Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

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.

Open to Public Inspection

| <u>A</u> | For th | e 2023 calend | lar year, or tax year begin | ning | | , 2023, an | nd ending | | , 20 |
|-------------------------|------------|------------------------|--|----------------------------|----------------------------------|-------------------------|--------------|-----------------------|------------------------------|
| В | Check if | fapplicable: | C Name of organization | NNER CITY Y | OUTH ORCHESTRA O | F LOS ANO | GELES IN | IC D Emp | oloyer identification number |
| П | Address | change | Doing business as | | | | | 45 | -3622466 |
| Ī | Name cl | - | Number and street (or P.O. box | c if mail is not delivered | to street address) | I F | Room/suite | E Tele | phone number |
| П | Initial re | - | 6820 La Tije: | | | | | | 13) 788-4260 |
| Ħ | | :urn/terminated | City or town, state or province, | | reign nostal code | | | | ss receipts |
| Ħ | | ed return | Los Angeles, | | | 3,182,625. | | | |
| Ħ | | ion pending | F Name and address of principal | | | | H(a) | Is this a group retur | |
| ш | , пригоск | on ponding | Charles Dicke | | 1985 Rolling Vista Ste. U | nit 55 Lomita | | Are all subordina | |
| | Tay-ovo | mpt status: | 501(c)(3) 501(c) (|) (insert no.) | 4947(a)(1) or 52 | | 11(2) | | list. See instructions |
| - | Website | TOMOT | |) (mooremor) | | , | H(c) | Group exemption | |
| <u>-</u> | | organization: | | ociation Other | 1 | Year of formation | | M State of le | |
| | art I | Summar | | Ociation Other | 1- | Tear or formation | | III Otate of te | ogai domicile. |
| | 1 | | y ribe the organization's miss | ion or most signif | icant activities: | | | | |
| | ' | | City Youth O | | | es (TC | YOT.A\ | provi | des music |
| ě | | | tion, develop | | | | | | |
| auc | | <u> </u> | oron, deverop. | 9 5 5 5 5 5 5 5 5 | g productive | 1000 | | | 00 |
| ern | 2 | Chock this h | oox if the organization d | liscontinued its or | porations or disposed of n | noro than 250 | % of its not | accotc | |
| Activities & Governance | 3 | | oting members of the gove | • | | | | 1 | 0 |
| <u>«</u> | 4 | | ndependent voting member | • • • | | | | | 0 |
| ies | | | er of individuals employed in | - | , | | | | 0 |
| ₹ | 5 | | · · | | , | | | | 0 |
| Act | 6 | | er of volunteers (estimate if | | | | | | 0. |
| | 7a | | ted business revenue from | | • • | | | | 0. |
| | K | nei unreiale | ed business taxable income | 110111 F01111 990-1 | , Part I, IIIIe II | <u> </u> | | | <u> </u> |
| | | Combribe etion | o and supple (Dout VIII line | Pn | or Year | Current Year 2,955,156. | | | |
| Revenue | 8 | | s and grants (Part VIII, line | • | | | | | 133,373. |
| | 9 | • | rvice revenue (Part VIII, line | • | | | | | 94,096. |
| e ve | 10 | | income (Part VIII, column (A | | | | | | 94,096. |
| ď | 11 | | ue (Part VIII, column (A), lir | | | | | | 3,182,625. |
| | 12 | | ue - add lines 8 through 11 | | | | | | 89,280. |
| | 13 | | similar amounts paid (Part I | | | | | | 09,200. |
| | 14 | - | d to or for members (Part I) | | • | | | | 771,455. |
| Ś | 15 | | ner compensation, employe | • | | | | | 193,631. |
| Expenses | 16 | | I fundraising fees (Part IX, o | | | | | | 193,631. |
| ē | _' | | ising expenses (Part IX, co | | | | | | 207 127 |
| ш | | • | nses (Part IX, column (A), li | | · | | | | 307,127. 1,361,493. |
| | 18 | | ses. Add lines 13-17 (must | | | | | | |
| | 19 | Revenue les | ss expenses. Subtract line | 18 from line 12 . | | | | | 1,821,132. |
| ٥ | Sec | | (- (!!) | | | | | of Current Year | End of Year 7,407,824. |
| sets | E 20 | | (Part X, line 16) | | | | 44 | 5,241. -511. | 7,407,824. |
| Net Assets or | 21 | | , , | | | | | 5,752. | 1,401,624. |
| | | | or fund balances. Subtract I | ine 21 from line 2 | <u> </u> | | 44 | 5,752. | |
| _ | art II | | re Block clare that I have examined this retur | n including accompan | ving schodules and statements, a | and to the heet of | my knowlodgo | and haliaf it is | |
| | | | claration of preparer (other than office | | | | my knowledge | and belief, it is | |
| | | | | | | | | | |
| Sig | nr | Signature of office | cer | | | | | | rate |
| | _ | " | es Dickerson, | Director | • | | | J | aic |
| He | ıe | Type or print na | | DITECTOR | • | | | | |
| | | 1 | eparer's name | Preparer's signature | T | Date | | a \Box | PTIN |
| D- | : A | 1 min type pie | oparor a name | 1 Toparoi 3 Signatule | | Date | | Check if | T THE |
| Pa | | | | l | | | | self-employed | |
| | epare | | | | | | Firm's E | | |
| US | e Onl | y Firm's addres | SS | | | | Phone | no. | |
| | . 41 17 | 20 45 "." | | | | | | | |
| ıvla | y tne IH | ko aiscuss this | s return with the preparer sh | iown above? See | einstructions | | | | Yes No |

| rai | Check if Schedule O contains a response or note to any line in this Part III | | | | | | | | |
|------------|---|--|--|--|--|--|--|--|--|
| 1 | Briefly describe the organization's mission: | | | | | | | | |
| | ICYOLA is a youth orchestra, providing music education as primary | | | | | | | | |
| | purpose in developing strong, productive youth living in our inner | | | | | | | | |
| | communities, focusing Los Angeles county area | | | | | | | | |
| | | | | | | | | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | | | | | | | | |
| | prior Form 990 or 990-EZ? | | | | | | | | |
| | If "Yes," describe these new services on Schedule O. | | | | | | | | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program | | | | | | | | |
| | services? | | | | | | | | |
| | f "Yes," describe these changes on Schedule O. | | | | | | | | |
| 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 \$ 122,761. including grants of \$) (Revenue \$) | | | | | | | | |
| 4a | (Code:) (Expenses \$122,761. including grants of \$) (Revenue \$) ICYOLA annual season finale concert at Disney Hall in downtown | | | | | | | | |
| | Los Angeles, is our most significant fundraising event. | | | | | | | | |
| | Now servicing over 250 musicians, from beginners to seasoned | | | | | | | | |
| | professionals of which include about 60% African American, 30% Latino | | | | | | | | |
| | and 10% other ethnicities. | | | | | | | | |
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| 4b | (Code:) (Expenses \$ including grants of \$) (Revenue \$) | | | | | | | | |
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| 4c | (Code:) (Expenses \$ including grants of \$) (Revenue \$) | | | | | | | | |
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| | | | | | | | | | |
| 4d | Other program services (Describe on Schedule O.) | | | | | | | | |
| | (Expenses \$ including grants of \$) (Revenue \$) | | | | | | | | |
| 4 e | Total program service expenses 122,761. | | | | | | | | |

| | | | Yes | No |
|-----|--|------|-----|-----------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | Х | 37 |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? See instructions | 2 | | Х |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | 3, |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | Х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | | | , , |
| | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | Х |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | | | |
| | assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | | | |
| | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | | ., |
| | "Yes," complete Schedule D, Part I | 6 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | 3, |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part IL | 7 | | Х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | | | x |
| | complete Schedule D, Part III | 8 | | ^ |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a | | | |
| | custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or | | | · |
| 40 | debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | 40 | | x |
| 44 | or in quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | ^ |
| 11 | VII, VIII, IX, or X, as applicable. | | | |
| | | | | |
| • | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | х | |
| | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more | 114 | | |
| ٠ | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | x |
| | | 112 | | |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. | 11c | | х |
| | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets | | | |
| | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | x |
| • | | 11e | | х |
| f | | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | X |
| 12a | | | | |
| | Schedule D, Parts XI and XII | 12a | | X |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If | | | |
| | "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, | | | |
| | fundraising, business, investment, and program service activities outside the United States, or aggregate | | | |
| | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or | | | |
| | for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other | | | l <u></u> |
| | assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on | | ٦, | |
| _ | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions | 17 | X | - |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | | | |
| | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | | | . |
| | If "Yes," complete Schedule G, Part III | 19 | | X |
| 20a | | 20a | | X |
| 21 | | 20b | | _ |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX. column (A). line 1? If "Yes." complete Schedule I. Parts I and II. | 21 | х | |
| | Admiddia advollinoni dil i ari iv, dolanni ivi, inic 1: 11 163. dollibicic dolleuaic I. Faliò Lallull | . 41 | | |

