for helping us stop the cycle of generational child abuse while creating positive memories and traditions.

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| Annual Organization Budget | \$921,500.00 |
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Cover Sheet

Kathy Mize, CEO

Ready for Life, Inc.

2300 Tall Pines Drive

Suite 100

Largo, FL 33771

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Attachments, (62 pages)

- a. Organization Annual Budget FY23
- b. Impact Report & Youth Services Flyer
- c. April 2023 Organization Balance Sheet/Profit & Loss Statements
- d. Most recent IRS 990 tax filing
- e. IRS 501(c)(3) Determination Letter
- f. Florida Charity Solicitation of Contributions approval letter

Ready for Life's mission

To provide support, resources, and guidance former foster care youth need to successfully transition to adulthood.

1. Case Statement

Ready For Life Inc. (RFL) was started in 2009 as a grassroots effort led by Kathy Mize, to help young adults, alone at 18, facing adulthood on their own. There were no other local nonprofit organizations helping this population at the time, although there were a lot of nonprofits and faith-based organizations helping foster children and foster families. But for young adults aging out – there was a huge gap and Ready for Life was created from volunteers who knew the child welfare system and the gaps in service and wanted to act. Ready for Life is still the only Tampa Bay area nonprofit entity whose sole purpose it to help youth transition into adulthood. **Youth always have a voice in services**, and to make it even easier for youth to be heard, there is a board position for an adult with lived experience. Also, several staff are employed by RFL at any given time, as Youth Specialists – staff who themselves were in foster care as children and can relate to the needs and trepidations of teens and youth in need of assistance. RFL collaborates and partners with other organizations and community groups to better serve diverse needs presented by clients.

In 2009 there was no extended foster care, so children cared for at 17 in licensed foster care were suddenly “adults” at 18 and were released from state care. In 2013, the Fostering Success Initiative was passed by the Florida Legislature which extended foster care services and support up to the age of 21 or 22 if they had a documented disability. Although many former foster children are eligible for postsecondary education services and support, tuition and fee exemption and aftercare services, many eligible young adults don't or can't navigate services without assistance from a caring adult. Since 2009, Ready for Life staff, volunteers and supporters have helped ease the transition into adulthood and in return have helped change lives and strengthened our community along the way.

Ready for Life is a solution-based skill center supporting former foster care youth in homelessness prevention, education & employment, and lifeline support networks. RFL serves primarily Pinellas County 15 – 25 years old's who are in foster care or have aged out and are now on their own. RFL offers an educational learning lab; a full-time Mental Health Counselor through a partnership with the Pinellas County Public Defender's Office; legal services by Community Law Program supported by the St. Petersburg Bar Association; a mentor program; youth council; parent-child support; driving assistance through Keys to Independence, Life Skills Reimagined through a contract with Family Support Services, and more. RFL helps change lives beyond foster care and increase opportunities to be productive, healthy, loving community members. **To date RFL has helped over 1000 young adults and 145 of their own children.**

RFL is a family environment where young people find basic needs like food and meal kits, personal and hygiene supplies, caring support, and access to laundry and shower facilities. Until immediate basic needs are met, it is nearly impossible to contemplate the future, and RFL believes that all young people deserve the opportunity for a successful future. Volunteer 1:1 mentors help clients navigate transitioning into adulthood because even the most privileged young adults will tell you that, "adulting" is hard. Imagine being raised in foster care instead of with your biological family, then turning 18 and being on your own. RFL and mentors help youth focus on health, job skills, education, employment, stable housing and parenting.

Ready for Life services help empower young adults to feel loved and able to navigate resources to help break the cycle of generational child abuse and neglect. According to the American Society for the Positive Care of Children, roughly 30% of child abuse victims will continue the cycle of abuse with their own children. RFL currently serves 65 parents and their 145 little ones. That's 145 little ones NOT in foster care. The project is called Mommy & Me (for the moms) and Wingmen (for the dads). The Mommy & Me and Wingmen groups are specifically designed to build protective factors and break the cycle of generational child abuse.

Raising children is hard work. RFL takes a research-based approach as described by childwelfare.gov which tells us: “By using a protective factors approach, child welfare professionals and others can help parents find resources and supports that emphasize their strengths while also identifying areas where they need assistance, thereby reducing the chances of child abuse and neglect.” The six protective factors are: 1: Nurturing and attachment; 2: Knowledge of parenting for child and youth development; 3: Parental resilience; 4: Social connections; 5: Concrete supports for parents; 6: Social and emotional competence of children.

Recently, Ready for Life has been granted certification as a National Exchange Club, Child Abuse Prevention Center (CAP) with access to National Exchange Club’s Parent Aide model. Staff are currently being trained in the Nurturing Parenting curriculum (<https://www.nurturingparenting.com/>) which will be implemented with RFL clients who have or are raising children. This is great news as it ties directly into increasing services as originally outlined in the LOI to White Family Foundation. The Exchange Parent Aide Program Model is an **Evidence-Based model** as found in the California Evidence-Based Clearinghouse. [CEBC » Search » Results \(cebc4cw.org\)](#). Below is the history of the Exchange Parent Aide model, from <https://www.nationalexchangeclub.org/cap/>.

“The organization’s most significant and successful method of countering child abuse is by working directly with at-risk parents through its signature program, the Exchange Parent Aide home visitation model. Through coordination with a nationwide network of community-based Exchange Club Centers for the Prevention of Child Abuse, the program has helped more than 691,120 families break the cycle of violence, thus creating safer homes for more than 1,727,800 children.

Exchange Parent Aide evolved from the knowledge and experience of the dynamics surrounding child abuse and neglect. It is based on the work of Sharon Pallone in Little Rock, Arkansas, as well as research and concepts first introduced by Drs. Ray Helfer and Henry Kempe, 1960s pioneers in the field. Their leading research on the battered child syndrome expressed belief that most parents who abuse their children are not psychotic and were likely to have been abused themselves as children. Most abusive parents grew up without positive role models for good parenting and often have difficulty developing healthy and trusting relationships.

The Exchange Parent Aide program has been replicated since 1979, in more than 80 communities throughout 28 states and in Puerto Rico. It is utilized in rural, urban, and suburban areas, serving diverse populations in a culturally-responsive manner. Additionally, a recent randomized controlled study indicates significant impact through reduced maternal stress, maternal depression, and maternal anxiety; increased parental mastery; and reduced psychological aggression and physical assault toward children.

Exchange was awarded a Presidential Award from the White House Office of Private Sector Initiatives. The organization is also a charter member of The National Child Abuse Coalition and is a Partner in Prevention with the Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services."

The purpose of this grant is to make happy memories and give young parents an opportunity to thrive in our community. Our biggest accomplishment is that RFL clients in Mommy & Me and Wingmen have a higher success rate of keeping custody of their children. Currently 89% of young RFL parents have custody of their children, but not all of them attend Mommy & Me or Wingmen. For those parents who do participate in Mommy & Me and Wingmen support groups, 93% have custody of their children. Mommy & Me and Wingmen services are held separately, monthly. Male staff and volunteers mentor the men/fathers while female staff and volunteers mentor the women/mothers. Former foster youth are part of the staffing pattern at RFL, and they bring an authentic voice to all services while gaining the respect and trust of the clients. Protective factor approaches are built into events and services through outings and new traditions including attending Rays games; Easter egg hunts; Mother's Day events, Father's Day events and other holidays, as well as how to shop and prepare healthy food; bowling; game nights; pool parties and pool tournaments.

With a \$10,000 investment from White Family Foundation, more Exchange Parent Aide and Nurturing Parenting services and evidence-informed trainings can be provided for staff and clients; more data on what works can be collected and more effort can be put toward recruiting other new parents to join in the activities. The allocation of funds will include approximately \$2,000 to be used for staffing and administration, \$4,000 on evidence-based programming; \$2,000 on goods and services for parents and their children; and \$2000 for enrichment events.

Parent education topics may include: How to foster play-based learning and pro-social skill development; Ways to have a positive impact on their child’s social learning, language, and literacy development through play; Parent coaching that uses behavior analysis to support families through positive behavior change; Mindful parenting; Co-parenting collaboration; Empathy training to improve the mother-father relationship; Empathy training to improve the child-parent relations; Healthy sleep; Basic skills of positive behavior interventions with the goal of preventing children’s/teen’s behavior problems from emerging; How to create a balance in the home between child-led and adult-led activities; Transitioning from a period of incarceration (where applicable); Understanding child development; Enhancing parenting skills, including but not limited to newborn and infant care education; Legal advocacy specific to visitation rights; and more.

Ready for Life is an established nonprofit with infrastructure and technology services in place to meet the needs of the grant. Computer and electronic communication technology is in place and will be accessed for reporting. Ready for Life has been collecting data using several platforms including Homeless Management Information Systems (HMIS) to better serve and connect clients to other local resources and agencies. Outcomes will be measured based on the evidence-based tools provided in the evidence-based curriculum. Since RFL is in the training for this model now, specific outcomes measures and tools will be provided prior to grant commencement.

2. Financials - attached

- Organization Annual Budget FY23 (ending June 30, 2023) = \$ 921,500
- Organization Balance Sheet/Profit & Loss Statements – April 2023 attached
- Program Budget – Not applicable
- Your most recent IRS 990 tax filing - attached

READY FOR LIFE, INC.
 BUDGET - STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS
 JULY 1, 2022 - JUNE 31, 2023

| REVENUE AND SUPPORT: | | 2022-2023 | |
|--|---------------------------------|------------------|---------------|
| CONTRIBUTIONS: | | | |
| Individual | | \$ 250,000.00 | |
| Corporation | | \$ 75,000.00 | |
| Foundations | | \$ 125,000.00 | |
| Group / Clubs | | \$ 110,000.00 | |
| Government | | \$ 48,000.00 | \$ 608,000.00 |
| REIMBURSED EXPENSES: | | | |
| BayCare Ready for Health grant | | \$ 25,000.00 | |
| Facility | | \$ 5,000.00 | |
| Staff cost | | \$ 71,000.00 | |
| Youth assistance | | \$ 40,000.00 | |
| | | | \$ 131,500.00 |
| SPECIAL EVENT REVENUE: | | | |
| Fundraising events - RFL: | | | |
| | Night in the park | \$ 70,000.00 | \$ 70,000.00 |
| Fundraising events - Third party: | | | |
| | Bowl-a-thon | \$ 10,000.00 | |
| | Fishing tournaments | \$ 25,000.00 | |
| | PolyWogs | \$ 24,000.00 | |
| | Porsche Club | \$ 12,000.00 | |
| | Other | \$ 15,000.00 | \$ 112,000.00 |
| | | | \$ 182,000.00 |
| TOTAL REVENUE AND SUPPORT | | | \$ 921,500.00 |
| EXPENSES: | | | |
| PAYROLL: | | | |
| | Salary expense | | 540,000.00 |
| | Payroll taxes | | 49,000.00 |
| | Benefits | | \$ 54,000.00 |
| | Total salary and benefits | | \$ 643,000.00 |
| FINANCIAL PROCESSING FEES: | | | |
| | Bank service charges | | \$ 105.00 |
| | Credit card processing fees | | \$ 2,375.00 |
| | Total financial processing fees | | \$ 2,480.00 |
| DUES AND SUBSCRIPTIONS | | | \$ 1,500.00 |