| Pa | rt 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? If "Yes," complete Schedule I, Parts I and III | 22 | X | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the | | | |
| | organization's current and former officers, directors, trustees, key employees, and highest compensated | | | |
| | employees? If "Yes," complete Schedule J | 23 | 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? If "Yes," answer lines 24b | | | |
| | through 24d and complete Schedule K. If "No," go to line 25a | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | X |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | | | |
| | to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | Х |
| 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? If "Yes," complete Schedule L, Part J | 25a | | 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? | | | |
| | If "Yes," complete Schedule L, Part I | 25b | | 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? If "Yes," complete Schedule L, Part II | 26 | 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? If "Yes," complete Schedule L, Part III | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (See the Schedule | | | |
| | L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions). | | | |
| а | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If | | | |
| | "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part.IV | 28b | | X |
| С | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If | | | |
| | "Yes," complete Schedule L, Part IV | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M | 29 | | Х |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part L | 31 | | Х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," | | | |
| | complete Schedule N. Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, | | | |
| | or IV, and Part V, line 1 | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a | | | |
| | controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | X |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable | | | |
| | related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and | | | |
| | 19? Note : All Form 990 filers are required to complete Schedule Q | 38 | X | |
| Par | | | - | |
| <u> </u> | 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 in 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? | 10 | x | |

Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities

If "Yes," complete Form 6069.

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| | art VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, | | ra"\ | |
|------------------|---|------------|----------|---------------------------------------|
| | response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. S | | | |
| | Check if Schedule O contains a response or note to any line in this Part VI | | | X |
| Se | ction A. Governing Body and Management | | | |
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | | | |
| | If there are material differences in voting rights among members of the governing body, or | | | |
| | if the governing body delegated broad authority to an executive committee or similar | | | |
| | committee, explain on Schedule O. | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | |
| | any other officer, director, trustee, or key employee? | 2 | | X |
| 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? | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | Х |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Did the organization have members or stockholders? | 6 | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint | | | |
| | one or more members of the governing body? | 7a | | X |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, | | | |
| | stockholders, or persons other than the governing body? | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | |
| | the year by the following: | | | |
| а | The governing body? | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at | | | l |
| | the organization's mailing address? If "Yes," provide the names and addresses on Schedule O | 9 | | X |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | 1 | _ |
| | | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | | | |
| | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | \ |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | | X |
| b | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . | 12b | | X |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | . | |
| | describe on Schedule O how this was done. | 12c | X | \vdash |
| 13 | Did the organization have a written whistleblower policy? | 13 | X | \ |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | | X |
| 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? | 45. | Х | |
| a | The organization's CEO, Executive Director, or top management official | 15a 15b | + | \vdash |
| b | Other officers or key employees of the organization | 150 | A | |
| 16- | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | 160 | | x |
| h | with a taxable entity during the year? | 16a | | |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its | | | |
| | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | 16h | | |
| Sec | organization's exempt status with respect to such arrangements? | 16b | 1 | |
| <u>3ec</u> 17 | List the states with which a copy of this Form 990 is required to be filed CA | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) | | | |
| 10 | (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. | | | |
| | W Own website | | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, | | | |
| | and financial statements available to the public during the tax year. | | | |

State the name, address, and telephone number of the person who possesses the organization's books and records.

Charles Dickerson 1985 ROlling Vista Ste. Unit 55 Lomita,

(213) 788-4260

CA 90717

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees**that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| Check this box if neither the organization nor any rela | | tion co | mper | nsate | ed a | ny cur | ren | nt officer, director, c | r trustee. | |
|---|-------------------|-----------------------------------|---|---------|--------------|---------------------------------|--------------|----------------------------------|-----------------------------------|------------------------------|
| | | | • | (C | | | | • | | |
| (A) | (R) | (B) Position | | | | | (D) | (E) | (F) | |
| Name and title | Average | (do not check more than one | | | | Reportable | Reportable | Estimated amount | | |
| realite dita dige | hours | | box, unless person is both an officer and a director/trustee) | | | | compensation | compensation | of other | |
| | per week | | | | | , | | from the | from related | compensation |
| | (list any | or c | nsı | Officer | Ke) | Hig | For | organization (W-2/ 1099-MISC/ | organizations (W-2/ 1099-MISC/ | from the organization and |
| | hours for related | vidua | itulio | 8 | , emi | nest | mer | 1099-NEC) | 1099-NEC) | related organizations |
| | organizations | Individual trustee or director | nstitutional trus | | key employee | ë com | | | | |
| | below | stee | ruste | | Ф | Highest compensated employee | | | | |
| | dotted line) | | Ō | | | ated | | | | |
| | | | | | | | | | | |
| T. Ohan land Can dans | | | | _ | _ | | | | | |
| (1) J Stanley Sanders | | ,, | | | | | | | | |
| Chairman | 60.00 | Х | | 4 | _ | | | | | |
| (2) Charles Dickerson | 60.00 | | l I, | | | | | 00 000 | | |
| Director | | | - | X | _ | | | 90,000. | | |
| (3) Sandra Wheeler | | ,, | | | | | | | | |
| Secretary | | Х | | + | _ | | | | | |
| (4) Sandra G Bennett | | ,, | | | | | | | | |
| Director | | Х | | _ | | | | | | |
| (5) Hansonia Caldwell | | ,, | | | | | | | | |
| Director | | Х | | 4 | _ | | | | | |
| (6) Anne Marie Johnson | | ٠, | | | | | | | | |
| Director | | Х | | _ | | | _ | | | |
| (7) James Montgomery | | ., | | | | | | | | |
| Director | 40.00 | X | | + | _ | | | | | |
| (8) Akilah Morgan | 40.00 | | | Ι, | ., | | | 75 000 | | |
| Office Manager | | | | 4 | X | | | 75,000. | | |
| (9) Jazin Morales | | . | | | | | | | | |
| Director | | Х | \vdash | + | _ | | \dashv | | | |
| (10) Wilma Pinder | | . | | | | | | | | |
| Director | | Х | \vdash | + | _ | | \dashv | | | |
| (11) Marcus Smith | | . , | | | | | | | | |
| Director | | X | | \perp | _ | | \dashv | | | |
| (12) Jonathan Weedman | | . , | | | | | | | 30 000 | |
| Consultant | | Х | \vdash | + | _ | | \dashv | | 30,000. | |
| (13) Earl Wooten | | . | | | | | | | | |
| Director | | Х | \vdash | + | | _ | \dashv | | | |
| <u>(14)</u> | | | | | | | | | | |
| | | | | | | | | | | |