READY FOR LIFE, INC.
 BUDGET - STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS
 JULY 1, 2022 - JUNE 31, 2023

| | | | | |
|--|--|--|--|--------------|
| | DONATIONS-IN-KIND | | | |
| | Rent (in-kind) | | | |
| | Donated goods (in-kind) | | | |
| | Volunteer hours (in-kind) | | | |
| | Total donations-in-kind | | | \$ - |
| | FUNDRAISING EXPENSES: | | | |
| | Annual luncheon | | | |
| | RFL fundraising expenses | | | |
| | Total fundraising expenses | | | \$ 15,000.00 |
| | INFORMATION TECHNOLOGY: | | | |
| | Hardware | | | \$ 3,000.00 |
| | Software | | | \$ 5,000.00 |
| | Support | | | \$ 3,500.00 |
| | Total information tech expenses | | | \$ 11,500.00 |
| | | | | |
| | INSURANCE | | | \$ 3,500.00 |
| | | | | |
| | MEETINGS EXPENSE | | | \$ 2,000.00 |
| | OFFICE EXPENSE: | | | |
| | Office supplies | | | \$ 2,000.00 |
| | Postage and delivery | | | \$ 420.00 |
| | Printer / copier | | | \$ 2,800.00 |
| | Total office expenses | | | \$ 5,220.00 |
| | OTHER EXPENSES: | | | |
| | Licenses and permits | | | \$ 500.00 |
| | Printing and reproduction | | | \$ 500.00 |
| | Total other expenses | | | \$ 1,000.00 |
| | PROFESSIONAL SERVICES: | | | |
| | Professional Fees | | | \$ 25,000.00 |
| | Accounting fees | | | \$ 9,000.00 |
| | Attorney fees | | | \$ - |
| | Total professional fees | | | \$ 34,000.00 |
| | | | | |
| | PROMOTIONAL EXPENSES/Mktg. Cord | | | \$ 24,000.00 |
| | OCCUPANCY EXPENSES: | | | |
| | Rent | | | \$ 76,000.00 |
| | Repairs and maintenance | | | \$ 1,000.00 |
| | Utilities - gas and electric | | | \$ 8,800.00 |
| | Phone and cable services | | | \$ 5,500.00 |
| | Janitorial expenses | | | \$ 1,500.00 |
| | Pest control | | | \$ 500.00 |
| | Total occupancy expenses | | | \$ 93,300.00 |

Ready For Life, Inc.

Budget vs. Actuals: FY_2022_2023 - P&L

April 2023

| | TOTAL | | |
|---------------------------------|---------------------|---------------------|---------------------|
| | ACTUAL | BUDGET | OVER BUDGET |
| Income | | | |
| (I) Contributions | 242,146.88 | 50,666.66 | 191,480.22 |
| (I) In-Kind Income | 5,587.20 | | 5,587.20 |
| Reimbursed Expenses | 3,781.80 | 10,958.33 | -7,176.53 |
| RFL (I) Fundraising Events | 23,978.00 | 35,000.00 | -11,022.00 |
| Third Party Fundraising Events | 2,347.50 | 25,000.00 | -22,652.50 |
| Total Income | \$277,841.38 | \$121,624.99 | \$156,216.39 |
| GROSS PROFIT | \$277,841.38 | \$121,624.99 | \$156,216.39 |
| Expenses | | | |
| Bank Service Charges | | 8.75 | -8.75 |
| Credit Card Processing Fees | 377.57 | 197.92 | 179.65 |
| Dues and Subscriptions | 298.25 | 125.00 | 173.25 |
| FSS Expense | 192.78 | | 192.78 |
| Fundraising Expenses | 12,858.41 | 1,250.00 | 11,608.41 |
| In-Kind (E) Expense | 5,587.20 | | 5,587.20 |
| Insurance | 334.11 | 291.67 | 42.44 |
| IT Expenses | 2,152.41 | 958.34 | 1,194.07 |
| Licenses and Permits | | 41.67 | -41.67 |
| Marketing & Promotional Expense | 2,947.09 | 2,000.00 | 947.09 |
| Meeting Expenses | 36.84 | 166.67 | -129.83 |
| Office Expense | 6,593.31 | 6,768.33 | -175.02 |
| Payroll | 52,218.95 | 53,583.33 | -1,364.38 |
| Printing and Reproduction | | 41.67 | -41.67 |
| Professional Development | 1,312.79 | | 1,312.79 |
| Professional Fees | 9,726.25 | 2,833.33 | 6,892.92 |
| Recruiting | 148.20 | | 148.20 |
| Repairs/Maintenance | | 83.33 | -83.33 |
| Utilities | 1,156.73 | 1,358.33 | -201.60 |
| Website Expenses | 216.00 | | 216.00 |
| Youth Support | 7,957.93 | 7,083.33 | 874.60 |
| Total Expenses | \$104,114.82 | \$76,791.67 | \$27,323.15 |
| NET OPERATING INCOME | \$173,726.56 | \$44,833.32 | \$128,893.24 |
| Other Income | | | |
| Interest Income | 356.93 | | 356.93 |
| Raymond James Change in Value | 119.66 | | 119.66 |
| Total Other Income | \$476.59 | \$0.00 | \$476.59 |
| Other Expenses | | | |
| Ask My Accountant | -3,875.00 | | -3,875.00 |
| Total Other Expenses | \$ -3,875.00 | \$0.00 | \$ -3,875.00 |
| NET OTHER INCOME | \$4,351.59 | \$0.00 | \$4,351.59 |
| NET INCOME | \$178,078.15 | \$44,833.32 | \$133,244.83 |

Ready For Life, Inc.

Budget vs. Actuals: FY_2022_2023 - P&L

April 2023

Ready For Life, Inc.

Budget vs. Actuals: FY_2022_2023 - FY23 P&L

July 2022 - April 2023

| | TOTAL | | |
|---|-----------------------|---------------------|---------------------|
| | ACTUAL | BUDGET | OVER BUDGET |
| Income | | | |
| (I) Contributions | 819,102.97 | 506,666.68 | 312,436.29 |
| (I) In-Kind Income | 136,834.80 | | 136,834.80 |
| Other | 260.00 | | 260.00 |
| Reimbursed Expenses | 51,438.95 | 109,583.38 | -58,144.43 |
| RFL (I) Fundraising Events | 71,728.49 | 70,000.00 | 1,728.49 |
| Third Party Fundraising Events | 93,942.79 | 112,000.00 | -18,057.21 |
| Total Income | \$1,173,308.00 | \$798,250.06 | \$375,057.94 |
| GROSS PROFIT | \$1,173,308.00 | \$798,250.06 | \$375,057.94 |
| Expenses | | | |
| Bank Service Charges | 228.06 | 87.50 | 140.56 |
| Credit Card Processing Fees | 2,935.29 | 1,979.20 | 956.09 |
| Dues and Subscriptions | 3,204.30 | 1,250.00 | 1,954.30 |
| FSS Expense | 24,157.82 | | 24,157.82 |
| Fundraising Expenses | 29,764.10 | 12,500.00 | 17,264.10 |
| In-Kind (E) Expense | 136,834.80 | | 136,834.80 |
| Insurance | 3,417.61 | 2,916.70 | 500.91 |
| IT Expenses | 13,973.16 | 9,583.40 | 4,389.76 |
| Licenses and Permits | 50.00 | 416.70 | -366.70 |
| Marketing & Promotional Expense | 29,476.01 | 20,000.00 | 9,476.01 |
| Meeting Expenses | 2,407.18 | 1,666.70 | 740.48 |
| Miscellaneous | 100.00 | | 100.00 |
| Office Expense | 61,275.22 | 67,683.30 | -6,408.08 |
| Payroll | 490,803.79 | 535,833.30 | -45,029.51 |
| Printing and Reproduction | | 416.70 | -416.70 |
| Professional Development | 5,047.30 | | 5,047.30 |
| Professional Fees | 32,274.93 | 28,333.30 | 3,941.63 |
| Recruiting | 148.20 | | 148.20 |
| Repairs/Maintenance | 5,007.12 | 833.30 | 4,173.82 |
| Utilities | 16,485.26 | 13,583.30 | 2,901.96 |
| Voided Check | 0.00 | | 0.00 |
| Website Expenses | 312.00 | | 312.00 |
| Youth Support | 45,037.25 | 70,833.30 | -25,796.05 |
| Youth Support - Restricted Exps (deleted) | 1,074.83 | | 1,074.83 |
| Total Expenses | \$904,014.23 | \$767,916.70 | \$136,097.53 |
| NET OPERATING INCOME | \$269,293.77 | \$30,333.36 | \$238,960.41 |
| Other Income | | | |
| Employee Retention | 42,339.84 | | 42,339.84 |
| Interest Income | 2,696.79 | | 2,696.79 |
| Other Income | 200.00 | | 200.00 |
| Raymond James Change in Value | 36.09 | | 36.09 |
| Total Other Income | \$45,272.72 | \$0.00 | \$45,272.72 |

Ready For Life, Inc.