| Part VII Section A. Officers, Directors, True | <u>ustees, Ke</u> | ey En | nplo | oye | es, | and | <u>Hig</u> | hest Compens | ated En | nployees | S | (cont | tinued) |
|--|--|--|-------------------|---------|-------------|------------------------------|--------------------------|----------------------------|------------------|---------------------|----------------|-----------------------|----------|
| | | | | | (C) | | | | | | | | |
| (A) | (B) Position (do not check more than one | | | | | | | (D) | (E) |) | | (F) | |
| Name and title | Average | verage box, unless person is hours officer and a director/ti | | | rson i | s both ar | | Reportable | Reporta | | Estim | ated am | |
| | hours per week | | | | /trustee) | ' | compensation from the | compens from rela | cor | of othei npensat | | | |
| | (list any | 9 = | | 9 | 2 | 9 ⊒ | 1 | organization (W-2/ | organizatio | | f | rom the | |
| | hours for | or director | Institutional tru | Officer | Key employe | Highest compensa employee | Former | 1099-MISC/ 1099-NEC) | 1099-M 1099-N | | - | nization d organi: | |
| | related organizations | to 12 | onal | | ploy | ee | | | | | | | |
| | below | l | truste | | 8 | pens | | | | | | | |
| | dotted line) | | • | | | ated | | | | | | | |
| | | | | | | | | | | | | | |
| <u>(15)</u> | | | | | | | | | | | | | |
| <u>(16)</u> | | | | | | | | | | | | | |
| (17) | | | | | | | | | | | | | |
| <u>(18)</u> | | | | | | | | | | | | | |
| <u>(19)</u> | | | | | | | | | | | | | |
| (20) | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| (21) | | | | | | | | | | | | | |
| (22) | | | | | | | | | | | | | |
| (23) | | | | | | | | | | | | | |
| (24) | | | | | | | | | | | | | |
| (25) | | | | | | | | | | | | | |
| 1b Subtotal | | . | | | | | | 165,000. | 30,0 | 000. | | | |
| c Total from continuation sheets to Part VII, Sect | | | | | | | | 1.65 0.00 | 0.0 | | | | |
| d Total (add lines 1b and 1c) | | | | | | | | 165,000. | 30,0 | | | | |
| 2 Total number of individuals (including but no reportable compensation from the organization) | | those | liste | ed al | OOV | e) who | rec | ceived more than | \$100,00 | 0 of | | | |
| reportable compensation from the organizati | 1011 | | | | | | | | | | | Yes | No |
| 3 Did the organization list any former officer, direct | or, trustee, k | ey em _l | oloye | ee, c | r hig | ghest o | comp | pensated | | | | | |
| employee on line 1a? If "Yes," complete Schedule | | | | | | | | | | | 3 | | Х |
| 4 For any individual listed on line 1a, is the sum of | | | | | | | | | | | | | |
| organization and related organizations greater th | | | | | | | | | | | 4 | | x |
| 5 Did any person listed on line 1a receive or accrue | | | | | | | | | | | 4 | | |
| for services rendered to the organization? If "Yes | | | | - | | | - | | | | 5 | X | |
| Section B. Independent Contractors | | | | | | | | | | | | | |
| 1 Complete this table for your five highest com | • | | | | | | | | | | | | |
| compensation from the organization. Report | compensa | tion fo | r the | e ca | lend | dar ye | ar e | | nin the or | ganizatio I | | k year | <u> </u> |
| (A) Name and business addres | SS | | | | | | | (B) Description of servic | es | | (C) Compens | ation | |
| | | | | | | | | · | | | • | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 2 Total number of independent contractors (ind | _ | | | | | se liste | ed a | bove) who | | | | | |
| received more than \$100,000 of compensati | ion from the | orga | niza | tion | | | | | | | | | |

Part VIII Statement of Revenue

| | | Check if Schedule O | contains a resp | onse | or note to any lin | ne in this Part VII | | | |
|---|-----|---------------------------------|--------------------|----------|--------------------|----------------------|--|--------------------------------------|--|
| | | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512–514 |
| | 1a | Federated campaigns . | | 1a | 868,682. | | | | |
| | b | Membership dues | | 1b | , | | | | |
| ts ts | c | Fundraising events | | 1c | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | | | | 1d | 41,000. | | | | |
| s, G | d | Related organizations . | | | | | | | |
| 3ift ar A | е | Government grants (cont | | 1e | 2,045,474. | | | | |
| B, G | f | All other contributions, gif | ts, grants, | | | | | | |
| r Si | | and similar amounts not i | ncluded above | 1f | | | | | |
| the ibu | g | Noncash contributions in | cluded in | | | | | | |
| d of | | lines 1a-1f | | 1g | \$ | | | | |
| ပိ ်် | h | Total. Add lines 1a-1f | | | | 2,955,156. | | | |
| | | | | | Business Code | , , | | | |
| | 2a | Concert Perfe | ormances | | 711190 | 133,373. | 133,373. | | |
| e | | | | | 72220 | 200,070. | 200,070. | | |
| ە ڭ | b | | | | | | | | |
| Program Service Revenue | С | | | | | | | | |
| eve | d | | | | | | | | |
| P. S. | е | | | | | | | | |
| <u>r</u> | f | All other program service r | evenue | | | | | | |
| | g | Total. Add lines 2a-2f . | | | | 133,373. | | | |
| | 3 | Investment income (includ | ina dividends. int | erest. | and | | | | |
| | | other similar amounts) . | | | | 94,096. | 94,096. | | |
| | 4 | Income from investment of | f tax-exempt bon | d proc | eeds | | | | |
| | 5 | Royalties | • | • | | | | | |
| | | noyaliioo i i i i i i i i i i | (i) Real | | (ii) Personal | | | | |
| | 6- | Cross routs | '' | | (II) Fersonal | | | | |
| | | Gross rents | | | | | | | |
| | | Less: rental expenses | 6b | | | | | | |
| | | Rental income or (loss) | 6c | | | | | | |
| | d | Net rental income or (loss) | | | | | | | |
| | 7a | Gross amount from | (i) Securitie | es | (ii) Other | | | | |
| | | sales of assets | | | | | | | |
| | | other than inventory | 7a | | | | | | |
| | b | Less: cost or other basis | | | | | | | |
| Φ | | and sales expenses | 7b | | | | | | |
| evenue | _ | Gain or (loss) | | | | | | | |
| eve | | , , | | | | | | | |
| Other R | | Net gain or (loss) | | · ; ; ; | | | | | |
| he | ва | Gross income from fundra | ising | | | | | | |
| ō | | events (not including \$ _ | | | | | | | |
| | | of contributions reported o | | | | | | | |
| | | 1c). See Part IV, line 18 | | 8a | | | | | |
| | b | Less: direct expenses . | | 8b | | | | | |
| | С | Net income or (loss) from t | fundraising event | s | | | | | |
| | 9a | Gross income from gaming | g | | | | | | |
| | | activities. See Part IV, line | = | 9a | | | | | |
| | b | Less: direct expenses . | | 9b | | | | | |
| | | Net income or (loss) from g | | | | | | | |
| | | | | · · | | | | | |
| | 10a | Gross sales of inventory, le | | 40- | | | | | |
| | _ | returns and allowances . | | | | | | | |
| | | Less: cost of goods sold | | 10b | | | | | |
| | С | Net income or (loss) from s | sales of inventory | <u> </u> | | | | | |
| | | | | | Business Code | | | | |
| <u>s</u> | 11a | - | | | | | | | |
| Miscellanous Revenue | b | | | | | | | | |
| ella ven | С | | | | | | | | |
| SC. Re | d | All other revenue | | | | | | | |
| Σ | | Total. Add lines 11a-11d | | | | | | | |
| | | Total revenue. See instruc | | | | 3,182,625. | 227,469. | | |