Budget vs. Actuals: FY_2022_2023 - FY23 P&L

July 2022 - April 2023

| | TOTAL | | |
|-----------------------------|---------------------|--------------------|---------------------|
| | ACTUAL | BUDGET | OVER BUDGET |
| Other Expenses | | | |
| Ask My Accountant | 0.00 | | 0.00 |
| Reimbursable Expense | 1,096.69 | | 1,096.69 |
| Total Other Expenses | \$1,096.69 | \$0.00 | \$1,096.69 |
| NET OTHER INCOME | \$44,176.03 | \$0.00 | \$44,176.03 |
| NET INCOME | \$313,469.80 | \$30,333.36 | \$283,136.44 |

Ready For Life, Inc.
Profit and Loss Comparison
April 2023

| | TOTAL | | |
|---|---------------------|--------------------|---------------------|
| | APR 2023 | APR 2022 (PY) | CHANGE |
| Income | | | |
| (I) Contributions | 242,146.88 | 64,845.95 | 177,300.93 |
| (I) In-Kind Income | 5,587.20 | 14,210.91 | -8,623.71 |
| Dividend Income-Raymond James Dividend Income | | 100.29 | -100.29 |
| Reimbursed Expenses | 3,781.80 | 14,171.06 | -10,389.26 |
| RFL (I) Fundraising Events | 23,978.00 | 3,070.00 | 20,908.00 |
| Third Party Fundraising Events | 2,347.50 | | 2,347.50 |
| Total Income | \$277,841.38 | \$96,398.21 | \$181,443.17 |
| GROSS PROFIT | \$277,841.38 | \$96,398.21 | \$181,443.17 |
| Expenses | | | |
| Computer Expenses | | 225.00 | -225.00 |
| Credit Card Processing Fees | 377.57 | 800.40 | -422.83 |
| Dues and Subscriptions | 298.25 | 12.00 | 286.25 |
| FSS Expense | 192.78 | | 192.78 |
| Fundraising Expenses | 12,858.41 | 450.00 | 12,408.41 |
| In-Kind (E) Expense | 5,587.20 | 14,210.91 | -8,623.71 |
| Insurance | 334.11 | 255.66 | 78.45 |
| IT Expenses | 2,152.41 | 486.12 | 1,666.29 |
| Marketing & Promotional Expense | 2,947.09 | 1,490.49 | 1,456.60 |
| Meeting Expenses | 36.84 | | 36.84 |
| Office Expense | 6,593.31 | 6,616.43 | -23.12 |
| Payroll | 52,218.95 | 42,678.53 | 9,540.42 |
| Professional Development | 1,312.79 | | 1,312.79 |
| Professional Fees | 9,726.25 | 1,850.00 | 7,876.25 |
| Recruiting | 148.20 | | 148.20 |
| Taxes (deleted) | | 70.00 | -70.00 |
| Utilities | 1,156.73 | 1,487.62 | -330.89 |
| Website Expenses | 216.00 | 204.00 | 12.00 |
| Youth Support | 7,957.93 | 2,839.50 | 5,118.43 |
| Total Expenses | \$104,114.82 | \$73,676.66 | \$30,438.16 |
| NET OPERATING INCOME | \$173,726.56 | \$22,721.55 | \$151,005.01 |
| Other Income | | | |
| Interest Income | 356.93 | 3.25 | 353.68 |
| Raymond James Change in Value | 119.66 | -233.11 | 352.77 |
| Total Other Income | \$476.59 | \$ -229.86 | \$706.45 |
| Other Expenses | | | |
| Ask My Accountant | -3,875.00 | | -3,875.00 |
| Total Other Expenses | \$ -3,875.00 | \$0.00 | \$ -3,875.00 |
| NET OTHER INCOME | \$4,351.59 | \$ -229.86 | \$4,581.45 |
| NET INCOME | \$178,078.15 | \$22,491.69 | \$155,586.46 |

Ready For Life, Inc.

Profit and Loss

July 2022 - April 2023

| | TOTAL | | |
|---|-----------------------|--------------------------|---------------------|
| | JUL 2022 - APR 2023 | JUL 2021 - APR 2022 (PY) | CHANGE |
| Income | | | |
| (I) Contributions | 819,102.97 | 519,417.10 | 299,685.87 |
| (I) In-Kind Income | 136,834.80 | 158,976.73 | -22,141.93 |
| Dividend Income-Raymond James Dividend Income | | 100.29 | -100.29 |
| Other | 260.00 | 150.00 | 110.00 |
| Realized Gain | | 186.93 | -186.93 |
| Reimbursed Expenses | 51,438.95 | 100,137.12 | -48,698.17 |
| RFL (I) Fundraising Events | 71,728.49 | 24,006.00 | 47,722.49 |
| Third Party Fundraising Events | 93,942.79 | 49,155.50 | 44,787.29 |
| Total Income | \$1,173,308.00 | \$852,129.67 | \$321,178.33 |
| GROSS PROFIT | \$1,173,308.00 | \$852,129.67 | \$321,178.33 |
| Expenses | | | |
| Bank Service Charges | 228.06 | 463.57 | -235.51 |
| Computer Expenses | | 646.16 | -646.16 |
| Credit Card Processing Fees | 2,935.29 | 3,324.18 | -388.89 |
| Dues and Subscriptions | 3,204.30 | 1,392.00 | 1,812.30 |
| FSS Expense | 24,157.82 | | 24,157.82 |
| Fundraising Expenses | 29,764.10 | 14,182.65 | 15,581.45 |
| In-Kind (E) Expense | 136,834.80 | 158,976.73 | -22,141.93 |
| Insurance | 3,417.61 | 3,068.06 | 349.55 |
| Interest Expense | | 117.64 | -117.64 |
| IT Expenses | 13,973.16 | 9,727.38 | 4,245.78 |
| Licenses and Permits | 50.00 | | 50.00 |
| Marketing & Promotional Expense | 29,476.01 | 16,191.26 | 13,284.75 |
| Meeting Expenses | 2,407.18 | 2,861.11 | -453.93 |
| Miscellaneous | 100.00 | | 100.00 |
| Office Expense | 61,275.22 | 71,980.35 | -10,705.13 |
| Payroll | 490,803.79 | 466,348.53 | 24,455.26 |
| Printing and Reproduction | | 462.00 | -462.00 |
| Professional Development | 5,047.30 | 1,149.00 | 3,898.30 |
| Professional Fees | 32,274.93 | 18,406.55 | 13,868.38 |
| Recruiting | 148.20 | | 148.20 |
| Repairs/Maintenance | 5,007.12 | 813.99 | 4,193.13 |
| Taxes (deleted) | | 70.00 | -70.00 |
| Utilities | 16,485.26 | 16,551.00 | -65.74 |
| Website Expenses | 312.00 | 204.00 | 108.00 |
| Youth Support | 45,037.25 | 56,301.44 | -11,264.19 |
| Youth Support - Restricted Exps (deleted) | 1,074.83 | | 1,074.83 |
| Total Expenses | \$904,014.23 | \$843,237.60 | \$60,776.63 |
| NET OPERATING INCOME | \$269,293.77 | \$8,892.07 | \$260,401.70 |

Ready For Life, Inc.

Profit and Loss

July 2022 - April 2023

| | TOTAL | | |
|-------------------------------|---------------------|--------------------------|----------------------|
| | JUL 2022 - APR 2023 | JUL 2021 - APR 2022 (PY) | CHANGE |
| Other Income | | | |
| Dividend Income | | 341.15 | -341.15 |
| Employee Retention | 42,339.84 | | 42,339.84 |
| Interest Income | 2,696.79 | 255.97 | 2,440.82 |
| Other Income | 200.00 | | 200.00 |
| PPP Loan Forgiveness | | 99,835.00 | -99,835.00 |
| Raymond James Change in Value | 36.09 | -1,512.23 | 1,548.32 |
| Total Other Income | \$45,272.72 | \$98,919.89 | \$ -53,647.17 |
| Other Expenses | | | |
| Reimbursable Expense | 1,096.69 | | 1,096.69 |
| Total Other Expenses | \$1,096.69 | \$0.00 | \$1,096.69 |
| NET OTHER INCOME | \$44,176.03 | \$98,919.89 | \$ -54,743.86 |
| NET INCOME | \$313,469.80 | \$107,811.96 | \$205,657.84 |

Caution: Forms printed from within Adobe Acrobat may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

CLIENT'S COPY

March 29, 2023

Ready for Life, Inc.
2300 Tall Pines Drive, #100
Largo, FL 33771

Ready for Life, Inc.:

Please read all instructions carefully and note the following form 8879 return procedures. Please sign and return form 8879-EO as soon as possible in order for your return to be timely filed. The signed form 8879-EO may be returned to our office via hand delivery, mail, email to efileinbox@rgcocpa.com, fax to 813-874-6785.

Enclosed is the organization's 2021 Exempt Organization return.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us as soon as possible.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Very truly yours,

Rivero, Gordimer & Company, P.A.

IRS e-file Signature Authorization for a Tax Exempt Entity

Form **8879-TE**

For calendar year 2021, or fiscal year beginning JUL 1, 2021, and ending JUN 30, 2022

2021

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879TE for the latest information.**

Name of filer

READY FOR LIFE, INC.

EIN or SSN

26-4032979

Name and title of officer or person subject to tax

**KATHY MIZE
DIRECTOR/CEO**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

| | | | |
|------------------------------------|-------------------------------------|---|-----------------------------|
| 1a Form 990 check here | <input checked="" type="checkbox"/> | b Total revenue, if any (Form 990, Part VIII, column (A), line 12) | 1b <u>1,074,608.</u> |
| 2a Form 990-EZ check here | <input type="checkbox"/> | b Total revenue, if any (Form 990-EZ, line 9) | 2b _____ |
| 3a Form 1120-POL check here | <input type="checkbox"/> | b Total tax (Form 1120-POL, line 22) | 3b _____ |
| 4a Form 990-PF check here | <input type="checkbox"/> | b Tax based on investment income (Form 990-PF, Part V, line 5) | 4b _____ |
| 5a Form 8868 check here | <input type="checkbox"/> | b Balance due (Form 8868, line 3c) | 5b _____ |
| 6a Form 990-T check here | <input type="checkbox"/> | b Total tax (Form 990-T, Part III, line 4) | 6b _____ |
| 7a Form 4720 check here | <input type="checkbox"/> | b Total tax (Form 4720, Part III, line 1) | 7b _____ |
| 8a Form 5227 check here | <input type="checkbox"/> | b FMV of assets at end of tax year (Form 5227, Item D) | 8b _____ |
| 9a Form 5330 check here | <input type="checkbox"/> | b Tax due (Form 5330, Part II, line 19) | 9b _____ |
| 10a Form 8038-CP check here | <input type="checkbox"/> | b Amount of credit payment requested (Form 8038-CP, Part III, line 22) | 10b _____ |

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize RIVERO, GORDIMER & COMPANY, P.A. to enter my PIN 99999
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

***** THIS IS NOT A FILEABLE COPY *****

Date

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

50005333602

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

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

A For the **2021** calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

| | | |
|--|--|---|
| B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization READY FOR LIFE, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2300 TALL PINES DRIVE, #100 City or town, state or province, country, and ZIP or foreign postal code LARGO, FL 33771 | D Employer identification number 26-4032979 E Telephone number 727-954-3989 |
| F Name and address of principal officer: KATHY MIZE SAME AS C ABOVE | | G Gross receipts \$ 1,089,924. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶ |
| I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | |
| J Website: ▶ WWW.READYFORLIFEPINELLAS.ORG | | |
| K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ | | L Year of formation: 2009 M State of legal domicile: FL |

Part I Summary

| | | |
|------------------------------------|---|--|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: TO ASSIST THE YOUTH OF THE COMMUNITY IN TRANSITIONING FROM FOSTER CARE TO ADULTHOOD. 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 9 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 9 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 12 6 Total number of volunteers (estimate if necessary) 6 174 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. 7b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0. | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) 894,645. Prior Year 1,043,529. Current Year 9 Program service revenue (Part VIII, line 2g) 0. 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,143. 1,098. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 32,240. 29,981. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 928,028. 1,074,608. | |
| Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 490,916. 551,384. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) ▶ 49,933. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 467,462. 410,903. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 958,378. 962,287. 19 Revenue less expenses. Subtract line 18 from line 12 -30,350. 112,321. | |
| Net Assets or Fund Balances | 20 Total assets (Part X, line 16) 388,690. Beginning of Current Year 401,515. End of Year 21 Total liabilities (Part X, line 26) 126,670. 27,174. 22 Net assets or fund balances. Subtract line 21 from line 20 262,020. 374,341. | |

Part II Signature Block

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

| | | |
|-------------------------------|---|---|
| Sign Here | Signature of officer KATHY MIZE, DIRECTOR/CEO Type or print name and title | Date |
| Paid Preparer Use Only | Print/Type preparer's name KEVIN R. BASS | Preparer's signature Date Check if self-employed <input type="checkbox"/> PTIN P01290719 |
| | Firm's name ▶ RIVERO, GORDIMER & COMPANY, P.A. Firm's address ▶ P. O. BOX 172359 TAMPA, FL 33672 | Firm's EIN ▶ 59-3040705 Phone no. (813) 875-7774 |

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III []

1 Briefly describe the organization's mission: THE MISSION OF READY FOR LIFE IS TO ASSIST THE YOUTH OF THE COMMUNITY TRANSITION FROM FOSTER CARE TO ADULTHOOD BY COORDINATING THE PUBLIC AND PRIVATE RESOURCES AVAILABLE TO THEM.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 810,435. including grants of \$) (Revenue \$) YOUTH SUPPORT: TO ENGAGE FOSTER CARE YOUTH, PRIVATE CITIZENS AND PUBLIC RESOURCES TO ASSIST PINELLAS COUNTY FOSTER CARE YOUTH IN SUCCESSFUL TRANSITIONS TO ADULTHOOD. THE FOUNDATION'S GOAL IS TO BE A LINK BETWEEN THE YOUTH AND THE MANY RESOURCES AVAILABLE TO ASSIST THEM AS WELL AS GIVE THE YOUTH THE VOICE TO HELP CREATE AND RUN THE FOUNDATION'S MANY PROGRAMS.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 810,435.

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)? <i>If "Yes," complete Schedule A</i> | 1 X | |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions | 2 X | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | 3 | X |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> | 4 | X |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> | 5 | X |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> | 6 | X |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | 7 | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | 8 | X |
| 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? <i>If "Yes," complete Schedule D, Part IV</i> | 9 | X |
| 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> | 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. | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> | 11a X | |
| 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? <i>If "Yes," complete Schedule D, Part VII</i> | 11b | X |
| c 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? <i>If "Yes," complete Schedule D, Part VIII</i> | 11c | X |
| d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> | 11d X | |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> | 11e | X |
| 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)? <i>If "Yes," complete Schedule D, Part X</i> | 11f X | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> | 12a X | |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> | 12b | X |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | 13 | X |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | 14a | X |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> | 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 foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> | 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 or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> | 16 | X |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions | 17 | X |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | 18 X | |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | 19 | X |
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | 20a | X |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | |
| 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | 21 | X |

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|---|-----|----|
| 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | | X |
| 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | | X |
| 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> | | X |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | |
| c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | | |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | | |
| 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> | | X |
| b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> | | X |
| 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? <i>If "Yes," complete Schedule L, Part II</i> | | X |
| 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | | X |
| 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): | | |
| a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | X | |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | | X |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | | X |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | | X |
| 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | | X |
| 34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> | | X |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | X |
| b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | | |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | | X |
| 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> | | X |
| 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? | X | |

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

| | Yes | No |
|---|-----|----|
| 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable | | |
| b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable | | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | |

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response. Includes questions 2a through 17 regarding employee counts, tax filings, and organizational compliance.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included on line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed FL
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---------------------------------------|---|---|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) KATHY MIZE CEO | 40.00 | | | X | | | | 103,978. | 0. | 0. |
| (2) KENNETH BEATTIE CHAIRMAN | 3.00 | X | | X | | | | 0. | 0. | 0. |
| (3) MARY PAT MCLAIN VICE-CHAIRMAN | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (4) SUSAN DOLL TREASURER | 1.00 | X | | X | | | | 0. | 0. | 0. |
| (5) MELISSA HILL SECRETARY | 1.00 | X | | X | | | | 0. | 0. | 0. |
| (6) PHARES N. RISSER, III DIRECTOR | 2.00 | X | | | | | | 0. | 0. | 0. |
| (7) YVETTE BEAN DIRECTOR | 2.00 | X | | | | | | 0. | 0. | 0. |
| (8) KAY DILLINGER DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (9) SALLY MCLANE DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (10) CRISSY PETTINEO DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|---|---|-----------------------|---------|--------------|------------------------------|----------|---|--|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
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| | | | | | | | | | | |
| 1b Subtotal | | | | | | | 103,978. | 0. | 0. | |
| c Total from continuation sheets to Part VII, Section A | | | | | | | 0. | 0. | 0. | |
| d Total (add lines 1b and 1c) | | | | | | | 103,978. | 0. | 0. | |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

| | Yes | No |
|--|-----|----|
| 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | | X |
| 4 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? <i>If "Yes," complete Schedule J for such individual</i> | | X |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> | | X |

Section B. Independent Contractors

1 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 | (B) Description of services | (C) Compensation |
|----------------------------------|--------------------------------|---------------------|
| NONE | | |
| | | |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

| | | | (A) | (B) | (C) | (D) | |
|---|---|----------------------|----------------|------------------------------------|----------------------------|--|--|
| | | | Total revenue | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under sections 512 - 514 | |
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a Federated campaigns | 1a | | | | | |
| | b Membership dues | 1b | | | | | |
| | c Fundraising events | 1c | 26,125. | | | | |
| | d Related organizations | 1d | | | | | |
| | e Government grants (contributions) | 1e | 99,835. | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above ... | 1f | 917,569. | | | | |
| | g Noncash contributions included in lines 1a-1f | 1g | \$ 130,861. | | | | |
| | h Total. Add lines 1a-1f | | 1,043,529. | | | | |
| Program Service Revenue | 2 a _____ | Business Code | | | | | |
| | b _____ | | | | | | |
| | c _____ | | | | | | |
| | d _____ | | | | | | |
| | e _____ | | | | | | |
| | f All other program service revenue | | | | | | |
| | g Total. Add lines 2a-2f | | | | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | 911. | | | 911. | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | | |
| | 5 Royalties | | | | | | |
| | 6 a Gross rents | 6a | (i) Real | | | | |
| | | | (ii) Personal | | | | |
| | | | | | | | |
| | b Less: rental expenses ... | 6b | | | | | |
| | c Rental income or (loss) | 6c | | | | | |
| | d Net rental income or (loss) | | | | | | |
| | 7 a Gross amount from sales of assets other than inventory | 7a | (i) Securities | 187. | | | |
| | | | (ii) Other | | | | |
| | | | | | | | |
| | b Less: cost or other basis and sales expenses | 7b | 0. | | | | |
| | c Gain or (loss) | 7c | 187. | | | | |
| d Net gain or (loss) | | 187. | 187. | | | | |
| 8 a Gross income from fundraising events (not including \$ 26,125. of contributions reported on line 1c). See Part IV, line 18 | 8a | | 40,677. | | | | |
| | | | 15,316. | | | | |
| | | | | | | | |
| b Less: direct expenses | 8b | | | | | | |
| c Net income or (loss) from fundraising events | | 25,361. | | | 25,361. | | |
| 9 a Gross income from gaming activities. See Part IV, line 19 | 9a | | | | | | |
| | | | | | | | |
| | | | | | | | |
| b Less: direct expenses | 9b | | | | | | |
| c Net income or (loss) from gaming activities | | | | | | | |
| 10 a Gross sales of inventory, less returns and allowances | 10a | | | | | | |
| | | | | | | | |
| | | | | | | | |
| b Less: cost of goods sold | 10b | | | | | | |
| c Net income or (loss) from sales of inventory | | | | | | | |
| Miscellaneous Revenue | 11 a OTHER REVENUE | Business Code | 900099 | 4,620. | 4,620. | | |
| | b _____ | | | | | | |
| | c _____ | | | | | | |
| | d All other revenue | | | | | | |
| | e Total. Add lines 11a-11d | | 4,620. | | | | |
| 12 Total revenue. See instructions | | 1,074,608. | 4,807. | 0. | 26,272. | | |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | | | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 103,978. | 83,654. | 14,424. | 5,900. |
| 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 382,624. | 307,837. | 53,077. | 21,710. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 Other employee benefits | 27,595. | 22,201. | 3,828. | 1,566. |
| 10 Payroll taxes | 37,187. | 29,918. | 5,159. | 2,110. |
| 11 Fees for services (nonemployees): | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | | | | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) | 20,391. | 6,812. | 13,099. | 480. |
| 12 Advertising and promotion | 19,841. | 14,881. | | 4,960. |
| 13 Office expenses | 93,259. | 76,789. | 6,903. | 9,567. |
| 14 Information technology | 12,540. | 10,019. | 646. | 1,875. |
| 15 Royalties | | | | |
| 16 Occupancy | | | | |
| 17 Travel | | | | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 3,018. | 2,523. | 495. | |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 19,434. | 15,635. | 2,696. | 1,103. |
| 23 Insurance | 3,296. | 2,652. | 457. | 187. |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) | | | | |
| a IN-KIND DONATIONS | 130,861. | 130,861. | | |
| b YOUTH SUPPORT | 72,096. | 72,096. | | |
| c UTILITIES | 19,264. | 17,654. | 1,135. | 475. |
| d PROFESSIONAL DEVELOPMEN | 16,903. | 16,903. | | |
| e All other expenses | | | | |
| 25 Total functional expenses. Add lines 1 through 24e | 962,287. | 810,435. | 101,919. | 49,933. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. | | | | |