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 (A) Total expenses (B) Do not include amounts reported on lines 6b. 7b. Fundraising Program service expenses Management and general expenses 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 67,133. 67,133. and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 22,147. 22,147. 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 Compensation of current officers, directors, 46,000. 67,134. 67,134. 1,584. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and 79,780. 79,780. 1,584. persons described in section 4958(c)(3)(B) 548,168. 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 30,000. 30,000. q 46,373. 46,373. 10 11 Fees for services (nonemployees): 525. 30,000. а 100. Legal....... 15,743. 193,631. Professional fundraising services. See Part IV, line 17. . е f Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . . 56,517. 12 14,310. 37,194. 3,133. 13 14 15 122,760. 122,760. 16 34,723. 34,723. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 17,384. 17,384. 19 Conferences, conventions, and meetings 20 21 22 Depreciation, depletion, and amortization 40,661. 23 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.) 3,140. Dues & Subscription Repairs & Maint 1,000. b 264. Bank Fees c d All other expenses е 79,133. 1,361,493. 524,628. 3,168. Total functional expenses. Add lines 1 through 24e . . 25 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) | | (B) |
| | | | Beginning of year | | End of year |
| | 1 | Cash - non-interest-bearing | 316,409. | 1 | 157,829. |
| | 2 | Savings and temporary cash investments | | 2 | 1,214,120. |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | | 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 | 131,284. |
| | 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 | 107,472. | 7 | 126,284. |
| Assets | 8 | Inventories for sale or use | | 8 | |
| Ass | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment: cost or other | | | |
| | | basis. Complete Part VI of Schedule D 10a 5,778,307. | | | |
| | b | Less: accumulated depreciation | 21,360. | 10c | 5,778,307. |
| | 11 | Investments - publicly traded securities | | 11 | |
| | 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 | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 33) | 445,241. | 16 | 7,407,824. |
| | 17 | Accounts payable and accrued expenses | -511. | 17 | 866,418. |
| | 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 | 6,541,406. |
| es | 22 | Loans and other payables to any current or former officer, director, | | | |
| Ħ | | trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| Liabilities | | 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 | | 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 | | | |
| | 20 | of Schedule D | -511. | 25 | 7 107 921 |
| | 26 | Total liabilities. Add lines 17 through 25 | _JII. | 26 | 7,407,824. |
| | | Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. | | | |
| ses | 27 | Net assets without donor restrictions | 445,241. | 27 | 7,407,824. |
| au | 28 | Net assets with donor restrictions | 440,241. | 28 | 7,407,024. |
| Ва | 20 | Organizations that do not follow FASB ASC 958, check here | | 20 | |
| pur | | and complete lines 29 through 33. | | | |
| Ę | 29 | Capital stock or trust principal, or current funds | | 29 | |
| is o | 30 | Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| ssel | 31 | Retained earnings, endowment, accumulated income, or other funds | 445,752. | 31 | |
| Net Assets or Fund Balances | 32 | Total net assets or fund balances | 445,752. | 32 | |
| Š | 33 | Total liabilities and net assets/fund balances | 445,241. | 33 | 7,407,824. |
| | | | - , = - | | , , , = = = - |

UYA Form **990** (2023)

3a

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

3a

Form 990 (2023)

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

UYA

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

Form **990**

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

OMB No. 1545-0047

Inspection

2023
Open to Public

For the 2023 calendar year, or tax year beginning 2023, and ending 20 INNER CITY YOUTH ORCHESTRA OF LOS ANGELES INC D Employer identification number Check if applicable: C Name of organization 45-3622466 Address change Doing business as Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number (213) 788-4260 6820 La Tijera Blvd Initial return Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts Los Angeles, CA 90045 \$ 3,182,625. Amended return F Name and address of principal officer: Application pending H(a) Is this a group return for subordinates? Yes Charles Dickerson 1985 Rolling Vista Ste. Unit 55 Lomita, CA 9 H(b) Are all subordinates included? Yes **X** 501(c)(3) Tax-exempt status: 501(c) () (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions ICYOLA.com Website: H(c) Group exemption number Form of organization: X Corporation L Year of formation: 2011 M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: Inner City Youth Orchestra of Los Angeles (ICYOLA), provides music Activities & Governance developing strong productive youth in minority communities Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 0 Number of voting members of the governing body (Part VI, line 1a) 0 4 0 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 0. 7a 0 Net unrelated business taxable income from Form 990-T, Part I, line 11 7b Prior Year **Current Year** 2,955,156. 133,373. 94,096. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 3,182,625. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 89,280. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 771,455. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 193,631. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 307,127. 17 ,361,493. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,821,132. 19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year 445,241. ,407,824. 20 Total assets (Part X, line 16) -511. 7,407,824. 21 Total liabilities (Part X, line 26) 445 752. 22 Net assets or fund balances. Subtract line 21 from line 20 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 Signature of officer Charles Dickerson, Director Here Type or print name and title Print/Type preparer's name Date PTIN Preparer's signature Check Paid Preparer Firm's name Firm's FIN **Use Only** Firm's address Phone no May the IRS discuss this return with the preparer shown above? See instructions Yes No

| Fai | Check if Cabadula O contains a recognition of response or note to any line in this Bort III |
|-----|--|
| _ | Check if Schedule O contains a response or note to any line in this Part III |
| 1 | Briefly describe the organization's mission: ICYOLA is a youth orchestra, providing music education as primary |
| | purpose in developing strong, productive youth living in our inner |
| | |
| | communities, focusing Los Angeles county area |
| | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the |
| | prior Form 990 or 990-EZ? |
| | If "Yes," describe these new services on Schedule O. |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program |
| | services? |
| | If "Yes," describe these changes on Schedule O. |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured by |
| 4 | |
| | 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. |
| | 100 801 |
| 4a | (Code:) (Expenses \$122,761. including grants of \$) (Revenue \$) |
| | ICYOLA annual season finale concert at Disney Hall in downtown |
| | Los Angeles, is our most significant fundraising event. |
| | Now servicing over 250 musicians, from beginners to seasoned |
| | professionals of which include about 60% African American, 30% Latino |
| | and 10% other ethnicities. |
| | |
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| | |
| 4b | (Code:) (Expenses \$ including grants of \$) (Revenue \$) |
| | (1-1-1-) (-1-1-1-) (-1-1-1-1-) (-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 |
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| | |
| 4c | (Code:) (Expenses \$ including grants of \$) (Revenue \$) |
| 40 | (Code:) (Expenses \$ including grants of \$) (Revenue \$) |
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| | |
| 4d | Other program services (Describe on Schedule O.) |
| | (Expenses \$ including grants of \$) (Revenue \$) |
| 4e | Total program service expenses 122,761. |

| | | | Yes | No |
|----------|--|----------|----------|-----------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? 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? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | | | |
| | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 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? If "Yes," complete Schedule C, Part III | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | | | |
| | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | | |
| | "Yes," complete Schedule D, Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | | | |
| | complete Schedule D, Part III | 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? If "Yes," complete Schedule D, Part IV | 9 | | х |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | <u> </u> | | |
| | or in quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | х |
| 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. | | | |
| | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," | | | |
| · | complete Schedule D, Part VI | 11a | x | |
| , | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more | 114 | | |
| • | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | x |
| | Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more | 110 | | |
| • | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. | 11c | | x |
| | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets | 110 | | |
| • | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | x |
| | | 11e | | X |
| | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | TIE | | |
| f | | 11f | | x |
| 120 | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | | | |
| ıza | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | 120 | | x |
| L | Schedule D, Parts XI and XII | 12a | | - |
| K | "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | x |
| 12 | · · · · · · · · · · · · · · · · · · · | | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | | 14a | | |
| b | | | | |
| | fundraising, business, investment, and program service activities outside the United States, or aggregate | 446 | | x |
| 15 | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | ** |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or | 45 | | x |
| 46 | for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other | 4.0 | | x |
| 47 | assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on | 4- | х | |
| 40 | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions | 17 | ^ | \vdash |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | ,, | | x |
| 40 | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | _ |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | 40 | | , . |
| • | If "Yes," complete Schedule G, Part III | 19 | | X |
| 20a | | 20a | | X |
| b | | 20b | | _ |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | . | |
| | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | X | 1 |

(continued)

Checklist of Required Schedules

Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X 22 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 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? If "Yes," answer lines 24b X 24a 24b h Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c X Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25a 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? X 25b 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% 26 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 27 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 current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 28a 28b b A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If X 28c 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 30 X 31 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part L 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," X complete Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 X 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?............. 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a X controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable X 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI. 37 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 38 X 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 0 1a 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and X

Part IV

If "Yes," complete Form 6069.

UYA

Form 990 (2023)

16

17

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities

16

17

If "Yes," complete Form 4720, Schedule O.