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

| | | (A) Beginning of year | | (B) End of year |
|---|--|--------------------------|-----------|--------------------|
| Assets | 1 Cash - non-interest-bearing | 76,283. | 1 | 103,215. |
| | 2 Savings and temporary cash investments | 151,082. | 2 | 92,996. |
| | 3 Pledges and grants receivable, net | | 3 | |
| | 4 Accounts receivable, net | 5,677. | 4 | |
| | 5 Loans and other receivables from 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 | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | | 9 | 200. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 132,334. | | |
| | b Less: accumulated depreciation | 10b 81,257. | 55,912. | 10c 51,077. |
| | 11 Investments - publicly traded securities | 95,598. | 11 | 100,189. |
| | 12 Investments - other securities. See Part IV, line 11 | | 12 | |
| | 13 Investments - program-related. See Part IV, line 11 | | 13 | |
| | 14 Intangible assets | | 14 | |
| | 15 Other assets. See Part IV, line 11 | 4,138. | 15 | 53,838. |
| 16 Total assets. Add lines 1 through 15 (must equal line 33) | 388,690. | 16 | 401,515. | |
| Liabilities | 17 Accounts payable and accrued expenses | 26,835. | 17 | 27,174. |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | | 19 | |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 Unsecured notes and loans payable to unrelated third parties | 99,835. | 24 | |
| | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | | 25 | |
| | 26 Total liabilities. Add lines 17 through 25 | 126,670. | 26 | 27,174. |
| Net Assets or Fund Balances | Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33. | | | |
| | 27 Net assets without donor restrictions | 178,110. | 27 | 355,249. |
| | 28 Net assets with donor restrictions | 83,910. | 28 | 19,092. |
| | Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33. | | | |
| | 29 Capital stock or trust principal, or current funds | | 29 | |
| | 30 Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| | 31 Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| | 32 Total net assets or fund balances | 262,020. | 32 | 374,341. |
| 33 Total liabilities and net assets/fund balances | 388,690. | 33 | 401,515. | |

Part XI Reconciliation of Net Assets

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

| | | | |
|-----------|--|-----------|------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 1,074,608. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 962,287. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 112,321. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 262,020. |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | 374,341. |

Part XII Financial Statements and Reporting

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

| | | Yes | No |
|-----------|---|-----|----|
| 1 | Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | | X |
| b | Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | X | |
| c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. | | X |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____ | | X |
| 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 (2021)

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

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Tax revenues levied for the organization'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 | | | | | | |
| 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) | | | | | | |
| 6 Public support. Subtract line 5 from line 4. | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
|---|----------|----------|----------|----------|----------|--------------------------|
| 7 Amounts from line 4 | | | | | | |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ... | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on ... | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 11 Total support. Add lines 7 through 10 | | | | | | |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | |
| 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | |
|---|----|--------------------------|
| 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))..... | 14 | % |
| 15 Public support percentage from 2020 Schedule A, Part II, line 14 | 15 | % |
| 16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| 17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | <input type="checkbox"/> |

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

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
|---|----------|----------|----------|----------|------------|------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 486,295. | 702,870. | 773,200. | 665,556. | 1,074,555. | 3,702,476. |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | 486,295. | 702,870. | 773,200. | 665,556. | 1,074,555. | 3,702,476. |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | 42,146. | 126,090. | 96,120. | 55,600. | 49,926. | 369,882. |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | 0. |
| c Add lines 7a and 7b | 42,146. | 126,090. | 96,120. | 55,600. | 49,926. | 369,882. |
| 8 Public support. (Subtract line 7c from line 6.) | | | | | | 3,332,594. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
|--|----------|----------|----------|----------|------------|------------|
| 9 Amounts from line 6 | 486,295. | 702,870. | 773,200. | 665,556. | 1,074,555. | 3,702,476. |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 2,626. | 1,975. | 2,524. | 1,143. | 911. | 9,179. |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | 2,626. | 1,975. | 2,524. | 1,143. | 911. | 9,179. |
| 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.) | 105,954. | 241,557. | 53,640. | 37,806. | 40,677. | 479,634. |
| 13 Total support. (Add lines 9, 10c, 11, and 12.) | 594,875. | 946,402. | 829,364. | 704,505. | 1,116,143. | 4,191,289. |

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

| | | |
|---|-----------|---------|
| 15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) | 15 | 79.51 % |
| 16 Public support percentage from 2020 Schedule A, Part III, line 15 | 16 | 76.75 % |

Section D. Computation of Investment Income Percentage

| | | |
|---|-----------|-------|
| 17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) | 17 | .22 % |
| 18 Investment income percentage from 2020 Schedule A, Part III, line 17 | 18 | .25 % |

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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

| | Yes | No |
|--|-----|----|
| 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i> | | |
| 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i> | | |
| 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i> | | |
| 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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i> | | |
| c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i> | | |
| 4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i> | | |
| b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i> | | |
| 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)? <i>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.</i> | | |
| 5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i> | | |
| 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? <i>If "Yes," provide detail in Part VI.</i> | | |
| 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i> | | |
| 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i> | | |
| 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))? <i>If "Yes," provide detail in Part VI.</i> | | |
| 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? <i>If "Yes," provide detail in Part VI.</i> | | |
| 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? <i>If "Yes," provide detail in Part VI.</i> | | |
| 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)? <i>If "Yes," answer line 10b below.</i> | | |
| b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i> | | |

Part 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? | | |
| b A family member of a person described on line 11a above? | | |
| c 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 . | | |
| 11a | | |
| 11b | | |
| 11c | | |

Section 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 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. | | |
| 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. | | |
| 1 | | |
| 2 | | |

Section C. Type II Supporting Organizations

| | Yes | No |
|--|-----|----|
| 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | | |
| 1 | | |

Section D. All Type III Supporting Organizations

| | Yes | No |
|---|-----|----|
| 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? | | |
| 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | | |
| 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 supported organizations played in this regard. | | |
| 1 | | |
| 2 | | |
| 3 | | |

Section E. Type III Functionally Integrated Supporting Organizations

| | | | |
|---|--|-----|----|
| 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). | | | |
| a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). | | | |
| 2 Activities Test. Answer lines 2a and 2b below. | | Yes | No |
| a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | | | |
| b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. | | | |
| 3 Parent of Supported Organizations. Answer lines 3a and 3b below. | | | |
| a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI . | | | |
| b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | | | |
| 2a | | | |
| 2b | | | |
| 3a | | | |
| 3b | | | |

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

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 must complete Sections A through E.

| Section 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 | |

| Section 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): | | |
| a | Average monthly value of securities | 1a | |
| b | Average monthly cash balances | 1b | |
| c | Fair market value of other non-exempt-use assets | 1c | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | |
| e | Discount claimed for blockage or other factors (explain in detail in Part VI): | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 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 | |

| Section 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 | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). | | |

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

| Section D - Distributions | | Current Year |
|---------------------------|--|--------------|
| 1 | Amounts paid to supported organizations to accomplish exempt purposes | 1 |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | 2 |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | 3 |
| 4 | Amounts paid to acquire exempt-use assets | 4 |
| 5 | Qualified set-aside amounts (prior IRS approval required - provide 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 organization is responsive (provide details in Part VI). See instructions. | 8 |
| 9 | Distributable amount for 2021 from Section C, line 6 | 9 |
| 10 | Line 8 amount divided by line 9 amount | 10 |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2021 | (iii) Distributable Amount for 2021 |
|--|-----------------------------|--|---|
| 1 Distributable amount for 2021 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2021 | | | |
| a From 2016 | | | |
| b From 2017 | | | |
| c From 2018 | | | |
| d From 2019 | | | |
| e From 2020 | | | |
| f Total of lines 3a through 3e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2021 distributable amount | | | |
| i Carryover from 2016 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | |
| 4 Distributions for 2021 from Section D, line 7: \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2021 distributable amount | | | |
| c Remainder. Subtract lines 4a and 4b from line 4. | | | |
| 5 Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. | | | |
| 7 Excess distributions carryover to 2022. Add lines 3j and 4c. | | | |
| 8 Breakdown of line 7: | | | |
| a Excess from 2017 | | | |
| b Excess from 2018 | | | |
| c Excess from 2019 | | | |
| d Excess from 2020 | | | |
| e Excess from 2021 | | | |

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, 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. (See instructions.)

PART III, SECTION B, LINE 12, EXPLANATION FOR OTHER INCOME:

FUNDRAISING EVENT INCOME - SEE SCHEDULE G PART II

Multiple horizontal lines for providing additional information.

Schedule A

Payments from Disqualified Persons
Included on Part III, Line 7a

2021

** Do Not File **

*** Not Open to Public Inspection ***

| Payer's Name | 2017 Amount | 2018 Amount | 2019 Amount | 2020 Amount | 2021 Amount |
|---|----------------|----------------|----------------|----------------|----------------|
| GERALD HOGAN | 32,146. | 26,100. | 39,460. | 14,500. | 0. |
| P.N. RISSER, III | 10,000. | 80,940. | 27,960. | 32,700. | 20,190. |
| MARY PAT MCLAIN | 0. | 0. | 0. | 0. | 6,660. |
| MARY PATRICIA MCLAIN TRUST | 0. | 6,690. | 7,800. | 5,000. | 0. |
| EDIE BANKS | 0. | 7,260. | 7,350. | 2,000. | 0. |
| YVETTE BEAN, REUSABLE TRANSPORT P | 0. | 5,100. | 8,100. | 0. | 9,960. |
| BETH DILLINGER FOUNDATION | 0. | 0. | 5,450. | 1,400. | 0. |
| KENNETH BEATTIE | 0. | 0. | 0. | 0. | 8,919. |
| KAY DILLINGER | 0. | 0. | 0. | 0. | 1,140. |
| SUSAN DOLL | 0. | 0. | 0. | 0. | 268. |
| MELISSA HILL | 0. | 0. | 0. | 0. | 1,133. |
| SALLY MCLANE | 0. | 0. | 0. | 0. | 200. |
| KATHY MIZE | 0. | 0. | 0. | 0. | 1,456. |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total to Schedule A, Part III, Line 7a | 42,146. | 126,090. | 96,120. | 55,600. | 49,926. |

123172 04-01-21

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990 or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

READY FOR LIFE, INC.

Employer identification number

26-4032979

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)

Name of organization

Employer identification number

READY FOR LIFE, INC.

26-4032979

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|---|----------------------------|---|
| 1 | GERALD HOGAN 37 JUNOP CT ST. PETERSBURG, FL 33704 | \$ 15,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 2 | ARTHUR FAMILY FOUNDATION 1001 62ND ST S GULFPORT, FL 33707 | \$ 15,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 3 | MILKEY FAMILY FOUNDATION, INC. 2813 SUNSET WAY ST. PETE BEACH, FL 33706 | \$ 15,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 4 | RAYS BASEBALL FOUNDATION 1 TROPICANA DRIVE ST. PETERSBURG, FL 33705 | \$ 7,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 5 | REUSABLE TRANSPORT PACKAGING, INC. 172 13TH ST N ST. PETERSBURG, FL 33705 | \$ 9,960. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 6 | P.N. RISSER 2865 EXECUTIVE DRIVE CLEARWATER, FL 33762 | \$ 20,190. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

| | |
|---|---|
| Name of organization READY FOR LIFE, INC. | Employer identification number 26-4032979 |
|---|---|

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|--|----------------------------|---|
| 7 | MARY PATRICIA MCLAIN 555 5TH AVENUE N.E. STE 614 ST. PETERSBURG, FL 33701 | \$ 6,660. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 8 | EDITH BANKS 2086 ARMONK DRIVE CLEARWATER, FL 33764 | \$ 64,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 9 | HOUSING FINANCE AUTHORITY OF PINELLAS CO. 26750 US HWY 19 N CLEARWATER, FL 33761 | \$ 60,744. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 10 | THE ALVAH & WYLINE CHAPMAN FOUNDATION PO BOX 55398 ST. PETERSBURG, FL 33732 | \$ 20,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 11 | ROBERT & JENNIFER BANKS CHARITABLE FOUNDATION 516 LAKEVIEW ROAD STE 3 CLEARWATER, FL 33756 | \$ 20,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 12 | THOMAS AND MARY JAMES FOUNDATION 880 CARILLON PKWY ST. PETERSBURG, FL 33716 | \$ 10,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

Name of organization

Employer identification number

READY FOR LIFE, INC.