Form 990 (2023) INNER CITY YOUTH ORCHESTRA OF LOS ANGELES INC 45-3622466 Page 6 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 Section A. Governing Body and Management

| <u> </u> | Clott A. Governing Body and Management | | | | | | · |
|-----------|---|--------|----------|----------|-----------|-----|----------------|
| 1- | Enter the number of voting members of the governing hady at the and of the tay year | 44 | | 0 [| | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1a | | ∸ | | | |
| | if the governing body delegated broad authority to an executive committee or similar | | | | | | |
| | committee, explain on Schedule O. | | | | | | |
| h | Enter the number of voting members included in line 1a, above, who are independent | 1b | | 0 | | | |
| b | | LID | | \dashv | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | | 2 | | х |
| 2 | any other officer, director, trustee, or key employee? | | | . | 2 | | - |
| 3 | | | | | , | | x |
| 4 | supervision of officers, directors, trustees, or key employees to a management company or other person? | | | 1 | 3 4 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed. | | | 1 | 5 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | | - 1 | 6 | | X |
| 6 | Did the organization have members or stockholders? | | | • | 0 | | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint | | | | 7- | | x |
| L | one or more members of the governing body? | | | . | 7a | | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, | | | | 76 | | x |
| _ | stockholders, or persons other than the governing body? | | | . | 7b | | A |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | | | | |
| | the year by the following: | | | | 0- | X | |
| a | The governing body? | | | 1 | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? | | | . | 8b | Λ | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at | | | | | | x |
| 800 | the organization's mailing address? If "Yes," provide the names and addresses on Schedule O | | | • | 9 | | Λ |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Re | venu | e Code.) | | | V | N ₂ |
| 10- | Did the expenization have level chanters, branches, or efflicted? | | | 1 | 10a | Yes | No X |
| 10a | Did the organization have local chapters, branches, or affiliates? | | | . | TUA | | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | | | | 40h | | |
| 44. | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | | | 1 | 10b | | х |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before fill | ng the | ioiiii? | . | 11a | | A . |
| b 120 | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | | | | 12a | X | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | | | 1 | 12a | 21 | x |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give r Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | ise to | COMMICIS | . | 120 | | - |
| С | | | | | 120 | X | |
| 42 | describe on Schedule O how this was done | | | 1 | 12c 13 | X | |
| 13 4 4 | Did the organization have a written whistleblower policy? | | | | | Λ | х |
| 14 45 | | | | . | 14 | | - A |
| 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 | | | | | | |
| _ | The organization's CEO, Executive Director, or top management official | | | | 150 | X | |
| a | | | | 1 | | X | |
| b | Other officers or key employees of the organization | | | . | 100 | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | | | | |
| ıva | with a taxable entity during the year? | | | | 16a | | х |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its | | | • | Tua | | |
| D | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | | | | | | |
| | organization's exempt status with respect to such arrangements? | | | | 16b | | |
| Sec | tion C. Disclosure | · · · | <u></u> | • | 100 | | |
| <u> </u> | List the states with which a copy of this Form 990 is required to be filed CA | | | | | | |
| 17 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T | sectio | n 501(c) | | | | |
| .0 | (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. | Joolio | 55 (6) | | | | |
| | W Own website Another's website Upon request Other (explain on Sche | dule (|)) | | | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of in | | • | | | | |
| | and financial statements available to the public during the tax year. | 5,031 | oonoy, | | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and re | corde | (21 | 317 | 88- | 426 | 50 |
| | Charles Dickerson 1985 POlling Vista Ste IInit 55 Los | | • | • | 1717 | | |

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees**that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| Check this box if neither the organization nor any rela | ited organiza | tion co | mper | nsate | ed a | ny curr | en | t officer, director, c | r trustee. | |
|---|-------------------|-----------------------------------|---------------------|---------|--------------|---------------------------------|-----|----------------------------------|-----------------------------------|---------------------------|
| | | | | (C | ;) | | | | | |
| (A) | (B) | | | Posit | tion | | | (D) | (E) | (F) |
| Name and title | Average | | not ched | | | | | Reportable | Reportable | Estimated amount |
| Name and age | hours | | unless er and | • | | | | compensation | compensation | of other |
| | per week | | | | | , | | from the | from related | compensation |
| | (list any | or c | ns | Officer | Ke) | Hig | For | organization (W-2/ 1099-MISC/ | organizations (W-2/ 1099-MISC/ | from the organization and |
| | hours for related | Individual trustee or director | T T | 8 | Key employee | nest ploye | mer | 1099-NEC) | 1099-NEC) | related organizations |
| | organizations | lor for | ma | | ploy | con | | | | |
| | below | Istee | nstitutional truste | | ĕ | Highest compensated employee | | | | |
| | dotted line) | | ě | | | sated | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| (1) J Stanley Sanders | | l | | | | | | | | |
| Chairman | 60 00 | Х | | | | | 4 | | | |
| (2) Charles Dickerson | 60.00 | | . | | | | | | | |
| Director | | | - | X | | | _ | 90,000. | | |
| (3) Sandra Wheeler | | | | | | | | | | |
| Secretary | | Х | | | | | _ | | | |
| (4) Sandra G Bennett | | | | | | | | | | |
| Director | | Х | | | | | | | | |
| (5) Hansonia Caldwell | | | | | | | | | | |
| Director | | X | | | | | | | | |
| (6) Anne Marie Johnson | | | | | | | | | | |
| Director | | X | | | | | | | | |
| (7) James Montgomery | | | | | | | | | | |
| Director | | X | | | | | | | | |
| (8) Akilah Morgan | 40.00 | | | | | | | | | |
| Office Manager | | | | _ 2 | X | | | 75,000. | | |
| (9) Jazin Morales | | | | | | | | | | |
| Director | | X | | | | | | | | |
| (10) Wilma Pinder | | | | | | | | | | |
| Director | | X | | | | | | | | |
| (11) Marcus Smith | | | | | | | T | | | |
| Director | [| X | | | | | | | | |
| (12) Jonathan Weedman | | | | \top | | | T | | | |
| Consultant | | X | | | | | _ | | 30,000. | |
| (13) Earl Wooten | | | | | | | T | | | |
| Director | [| X | | | | | | | | |
| (14) | | | | \top | | | T | | | |
| | | | | | | | | | | _ |

| (A) | | | (do l box offic | not ch , unle: cer and | Pos leck m | (C) sition nore the | nan one s both ar /trustee) | 1 | (D) Reportable compensation from the organization (W-2/ | (E) Reportable compensation from related organizations (W-2/ | | Estim | (F) ated am of other of other of other om the | r |
|---|--------------------------|---|-----------------------|------------------------------|---------------|---------------------------|-----------------------------------|--------|--|---|-----------|----------------|---|----|
| | | (list any hours for related organizations below dotted line) | or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | 1099-MISC/ 1099-NEC) | 1099-MI 1099-NE | sc/ | orgai | nization I organiz | |
| <u>(15)</u> | | | | | | | | | | | | | | |
| <u>(16)</u> | | | | | | | | | | | | | | |
| (17) | | | | | | | | | | | | | | |
| <u>(18)</u> | | | | | | | | | | | | | | |
| (19) | | | | | | | | | | | | | | |
| (20) | | | | | | | | | | | | | | |
| (21) | | | | | | | | | | | | | | |
| (22) | | | | | | | | | | | | | | |
| (23) | | | | | | | | | | | | | | |
| (24) | | | | | | | | | | | | | | |
| (25) | | | | | | | | | | | | | | |
| | | | <u></u> | | | | | | 165,000. | 30,0 | 00. | | | |
| c Total from continuation s d Total (add lines 1b and 1) Total number of individu | c) | t limited to t | | | | | | . | 165,000. ceived more than | 30,0 | • | | | |
| reportable compensation | on from the organizati | on | | | | | | | | | | | Yes | No |
| 3 Did the organization list ar employee on line 1a? If "Y | | | | | | | | | | | | 3 | | X |
| 4 For any individual listed or | | | | | | | | | | | | J | | |
| organization and related o | | | | | | | | | | | | | | x |
| individual5 Did any person listed on li | | | | | | | | | | | | 4 | | Ĥ |
| for services rendered to the | | | | | - | | | - | | | | 5 | X | |
| Section B. Independent Co | | | | | | | | | | | | | | |
| 1 Complete this table for | | • | | | | | | | | | | | | _ |
| compensation from the | (A) | compensa | lion ic | or trie | e ca | ienc | ar ye | ar e | nding with or with (B) | iin the or | ganizalic | ons tax (c) | c year | • |
| | Name and business addres | s | | | | | | | Description of servic | es | | Compens | ation | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 2 Total number of indeper | • | _ | | | | thos | e liste | ed a | bove) who | | | | | |

Form 990 (2023) INNER CITY YOUTH ORCHESTRA OF LOS ANGELES INC Part VIII Statement of Revenue

| | | Check it Schedule O | contains a re | esponse | or note to any lir | ie in this Part VII | 1 | | |
|---|-----|---------------------------------------|-----------------|-------------------|--------------------|----------------------|--|--------------------------------------|--|
| | | | | | • | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512–514 |
| | 1a | Federated campaigns . | | 1a | 868,682. | | | | |
| | b | Membership dues | | 1b | | | | | |
| ည္ တ | | ' | | | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | С | Fundraising events | | 1c | 41 000 | | | | |
| ַם פַֿ | d | Related organizations . | | 1d | 41,000. | | | | |
| ifts, r Ar | е | Government grants (contr | ributions) | 1e | 2,045,474. | | | | |
| <u>a</u> | f | All other contributions, gift | ts, grants, | | | | | | |
| Sin | | and similar amounts not in | . • | e 1f | | | | | |
| e tři | _ | Noncash contributions inc | | ´ `` | | | | | |
| 真色 | 9 | | | | | | | | |
| o bu | | lines 1a-1f | | | | | | | |
| | h | Total. Add lines 1a-1f | <u></u> | | | 2,955,156. | | | |
| | | | | | Business Code | | | | |
| | 2a | Concert Perfo | ormance | S | 711190 | 133,373. | 133,373. | | |
| <u>8</u> | b | | | | | | | | |
| e ⊆ | С | | | | | | | | |
| en S | l - | | | | | | | | |
| ıram Serv Revenue | d | | | | | | | | |
| Program Service Revenue | е | | | | | | | | |
| ቯ | | All other program service r | | | | 100 000 | | | |
| | g | Total. Add lines 2a-2f . | | | | 133,373. | | | |
| | 3 | Investment income (includi | ing dividends. | interest. | and | | | | |
| | | other similar amounts) . | | | | 94,096. | 94,096. | | |
| | 4 | Income from investment of | | | | | | | |
| | 5 | Royalties | • | • | | | | | |
| | " | rtoyanaco | | | | | | | |
| | | 0 1 | (i) R | eai | (ii) Personal | | | | |
| | | Gross rents | | | | | | | |
| | b | Less: rental expenses | 6b | | | | | | |
| | С | Rental income or (loss) | 6c | | | | | | |
| | d | Net rental income or (loss) | | | | | | | |
| | 7a | Gross amount from | (i) Secu | urities | (ii) Other | | | | |
| | , a | sales of assets | | | , , | | | | |
| | | other than inventory | 72 | | | | | | |
| | L. | Less: cost or other basis | " | | | | | | |
| _ | | | | | | | | | |
| evenue | | and sales expenses | | | | | | | |
| ΛĒ | С | Gain or (loss) | [7c] | | | | | | |
| œ | d | Net gain or (loss) | | <u></u> | | | | | |
| Other | 8a | Gross income from fundrai | ising | | | | | | |
| 늉 | | events (not including \$ | | | | | | | |
| • | | of contributions reported or | n line | | | | | | |
| | | 1c). See Part IV, line 18 | | . 8a | | | | | |
| | h | Less: direct expenses . | | | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| | | Net income or (loss) from f | - | enis . | | | | | |
| | 9a | Gross income from gaming | = | | | | | | |
| | | activities. See Part IV, line | 19 | . 9a | | | | | |
| | b | Less: direct expenses . | | . 9b | | | | | |
| | С | Net income or (loss) from g | gaming activiti | es | | | | | |
| | 10a | Gross sales of inventory, le | 266 | | | | | | |
| | IJa | returns and allowances. | | . 10a | | | | | |
| | h | | | | | | | | |
| | | Less: cost of goods sold | | | | | | | |
| | C | Net income or (loss) from s | sales of invent | ory | | | | | |
| | | | | | Business Code | | | | |
| S | 11a | | | | | | | | |
| ine Tue | b | | | | | | | | |
| Miscellanous Revenue | С | | | | | | | | |
| Re | d | All other revenue | | | | | | | |
| Σ | | Total. Add lines 11a-11d | | | | | | | |
| | | Total revenue See instruc | | | | 3,182,625. | 227.469 | | |

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 n | | | <u> </u> | |
|----|---|---------------------|-----------------|------------------|-------------|
| | • | (A) | (B) | (C) | (D) |
| | ot include amounts reported on lines 6b, 7b, | Total expenses | Program service | Management and | Fundraising |
| | b, and 10b of Part VIII. | | expenses | general expenses | expenses |
| 1 | Grants and other assistance to domestic organizations | 67.100 | 67 100 | | |
| | and domestic governments. See Part IV, line 21 | 67,133. | 67,133. | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | 22,147. | 22,147. | | |
| 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 | 67,134. | 67,134. | 46,000. | 1,584. |
| 6 | Compensation not included above to disqualified | 01,1011 | 01/2021 | | |
| Ü | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | 79 780 | 79,780. | | 1,584. |
| - | | 79,780. 548,168. | 73,700. | | 1,304. |
| 7 | Other salaries and wages | 340,100. | | | |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | 30 000 | | 30 000 | |
| 9 | Other employee benefits | 30,000. | 46 272 | 30,000. | |
| 10 | Payroll taxes | 46,373. | 46,373. | | |
| 11 | Fees for services (nonemployees): | | | | |
| а | Management | 525. | 30,000. | | |
| b | Legal | 100. | | | |
| С | Accounting | 15,743. | | | |
| d | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | 193,631. | | | _ |
| f | Investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, column | | | | |
| | (A), amount, list line 11g expenses on Schedule O.) | | | | |
| 12 | Advertising and promotion | 56,517. | | | _ |
| 13 | Office expenses | 14,310. | 37,194. | 3,133. | _ |
| 14 | Information technology | , | _ , | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 122,760. | 122,760. | | _ |
| 17 | Travel | 34,723. | 34,723. | | |
| 18 | Payments of travel or entertainment expenses | 34,723. | 31,723. | | |
| 10 | · | | | | |
| 40 | for any federal, state, or local public officials | 17,384. | 17,384. | | |
| 19 | Conferences, conventions, and meetings | 17,304. | 17,304. | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 10 661 | | | |
| 23 | Insurance | 40,661. | | | |
| 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.) | | | | |
| а | Dues & Subscription | 3,140. | | | |
| b | Repairs & Maint | 1,000. | | | |
| С | Bank Fees | 264. | | | |
| d | | | | | |
| е | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 1,361,493. | 524,628. | 79,133. | 3,168. |
| 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) | | | | |
| | , | | I | ' · | |

| | | Check if Schedule O contains a response or note to any line in this Part X | | | |
|-----------------------------|-----|--|-------------------|-----|-----------------|
| | | 1 | (A) | | (B) |
| | | | Beginning of year | | End of year |
| | 1 | Cash - non-interest-bearing | 316,409. | 1 | 157,829. |
| | 2 | Savings and temporary cash investments | • | 2 | 1,214,120. |
| | 3 | Pledges and grants receivable, net | | 3 | • |
| | 4 | Accounts receivable, net | | 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 | 131,284. |
| | 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 | 107,472. | 7 | 126,284. |
| ets | 8 | Inventories for sale or use | , | 8 | , |
| Assets | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment: cost or other | | | |
| | | basis. Complete Part VI of Schedule D 10a 5 , 778 , 307 . | | | |
| | b | Less: accumulated depreciation 10b | 21,360. | 10c | 5,778,307. |
| | 11 | Investments - publicly traded securities | , | 11 | |
| | 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 | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 33) | 445,241. | 16 | 7,407,824. |
| | 17 | Accounts payable and accrued expenses | -511. | 17 | 866,418. |
| | 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 | 6,541,406. |
| s | 22 | Loans and other payables to any current or former officer, director, | | | |
| Liabilities | | trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| abil | | 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 | | 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 | -511. | 26 | 7,407,824. |
| | | Organizations that follow FASB ASC 958, check here | | | |
| S | | and complete lines 27, 28, 32, and 33. | | | |
| nce | 27 | Net assets without donor restrictions | 445,241. | 27 | 7,407,824. |
| <u>a</u> | 28 | Net assets with donor restrictions | | 28 | |
| Ā | | Organizations that do not follow FASB ASC 958, check here | | | |
| Fun | | and complete lines 29 through 33. | | | |
| o_ _ | 29 | Capital stock or trust principal, or current funds | | 29 | |
| ets | 30 | Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| Ass | 31 | Retained earnings, endowment, accumulated income, or other funds | 445,752. | 31 | |
| Net Assets or Fund Balances | 32 | Total net assets or fund balances | 445,752. | 32 | |
| | 33 | Total liabilities and net assets/fund balances | 445,241. | 33 | 7,407,824. |
| UYA | | | | | Form 990 (2023) |

| orm | n 990 (2023) INNER CITY YOUTH ORCHESTRA OF LOS ANGELES INC | <u>45-3</u> | 6224 | 66 | Page 12 |
|-----|---|-------------|------|--------------|---|
| Pai | rt 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 | | | 625. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | 193 . |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 1,8 | 21,: | L32. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 4 | <u>45, '</u> | 752. |
| 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 | | | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | | |
| | 32, column (B)) | 10 | 2,2 | 66,8 | 384. |
| Paı | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | <u></u> | | | <u>. </u> |
| | | | | Ye | s No |
| 1 | Accounting method used to prepare the Form 990: X Cash Accrual 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? | | . 2 | а | |
| | 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. | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | . 2 | b | |
| | 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. | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| С | 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? | | . 2 | С | |
| | If the organization changed either its oversight process or selection process during the tax year, explain on | | | | |
| | Schedule O. | | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the | | | | |
| | Uniform Guidance 2 C.F.R. Part 200, Subpart F2 | | 3 | a | |