26-4032979

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|---|----------------------------|---|
| 13 | MCLAIN FOODS, INC. 1918 4TH ST. N ST. PETERSBURG, FL 33704 | \$ 5,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 14 | GRACE RIGGS 88 NEW JERSEY DR DUNEDIN, FL 34698 | \$ 10,007. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 15 | LIGHTNING FOUNDATION 401 CHANNELSIDE DR. TAMPA, FL 33602 | \$ 50,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 16 | COPPERHEAD CHARITIES 36750 US HWY 19 N PALM HARBOR, FL 34684 | \$ 50,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 17 | HOUGH FAMILY FOUNDATION, INC 200 2ND AVE. S #300 ST. PETERSBURG, FL 33701 | \$ 10,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 18 | JAMES AND DIANE REESE 2869 WEATHERSFIELD CT. CLEARWATER, FL 33761 | \$ 21,040. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

| | |
|---|---|
| Name of organization READY FOR LIFE, INC. | Employer identification number 26-4032979 |
|---|---|

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|---|----------------------------|---|
| 19 | GEORGE OFF 204 37TH AVE. N #371 ST. PETERSBURG, FL 33704 | \$ 5,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 20 | ROBIN WARREN 350 2ND ST. N #25 ST. PETERSBURG, FL 33701 | \$ 5,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 21 | ALLEGANY FRANCISCAN MINISTRIES 33920 US HW 19 N STE 269 PALM HARBOR, FL 34684 | \$ 5,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 22 | EVO MERCHANT SERVICES 515 BROADHOLLOW RD. MELVILLE, FL 11747 | \$ 10,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 23 | FIRST PRESBYTERIAN CHURCH OF DUNEDIN 455 SCOTLAND ST. DUNEDIN, FL 34698 | \$ 15,578. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 24 | POLYWOGS 14812 FEATHER COVE LN CLEARWATER, FL 33762 | \$ 20,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

| | |
|---|---|
| Name of organization READY FOR LIFE, INC. | Employer identification number 26-4032979 |
|---|---|

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|--|----------------------------|---|
| 25 | QUEENS COURT, INC. 1626 38TH AVE. N ST. PETERSBURG, FL 33713 | \$ 31,500. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 26 | S & T ENT., INC. 8701 BAY PINES BLVD ST. PETERSBURG, FL 33709 | \$ 7,500. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 27 | SUNCOAST KINGFISH CLASSIC LLC PO BOX 531801 ST. PETERSBURG, FL 33747 | \$ 5,886. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 28 | SUNCOAST REGION PCA, INC. 318 4TH AVE. N TIERRA VERDE, FL 33715 | \$ 8,022. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 29 | ALISON PAYNE 68 DOLPHINE DR. TREASURE ISLAND, FL 33706 | \$ 5,400. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 30 | ANN POINTER 4206 W. JETTON AVE TAMPA, FL 33629 | \$ 5,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

Name of organization

Employer identification number

READY FOR LIFE, INC.

26-4032979

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|--|----------------------------|---|
| 31 | CATHERINE VALENTINE 6019 8TH AVE. N ST. PETERSBURG, FL 33710 | \$ 6,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 32 | KATIE LINDE 730 SAND PINE DR. NE ST. PETERSBURG, FL 33703 | \$ 5,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 33 | KEN BEATTIE 1013 ESTATEWOOD DR. BRANDON, FL 33510 | \$ 8,919. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 34 | MARGARET TRIPLETT 28 RAVENSWOOD RD FLAT ROCK, NC 28731 | \$ 5,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 35 | SCOTT CLENDENING 2836 SEABREEZE DR. S GULFPORT, FL 33707 | \$ 6,320. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 36 | THERESA KIENAST 16463 ELLERDALE LN EDEN PRAIRIE, MN 55326 | \$ 5,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

| | |
|---|---|
| Name of organization READY FOR LIFE, INC. | Employer identification number 26-4032979 |
|---|---|

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|--|----------------------------|---|
| 37 | WILLIAM STOVER 1 BEACH DR. SE UNIT 2303 ST. PETERSBURG, FL 33701 | \$ 10,120. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

| | |
|---|---|
| Name of organization READY FOR LIFE, INC. | Employer identification number 26-4032979 |
|---|---|

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|------------------------------|--|---|----------------------|
| | | \$ _____ | _____ |
| | | \$ _____ | _____ |
| | | \$ _____ | _____ |
| | | \$ _____ | _____ |
| | | \$ _____ | _____ |
| | | \$ _____ | _____ |
| | | \$ _____ | _____ |

| | |
|---|---|
| Name of organization READY FOR LIFE, INC. | Employer identification number 26-4032979 |
|---|---|

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

SCHEDULE D
(Form 990)

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

2021

Open to Public Inspection

Name of the organization **READY FOR LIFE, INC.** Employer identification number **26-4032979**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|------------------------------|------------------------------|
| 1 Total number at end of year | | |
| 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation 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 qualified 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 |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other 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, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment _____ %
 - b** Permanent endowment _____ %
 - c** Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|---------------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | 79,626. | 34,550. | 45,076. |
| d Equipment | | 52,708. | 46,707. | 6,001. |
| e Other | | | | |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) | | | | 51,077. |

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) Financial derivatives | | |
| (2) Closely held equity interests | | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ | | |

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" 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 end-of-year market value |
|---|----------------|---|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ | | |

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|----------------|
| (1) ESCROW | 49,700. |
| (2) SECURITY DEPOSITS | 4,138. |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ | 53,838. |

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability | (b) Book value |
|---|----------------|
| (1) Federal income taxes | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ | |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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 | 1,111,994. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a | Net unrealized gains (losses) on investments | 2a | | |
| b | Donated services and use of facilities | 2b | 37,386. | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | | 2e | 37,386. |
| 3 | Subtract line 2e from line 1 | | 3 | 1,074,608. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | 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 | 1,074,608. |

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | | |
|----------|---|-----------|-----------|----------|
| 1 | Total expenses and losses per audited financial statements | | 1 | 999,673. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a | Donated services and use of facilities | 2a | 37,386. | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | | 2e | 37,386. |
| 3 | Subtract line 2e from line 1 | | 3 | 962,287. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | 4c | 0. |
| 5 | Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.) | | 5 | 962,287. |

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. MANAGEMENT IS NOT AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE THE ORGANIZATION'S TAX EXEMPT STATUS. THE ORGANIZATION IS NOT AWARE OF ANY TAX POSITIONS IT HAS TAKEN THAT ARE SUBJECT TO A SIGNIFICANT DEGREE OF UNCERTAINTY. TAX YEARS AFTER 2018 REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

| | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events (add col. (a) through col. (c)) | |
|-----------------|--|---|------------------------------------|---------------------|--|---------|
| | | BOWL-A-THON (event type) | RFL FUNDRAISING (event type) | 6 (total number) | | |
| Revenue | 1 | Gross receipts | 21,264. | 13,496. | 32,042. | 66,802. |
| | 2 | Less: Contributions | 9,200. | 1,500. | 15,425. | 26,125. |
| | 3 | Gross income (line 1 minus line 2) | 12,064. | 11,996. | 16,617. | 40,677. |
| Direct Expenses | 4 | Cash prizes | | | | |
| | 5 | Noncash prizes | | | | |
| | 6 | Rent/facility costs | | | | |
| | 7 | Food and beverages | | | | |
| | 8 | Entertainment | | | | |
| | 9 | Other direct expenses | 11,105. | 3,670. | 541. | 15,316. |
| | 10 | Direct expense summary. Add lines 4 through 9 in column (d) | | | | 15,316. |
| 11 | Net income summary. Subtract line 10 from line 3, column (d) | | | | 25,361. | |

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

| | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col. (a) through col. (c)) |
|-----------------|---|--|---|---|---|
| | | | | | |
| Revenue | 1 | Gross revenue | | | |
| Direct Expenses | 2 | Cash prizes | | | |
| | 3 | Noncash prizes | | | |
| | 4 | Rent/facility costs | | | |
| | 5 | Other direct expenses | | | |
| | 6 | Volunteer labor | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No |
| | 7 | Direct expense summary. Add lines 2 through 5 in column (d) | | | |
| | 8 | Net gaming income summary. Subtract line 7 from line 1, column (d) | | | |

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization: **READY FOR LIFE, INC.** Employer identification number: **26-4032979**

Part I Types of Property

| | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|--|----------------------------|---|--|---|
| 1 Art - Works of art | | | | |
| 2 Art - Historical treasures | | | | |
| 3 Art - Fractional interests | | | | |
| 4 Books and publications | | | | |
| 5 Clothing and household goods | X | | 130,861. | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities - Publicly traded | | | | |
| 10 Securities - Closely held stock | | | | |
| 11 Securities - Partnership, LLC, or trust interests | | | | |
| 12 Securities - Miscellaneous | | | | |
| 13 Qualified conservation contribution - Historic structures | | | | |
| 14 Qualified conservation contribution - Other | | | | |
| 15 Real estate - Residential | | | | |
| 16 Real estate - Commercial | | | | |
| 17 Real estate - Other | | | | |
| 18 Collectibles | | | | |
| 19 Food inventory | | | | |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other () | | | | |
| 26 Other () | | | | |
| 27 Other () | | | | |
| 28 Other () | | | | |

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

| | Yes | No |
|---|-----|----|
| 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? | | X |
| b If "Yes," describe the arrangement in Part II. | | |
| 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? | X | |
| 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | | X |
| b If "Yes," describe in Part II. | | |
| 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. | | |

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

Schedule M (Form 990) 2021

**SCHEDULE O
(Form 990)**

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 the latest information.

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

READY FOR LIFE, INC.