Form **990** (2023)

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

UYA

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

INNER CITY YOUTH ORCHESTRA OF LOS ANGELES INC

45-3622466 Page 2

Form 990-EZ (2023)

| Part | | | | |
|----------|---|------------|----------------|--|
| | instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part | V . | | <u>. </u> |
| | | | Yes | No |
| 33 | Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a | 22 | | |
| 34 | detailed description of each activity in Schedule O | 33 | | |
| 34 | Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the | | | |
| | change on Schedule O. See instructions | 34 | | |
| 35a | Did the organization have unrelated business gross income of \$1,000 or more during the year from business | J- | | |
| oou | activities (such as those reported on lines 2, 6a, and 7a, among others)? | 35a | | |
| b | If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O | 35b | | |
| С | Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, | | | |
| | reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III | 35c | | |
| 36 | Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets | | | |
| | during the year? If "Yes," complete applicable parts of Schedule N | 36 | | |
| 37a | Enter amount of political expenditures, direct or indirect, as described in the instructions [37a] | | | |
| b | Did the organization file Form 1120-POL for this year? | 37b | | |
| 38a | Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were | | | |
| _ | any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? | 38a | | |
| | If "Yes," complete Schedule L, Part II, and enter the total amount involved | | | |
| 39 | Section 501(c)(7) organizations. Enter: | | | |
| a | Initiation fees and capital contributions included on line 9 | | | |
| b 40a | Gross receipts, included on line 9, for public use of club facilities | - | | |
| 40a | Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911: | | | |
| b | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 | | | |
| | excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year | | | |
| | that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 40b | | |
| С | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed | | | |
| | on organization managers or disqualified persons during the year under sections 4912, | | | |
| | 4955, and 4958 | | | |
| d | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line | | | |
| | 40c reimbursed by the organization | | | |
| е | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter | | | |
| | transaction? If "Yes," complete Form 8886-T | 40e | | |
| 41 | List the states with which a copy of this return is filed: | | | |
| 42a | The organization's books are in care of: Telephone no. | 7 | | |
| h | Located at: 1985 ROlling Vista Ste. Unit 55 Lomita, CA ZIP + 4 9071 | | l _v | l Na |
| b | At any time during the calendar year, did the organization have an interest in or a signature or other authority a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 42b | Yes | No |
| | If "Yes," enter the name of the foreign country: | 72.0 | | |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and | | | |
| | Financial Accounts (FBAR). | | | |
| С | | 42c | | |
| | If "Yes," enter the name of the foreign country: | | - | |
| 43 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here | | | . 🔲 |
| | and enter the amount of tax-exempt interest received or accrued during the tax year | | | |
| | | | Yes | No |
| 44a | Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be | | | |
| | completed instead of Form 990-EZ | 44a | | |
| b | Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be | | | |
| _ | completed instead of Form 990-EZ | 44b | <u> </u> | |
| C C | Did the organization receive any payments for indoor tanning services during the year? | 44c | | |
| d | If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schodula O | 114 | | |
| 45a | explanation in Schedule O | 44d 45a | | |
| 45a b | Did the organization receive any payment from or engage in any transaction with a controlled entity within the | -Ja | | |
| | meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of | | | |
| | Form 990-F7. See instructions | 45b | | |

45-3622466

Form 990-EZ (2023)

45-3622466

Form 990-EZ (2023)

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public

| Inter | nal Reven | ue Service | Go to w | ww.irs.gov/Form990 fo | or instructions and t | the latest inform | nation. | | Inspection |
|-------------------------|--------------|---------------------|--|-------------------------------------|----------------------------|----------------------|---------------------|--------------|---|
| Α | For the | 2023 calend | lar year, or tax year begii | nning | | , 2023, and e | ending | | , 20 |
| В | Check if a | applicable: | C Name of organization | INNER CITY YOUT | H ORCHESTRA O | F LOS ANGE | LES INC | D Empl | oyer identification number |
| | Address | change | Doing business as | | | | | 45- | 3622466 |
| Ī | Name cha | - | | ox if mail is not delivered to stre | eet address) | Roo | m/suite | E Telep | hone number |
| П | Initial retu | • | 6820 La Tije | | , | | | | .3) 788-4260 |
| H | | rn/terminated | | e, country, and ZIP or foreign pe | ostal codo | l l | | | s receipts |
| | Amended | | Los Angeles, | | osiai code | | | | 3,182,625. |
| Н | | | F Name and address of princip | | | | 11/-> 1, 11/- | | |
| Ш | Application | on pending | Charles Dick | | | | ` ' | | for subordinates? Yes No |
| _ | _ | | <u> </u> | | Rolling Vista Ste. U | | | | |
| <u> </u> | Tax-exen | | 501(c)(3) 501(c) (|) (insert no.) | 4947(a)(1) or 52 | 7 | | | st. See instructions |
| <u>J</u> | Website: | | | | | | H(c) Group e | | |
| <u>K</u> | | rganization: X | | ssociation Other | L | Year of formation: 2 | 2011 M S | State of leg | al domicile: CA |
| Pa | art I | Summar | | | | | | | |
| | 1 | | ribe the organization's mis | | | / = 0::0 | | | , |
| 4 | | | City Youth O | | | | | | |
| ű | | educat | tion, develop | ing strong | productive | youth 1 | n minor | ıty | communities |
| Activities & Governance | | | | | | | | | |
| Š | 2 | Check this b | oox 🔲 if the organization | discontinued its operati | ions or disposed of n | nore than 25% o | of its net assets | ٠ | |
| ŏ | 3 | Number of v | oting members of the gov | rerning body (Part V I , lin | ne 1a) | | | 3 | 0 |
| o S | 4 | Number of in | ndependent voting membe | ers of the governing boo | dy (Part VI, line 1b) | | | 4 | 0 |
| ij | 5 | Total numbe | er of individuals employed | in calendar year 2023 (| (Part V, line 2a) | | | 5 | 0 |
| 휹 | 6 | Total numbe | er of vo l unteers (estimate i | if necessary) | | | | 6 | 0 |
| ĕ | 7a | Total unrelat | ted business revenue fron | n Part VIII, column (C), I | line 12 | | | 7a | 0. |
| | b | Net unrelate | ed business taxable incom | e from Form 990-T, Par | t I, line 11 | | | 7b | 0. |
| _ | | | | , | , | | Prior Year | | Current Year |
| | 8 | Contribution | s and grants (Part VIII, line | e 1h) | | | | | 2,955,156. |
| a | 9 | | rvice revenue (Part VIII, lin | • | | _ | | | 133,373. |
| Revenue | 10 | • | income (Part VIII, column | . , | | _ | | | 94,096. |
| ě | 11 | | ue (Part VIII, column (A), I | | | | | | 31,030. |
| œ | 12 | | ue - add lines 8 through 11 | | | _ | | | 3,182,625. |
| _ | _ | | | | | | | | 89,280. |
| | 13 | | similar amounts paid (Part | | | | | | 03,200. |
| | 14 | - | d to or for members (Part | | | | | | 771,455. |
| s | 15 | | ner compensation, employ | • | | | | | 193,631. |
| nse | | | I fundraising fees (Part IX, | | | <u>;</u> ⊢ | | | 193,031. |
| Expenses | | | ising expenses (Part IX, c | | | | | | 207 107 |
| û | | • | nses (Part I X, column (A), l | | | _ | | | 307,127. |
| | | | ses. Add lines 13-17 (mus | | | _ | | | 1,361,493. |
| | 19 | Revenue les | ss expenses. Subtract line | 18 from line 12 | | | | | 1,821,132. |
| 5 | g l | | | | | | Beginning of Curre | | End of Year |
| Net Assets or | 20 | | (Part X, line 16) | | | | 445,2 | | 7,407,824. |
| t Ass | 21 | Total liabilitie | es (Part X, line 26) | | | | | 11. | 7,407,824. |
| | | | or fund balances. Subtract | line 21 from line 20 . | | | 445,7 | 52. | |
| | art II | | re Block | | | | | | |
| | | | clare that I have examined this reti claration of preparer (other than of | | | | knowledge and belie | ef, it is | |
| | ,, 00,,00,, | | state and the property (state and the | noory to bacoa off all miormation | n or whom proparer has any | , momougo. | | 1 | |
| | | | | | | | | | |
| Sig | jn | Signature of office | cer | | | | | Da | te |
| He | re | Charle | es Dickerson, | Director | | | | | |
| | | Type or print nar | me and title | | | | | | |
| | | Print/Type pre | eparer's name | Preparer's signature | | Date | Check | ☐ if | PTIN |
| Pai | id | | | | | | self-em | oloyed | |
| | eparer | Firm's name | | - | L | | Firm's EIN | . , = | |
| | e Only | | ss | | | | Phone no. | | |
| |) | addres | - | | | | 1 | | |
| May | the ID | S discuss this | return with the preparer s | shown above? See instr | ructions | | l | | □ Vos □ No |