Employer identification number

26-4032979

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

A DRAFT COPY OF FORM 990 AND ALL ATTACHED SCHEDULES IS PROVIDED TO THE
GOVERNING BODY FOR REVIEW PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH GOVERNING
BOARD DELEGATED POWERS WILL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS SUCH
PERSON:

A. HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY

B. HAS READ AND UNDERSTANDS THE POLICY

C. HAS AGREED TO COMPLY WITH THE POLICY, AND

D. UNDERSTANDS THE ORGANIZATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS
FEDERAL TAX-EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES, WHICH
ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

FORM 990, PART VI, SECTION B, LINE 15B:

COMPENSATION IS SET BASED ON SIMILAR ORGANIZATIONS IN THE COMMUNITY.

FORM 990, PART VI, SECTION C, LINE 19:

READY FOR LIFE, INC MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC ON GUIDESTAR OR BY REQUEST. PLEASE CALL KATHY
MIZE-PLUMMER AT
727-954-3989 OR EMAIL AT INFO@READYFORLIFEPINELLAS.ORG.

FORM 990, PART XII, LINE 2C

THE OVERSIGHT PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

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

Schedule O (Form 990) 2021

132211 11-11-21

3. Board Members & Staff

[ABOUT US](#) | [Ready for Life Pinellas](#) | [Changing Lives Beyond Foster Care](#)

MEET THE TEAM



KATHY MIZE, MSW
CEO
O: (727) 513-4679
kmize@readyforlifepinellas.org



MICHELLE WALAG
Senior VP of Strategic Partnerships
O: (727) 500-2599
mwalag@readyforlifepinellas.org



MICHAEL FORSTER
VP of Operations
O: (727) 250-4028
mforster@readyforlifepinellas.org



KATIE ROCKMAN
Director of Development
O: (727) 250-4029
krockman@readyforlifepinellas.org



JAKE RAY
Director of Youth Programs
O: (727) 291-9861
jray@readyforlifepinellas.org



MARIA JANSSON
Director of Impact & Engagement
O: (727) 334-7753
mjansson@readyforlifepinellas.org



FALANA SHANNON
Youth Specialist Supervisor
O: (727) 349-1231
fshannon@readyforlifepinellas.org



NATE JOHNSON
Youth Specialist
O: (727) 291-9250
njohnson@readyforlifepinellas.org

Kathy Mize, CEO - Bio

Kathy is a native of St. Petersburg, FL and received her graduate degree in Social Work from the University of South Carolina. Kathy has worked in the field of child abuse / child abuse prevention for 34 years. Kathy has spent her entire career focusing on protecting children and strengthening families. Kathy began as a caseworker in 1988 and has held numerous supervisory and administrative roles. In 2009, Kathy had the opportunity to help create “Ready for Life, Inc.” and currently serves as the CEO. Ready for Life was created to serve those young adults preparing to “age out” of the foster care system. It is her desire to prevent child abuse, strengthen families, make our community better as well as bring awareness to the issues faced by youth “aging out” of foster care.

Kathy has been an active member of the National Exchange Club for 25 years. Currently, she is a member of the N.E. St. Pete Exchange Club and the Harbor Exchange Club. Kathy has served in a variety of roles from National Foundation Trustee, National Staff, CAP Center Director, FL District President, Regional Vice President for Region 9 and most recently, National President of the National Exchange Club.

Kathy has 2 adult daughters that she is extremely proud of and has raised them to be involved in community service activities throughout their life.

Michelle Walag, Sr. VP of Strategic Partnerships - Bio

Michelle Walag joined RFL as a volunteer shortly after the organization's inception and joined on leadership staff to help facilitate the building of the organization a short time later. Michelle brings over 20 years of strategic partnership building, corporate leadership, and community building expertise to RFL. She specializes in developing and engaging communities and inspiring them to action to meet organizational goals.

Michelle received a Bachelor of Arts degree from University of South Florida and spent 17 years as a live event and multimedia producer culminating as the GM of a very large North American Festival Production (dubbed the "world's premier events" by Conde' Naste' Magazine). From the boardroom to massive live events in the middle of desert fields, Michelle's energy produced results. Just ask her former clients such as Bank of New York, Bridge-line Software, The United Way Alexis de Tocqueville Society of Sarasota, Country Thunder USA, and Radical Leadership. Michelle is honored to be currently serving former foster care youth and their young families as Senior Vice President of Strategic Partnerships at Ready for Life, Inc. (RFL).

Michael Forster, VP of Operations – Bio

Michael Forster has over 19 years' experience working in child welfare starting as a Case Manager to a Program Manager. Although he started his career as a chef after earning a degree in Culinary Arts from Johnson & Wales University in North Miami, he felt a calling to do more for his community. He returned to college and obtained a bachelor's in psychology from the University of South Florida. In addition to working full-time to lead

operations at Ready for Life, Michael is enrolled at the University of South Florida, working towards obtaining an MBA.

Katie Rockman, Director of Development - Bio

Katie Rockman joined the Ready for Life team as the Director of Development in September 2022. She has over 6 years of fundraising and donor relations experience, with the most recent being at the Crisis Center of Tampa Bay. She is a Tampa Bay local born and raised, graduating from the University of Tampa in 2016. Katie is also a recent graduate of Leadership Tampa Bay and is a member of the Junior League of St. Petersburg. Katie enjoys sharing the mission of Ready for Life, and connecting with donors who are equally passionate. When she is not at work, Katie enjoys spending time with her husband Matt and their goldendoodle, Dory.

Board Members

2022 –2023 Board of Director List

Yvette Bean- 727-492-8647
Reusable Transport Packaging
835 123rd Avenue
Treasure Island, FL 33706

Kenneth Beattie (Chair)- 813-545-2203
1013 Estatewood Dr
Brandon, FL 33510

Scott Clendening- 727-643-1841
2836 Seabreeze Drive S
Gulfport, FL 33707

Ben Coughanour- 813-444-7440
601 Edenville Ave
Clearwater, FL 33764

Bob Dillinger- 727-424-7301
7842 Country Club Rd. N.
St. Petersburg, FL 33710

Jennifer Dittman-727-403-0239
4422 Serenity Trail
Palm Harbor, FL 34685

Deonte' Echols- 980-312-0073
Bank of America
100 N West Shore Blvd
Tampa, FL 33609

Mary Pat McLain -727-647-1882
555 5th Ave NE STE 614
St. Petersburg, FL 33701

Sally McLane – 727-584-2110
275 North Clearwater-Largo Rd.
Largo, FL 33770

Bruce Mitchell- 727-204-8117
3263 Nicks Pl
Clearwater, FL 33761

Crystal Moore – Youth Voice- 727-678-9770
13143 Center Avenue
Largo, FL 33773

Bud Risser / Founder – 727-542-7373
2865 Executive Drive
Clearwater, FL 33762

Board members serve two-year terms, gathering 10 times a year for meetings and twice annually for social events. Many are personally involved in either mentoring, fundraising events, or other volunteer opportunities such as cooking a meal, donating food to the pantry or volunteering at youth-centered events. All board members give financially on an annual basis and are expected to help fundraise and promote Ready for Life in the community. Their diverse skillset, passion and commitment to the mission makes the RFL board highly effective. There are also advisory members who assist in supporting Ready for Life throughout the community and they are highly engaged in services as well as fundraising. See website for current advisory board members. [ABOUT US | Ready for Life Pinellas | Changing Lives Beyond Foster Care](#)

4. Additional Information

A great way to learn more about Ready for Life is by exploring our website, containing great information and videos like the one here: <https://youtu.be/lpno1I58irA>

Recent Newsletter articles <https://www.readyforlifepinellas.org/press>:

Thank you, Suncoast Porsche Club of America!

For years the Suncoast Porsche Club has been filled with generous supporters for Ready for Life, and we have been honored to be their preferred charity. At the beginning of 2022, the Suncoast PCA pledged to raise \$14,400 over the course of the year for Ready for Life. We are pleased to announce that they exceeded their goal and raised over \$17,000! Thank you, Suncoast PCA for your dedication to helping change lives beyond Foster Care!



Ready for Life

Changing Lives Beyond Foster Care

2021-2022 IMPACT REPORT

Ready for Life provides support, resources and guidance former foster care youth need to successfully transition to adulthood. At RFL's Skill Center, young people aging out of the foster care system (ages 15 to 25), participate in comprehensive, solution-based programs, focused on crisis stabilization, lifeline & support services, and life skills to level up.

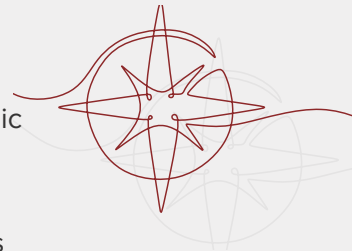
55% of the former foster youth RFL served in 2021-2022 were homeless. Unfortunately, trends show that number is on the rise.

We can't solve the homelessness crisis, but we can and DO create stability for former foster care youth. We support youth during crisis, aid in filling in life skills and learning gaps so they are not forever in crisis, remove barriers to progress like education and transportation, and help youth build a healthy, successful future.

Their journey starts with one brave day.

Day One of the RFL journey is typically about crisis stabilization. Former foster care youth often arrive at the Skill Center with very few of their basic needs met and either homeless or in unstable housing situations. We focus on what a young adult needs **that day** to get back on their feet:

- 1. Food:** the Emergency Pantry is one of the most crucial pieces to crisis stabilization. Youth find day-to-day emergency food that can be prepared with or without a kitchen, as well as disaster preparedness items. A successful future starts with a full stomach.
- 2. Hygiene:** youth can take a hot shower with a clean towel and do their laundry at the Rays Clean Sweep Day Stop, and can find new clothing, undergarments, and shoes at Beth's Corner, sponsored by the Beth Dillinger Foundation.
- 3. Safety:** youth can store their valuables for safe keeping in our Suncoast Voices secure lockers, as well as pick up items from the Santa's Angels Good Day store to ease the challenges of homelessness, such as a backpack, sleeping bag, flashlight, and hygiene items.



BY THE NUMBERS

113 new intakes **222** total youth served

347 visits to the Emergency Pantry

450 Heat & Eat Meals provided by our BayCare/Feeding Tampa Bay program

162 uses of the Rays Clean Sweep Day Stop shower and/or laundry facilities

55 visits to Beth's Corner for new clothing

129 youth obtained a 1-year PSTA bus pass

What a difference a day makes for Jack.



Jack came to Ready for Life feeling very low and a bit lost. He was homeless and hungry after spending the majority of the prior three weeks sleeping literally everywhere—indoors and out—after losing both his job and his apartment. He had no money and was running short on hope. Jack, in crisis and feeling discouraged, **made a brave choice to come to RFL that day** and begin his journey.

During his first day at RFL, Jack talked with a youth specialist and together they formed an action plan to help him get back on his feet. This plan included: a hot shower at the **Rays Clean Sweep Day Stop**, a meal from the **Emergency Needs Pantry**, and hygiene items from the **Santa's Angels Good Day Store**. Jack attended an intake appointment at a shelter, got connected with an interview at one of our partner companies, received job coaching for the interview and proper interview attire from **Beth's Corner**. Before leaving, Jack received a **1-year PSTA Bus Pass** to get to the interview. With his needs met and his confidence and dignity restored, Jack aced the interview and got the job!

Our team moved mountains when Jack hauled himself through our door that morning, and by 4:00 that same afternoon he was clean, had a place to sleep, a full stomach, new clothes, reliable transportation, and new income. **In just one day Jack was well on his way to self-sufficiency.**

72% of the young adults (18+ years old) served at RFL are **currently employed***

Breaking the cycles of foster care.

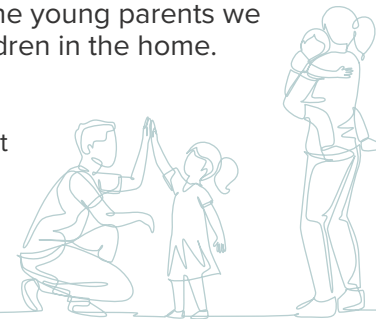
Young parents raised in foster care are at increased risk for losing custody of their own children, therefore RFL focuses a great deal of attention on helping the young parents we serve break the generational cycle of child abuse and keep their children in the home.

65 young parents received services at RFL this year

30 young parents attended our Mommy and Me and Wingmen parent support groups

89% of young parents at RFL have custody of their children*

93% of young parents attending Mommy and Me and Wingmen **have custody of their children**



We didn't do it alone! Because of YOU...

\$41,000 in Volunteer Hours **\$112,000** in In-Kind Donations **\$883,615** total funds raised

You'll notice that we have an asterisk next to some of the statistics. These stats are a bit of a "moving target" and can change between times we see the young adults.

*Upon last contact with RFL

Years later, you'd never know from where I came...

Meeting Ashley today, you would never know she is the same young woman who, several years earlier, was hungry, homeless, had just gotten out of jail after being arrested for petty theft, and had absolutely no plan. Ashley had great potential, but had taken a wrong turn and couldn't find her way forward. **Then she found Ready for Life.**

Ashley smiles as she remembers getting involved at RFL. "I started to come to the events. **I just wanted a family, and I found it here.**" At RFL, Ashley received assistance with food, clothing, and transportation, learned the life skills she was missing, was coached for job interviews; and so much more.

When Ashley turned 21, Mary Pat McLain came into her life as a mentor and her whole world began to come together. "I didn't like her...at first, but I love her now," Ashley chuckled. "She wouldn't go away. She kept calling me and inviting me to weekly dinners..."

Today, Ashley is Director of the Angels Visitation Center and achieved her bachelor's degree in Health Services Administration and Human Services. She lives in a condo in Countryside, owns a car, and has a beautiful 19-month-old daughter Journee and two wonderful stepchildren with her partner Curtis, who is an electrician. Ashley has a credit score over 700, money in the bank and \$0 in debt. **Ashley will be volunteering to co-lead the RFL Mommy and Me program with staff, and plans to be a mentor one day, just like Mary Pat has been to her.**



To read the full interview with Ashley, please visit readyforlifepinellas.org

RFL currently has 63 Active Alumni: those who are over the age of 25 and stay a part of the Ready for Life Family to help the youth coming up through the system behind them.

Removing barriers and forming connections.

RFL assists youth on their journey by removing the barriers to success such as legal documents, transportation, or counseling; filling in life skills and learning gaps including meal planning, financial literacy, and health navigation; and forming connections between youth and the community, fully wrapping them in support and encouragement. Some of the community partners providing invaluable resources at our Skill Center:

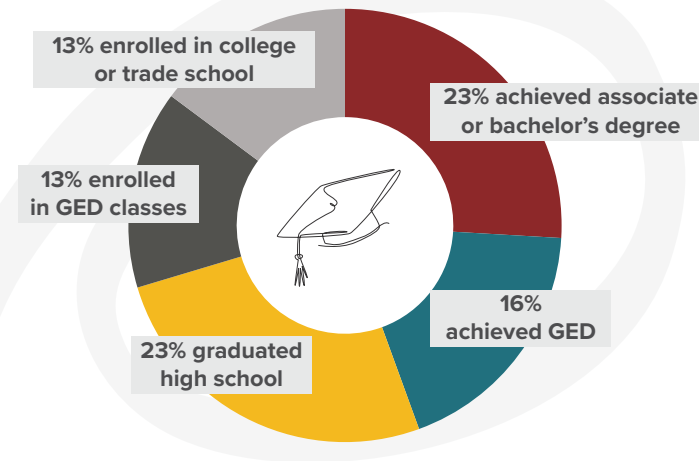


All things are possible because anything can be learned.

National statistics show that 50% of youth aging out of foster care do so without finishing their high school education, and that less than 3% of people in foster care will earn a college degree in their lifetime. **Of the 113 new intakes at RFL this year, 36% had not completed their GED.**

RFL supports the education goals of the young adults we serve through volunteer mentors and tutors, transportation assistance, financing lab and testing fees, and immense encouragement to overcome the odds stacked against them.

We surveyed RFL youth on their education status, goals, and achievements:



Transportation Security

Roughly \$100,000 was saved this year through the RFL Bus Pass Program.

129 young adults received an annual Photo ID Bus Pass from RFL's PSTA UPass partnership program which costs just under \$10,000 annually. If we had to purchase those bus passes individually, the cost would be \$108,360.

A bus pass provides youth with the basic and critical need of safe, reliable transportation—allowing them easy access to jobs, interviews, school, appointments, grocery stores, childcare, and so much more.

Stepping forward... We could provide youth with food and clothing for forever, but a successful future only comes from self-sufficiency.

30 people attended our Cooking with Kate meal planning classes!

In addition to learning how to plan for and cook a healthy meal, youth received the pots, pans, mixers, dishes, utensils, and food supplies to stock their own kitchens. Learning the crucial life skill of meal planning ensures youth can fulfill their needs and stay on budget.

\$17,737 matched in Opportunity Passport™!

Youth aging out of foster care often lack basic financial skills. In Opportunity Passport™, youth receive a matched savings account that gives them a pivotal chance to manage finances, interact with the banking system and set aside money for large purchases like rent, a car, or tuition.

\$38,000 of dental care was received through our Dr. David Zabrocki Dental Program!

The Dr. David Zabrocki Dental Program provides dental care, treatment, and education to youth who have received little or no dental care prior. Access to proper dental hygiene instills confidence, relieves pain, and improves overall health and wellness.

READY FOR LIFE'S YOUTH PROGRAMS & SERVICES

Helping you get ready for **life after foster care**. We **really get** what you're facing.
(Our staff are former foster youth too!)

OUR SERVICES

- » Hot Meals
- » Emergency Needs Food Pantry
- » Hygiene Items
- » Day Stop
 - Shower, Laundry, & Lockers
- » New & Used Clothing
- » Help getting important documents
- » Counseling (drop-in or by appointment—no long waits)
- » Free, immediate Telehealth appointments (for non-emergency situations)
- » Transportation Support
 - Free bus pass, bike, gas cards, & more
- » Education Support
 - Testing fees, tutoring & more
- » Employment Support
 - Resume & interview coaching, interview clothing, & hiring connections
- » One-on-One Mentoring
 - Someone who cares, to help you brainstorm solutions & find your way through any challenges you may face
- » Electronic Devices Support



PROGRAMS THAT HELP WITH:

- » Life Skills
- » Financial Literacy & Money Matching
 - You can receive up to a \$3,000 match to your savings!
- » Driver's License
- » Dental Care
- » Parent Support Groups
 - A ton of fun events and activities for parents and children
- » Meal Prep & Meal Planning Classes
- » Fun events and activities
 - Meet other young adults facing the same situations as you
- » **& So Much More!**



READY TO LEARN MORE?

Contact Jake Ray, Director of Youth Programs, at:

jray@readyforlifepinellas.org

or scan the QR code to get in touch today!



Mommy & Me Mother's Day Brunch at RFL

Photos from Ready for Life's Mommy & Me Mother's Day Brunch! Our Mommy & Me young mothers and little ones got together at the Skill Center to enjoy a delicious brunch, spend quality time together, and learn more about community programs to support healthy relationships. Thank you to all the volunteers, community partners, and special thank you to Diamond Davis for making it such an amazing celebration!



Collaboration and Support

OUR SUPPORTERS
Thank You!

5. Non-Profit Status Documentation:

- IRS 501(c)(3) Determination Letter - attached
- Florida Charity Solicitation of Contributions approval letter - attached

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAR 11 2009

READY FOR LIFE INC
C/O JACQUI COPPERWHEAT
2865 EXECUTIVE DR
CLEARWATER, FL 33762

Employer Identification Number:
26-4032979
DLN:
17053051010009
Contact Person:
L. WAYNE BOTHE ID# 31462
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990 Required:
Yes
Effective Date of Exemption:
January 6, 2009
Contribution Deductibility:
Yes
Addendum Applies:
No

RECEIVED MAR 19 2009

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

READY FOR LIFE INC

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

A handwritten signature in cursive script that reads "Robert Choi".

Robert Choi
Director, Exempt Organizations
Rulings and Agreements

Enclosures: Publication 4221-PC



FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
COMMISSIONER WILTON SIMPSON

February 3, 2023

Refer To: DTN3713075 CH28796

READY FOR LIFE, INC.
2300 TALL PINES DR STE 100
LARGO, FL 33771-5348

Re: Application Under Solicitation of Contributions Act DTN: 3713075
First Notice of Deficiency

Dear Applicant:

The Department received your application submitted under Chapter 496, Florida Statutes, the Solicitation of Contributions Act. The application is deficient for the following reasons:

1. An acceptable financial report for your fiscal year ending June 30, 2022 was not received.
Financial information should be reported in one of the following formats:
 - a) The enclosed Financial Report form;
 - b) IRS form 990 and all required Schedules;
 - c) IRS form 990EZ and Schedule O.

Pursuant to Chapter 496, Florida Statutes, this Notice is provided within 15 working days of receiving your application to enable you to correct the cited deficiencies for further review by the Department. Your response to this letter should reference DTN 3713075 and resolve each deficiency cited above; do not submit a partial response.

If you do not correct these deficiencies within 30 days from receiving this Notice your application will be denied and the Department will pursue its available legal remedies. Soliciting Contributions from persons in Florida, or from a physical location in Florida, without being properly registered is a violation of Chapter 496, Florida Statutes.

Thank you for your attention to this matter. If you have any questions regarding your application/filing, please contact the undersigned at the number listed below.

Sincerely,

Deleah J Sims
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