| Par | Till Statement of Program Service Accomplishments |
|-----|--|
| 1 | Check if Schedule O contains a response or note to any line in this Part III |
| ' | ICYOLA is a youth orchestra, providing music education as primary |
| | purpose in developing strong, productive youth living in our inner |
| | communities, focusing Los Angeles county area |
| | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the |
| | prior Form 990 or 990-EZ? |
| | If "Yes," describe these new services on Schedule O. |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program |
| | services? |
| | If "Yes," describe these changes on Schedule O. |
| 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 \$ 122,761. including grants of \$) (Revenue \$) |
| | ICYOLA annual season finale concert at Disney Hall in downtown |
| | Los Angeles, is our most significant fundraising event. |
| | Now servicing over 250 musicians, from beginners to seasoned |
| | professionals of which include about 60% African American, 30% Latino |
| | and 10% other ethnicities. |
| | |
| | |
| | |
| | |
| | |
| | |
| 4b | (Code:) (Expenses \$ including grants of \$) (Revenue \$) |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| 4c | (Code:) (Expenses \$ including grants of \$) (Revenue \$) |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| 4d | Other program services (Describe on Schedule O.) |
| A - | (Expenses \$ including grants of \$) (Revenue \$) Total program service expenses 122,761. |
| 40 | Total program service expenses 122, 761. |

| | | | Yes | No |
|----------|--|-----|------|-----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | X | 7.7 |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? See instructions | 2 | | Х |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | ٦, |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | | | ., |
| | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 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? If "Yes," complete Schedule C, Part III | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | | | |
| | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | | ٠,, |
| | "Yes," complete Schedule D, Part I | 6 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | _ | | · . |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part IL | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | _ | | x |
| _ | complete Schedule D, Part III | 8 | | ^ |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a | | | |
| | custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or | _ | | x |
| 40 | debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | 40 | | x |
| 11 | or in quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | A . |
| •• | VII, VIII, IX, or X, as applicable. | | | |
| а | | | | |
| u | complete Schedule D, Part VI | 11a | x | |
| h | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more | 114 | | |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | x |
| С | | | | |
| _ | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V.III. | 11c | | х |
| d | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets | | | |
| | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | Х |
| е | | 11e | | Х |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII | 12a | | X |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If | | | |
| | "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | Х |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | Х |
| 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 | | | l |
| | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or | | | 3, |
| | for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other | ۱,, | | x |
| 47 | assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | ^ |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on | 47 | x | |
| 10 | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions | 17 | - A. | |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 10 | | x |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | 18 | | |
| 13 | If "Yes," complete Schedule G, Part III | 19 | | x |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule.H | 20a | | X |
| zua b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | X |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| | domestic government on Part IX. column (A). line 1? If "Yes." complete Schedule I. Parts I and II | 21 | x | |

(continued)

Checklist of Required Schedules

Part IV

| | | | 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? If "Yes," complete Schedule I, Parts I and III | 22 | Х | |
| 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? If "Yes," complete Schedule J | 23 | Х | <u> </u> |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | | | |
| | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b | | | |
| | through 24d and complete Schedule K. If "No," go to line 25a | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | Х |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | | | |
| | to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | Х |
| 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? If "Yes," complete Schedule L, Part I | 25a | | 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? | | | |
| | If "Yes," complete Schedule L, Part I | 25b | | 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? If "Yes," complete Schedule L, Part II | 26 | X | <u> </u> |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key | | | |
| | employee, creator or founder, substantial contributor or employee thereof, a grant selection committee | | | |
| | member, or to a 35% controlled entity (including an employee thereof) or family member of any of these | | | |
| | persons? If "Yes," complete Schedule L, Part III | 27 | | 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). | | | |
| а | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If | | | v |
| | "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part.IV | 28b | | _ |
| С | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If | 200 | | x |
| 20 | "Yes," complete Schedule L, Part IV | 28c 29 | | X |
| 29 30 | Did the organization receive more than \$25,000 in noncash contributions? In res, complete schedule w | 29 | | - |
| 30 | conservation contributions? If "Yes," complete Schedule M | 30 | | x |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N</i> , <i>Part I</i> | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes,"</i> | 31 | | |
| JZ | complete Schedule N, Part II | 32 | | x |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | UZ | | - |
| 00 | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, | " | | |
| • | or IV, and Part V, line 1 | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a | | | |
| | controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | X |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable | | | |
| | related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and | | | |
| | 19? Note : All Form 990 filers are required to complete Schedule Q | 38 | X | |
| Par | | | | |
| | 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 in line 1a. Enter -0- if not applicable | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and | | v | |
| | reportable gaming (gambling) winnings to prize winners? | 1c | X | 1 |

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities

16

17

If "Yes," complete Form 4720, Schedule O.

If "Yes," complete Form 6069.

16

17

Form 990 (2023)INNER CITY YOUTH ORCHESTRA OF LOS ANGELES INC 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 Section A. Governing Body and Management Yes No 0 Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 3 Did the organization delegate control over management duties customarily performed by or under the direct X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X Are any governance decisions of the organization reserved to (or subject to approval by) members, b X 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a X Each committee with authority to act on behalf of the governing body?................. Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes X 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?........ 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?. . . 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. X Did the organization have a written conflict of interest policy? If "No," go to line 13........... 12a 12a $\overline{\mathbf{x}}$ Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . 12b b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X X 13 13 14 X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a X 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a 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 Section C. Disclosure CA 17 List the states with which a copy of this Form 990 is required to be filed 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. Upon request X Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19

(213)788-4260

CA 90717

20

and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records.

Charles Dickerson 1985 ROlling Vista Ste. Unit 55 Lomita,

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees**that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| Check this box if neither the organization nor any rela | | tion co | mper | nsate | ed a | ny cur | ren | it officer, director, c | r trustee. | |
|---|-------------------|-----------------------------------|-------------------|---------|--------------|---------------------------------|-----|----------------------------------|-----------------------------------|---------------------------|
| | | | | (C | | | | | | |
| (A) | (B) | | | Posit | tion | | | (D) | (E) | (F) |
| Name and title | Average | (do not check more than one | | | | | | Reportable | Reportable | Estimated amount |
| realite and dige | hours | | | | | or/trustee) | | compensation | compensation | of other |
| | per week | | | | | | | from the | from related | compensation |
| | (list any | or c | nsı | Officer | Kej | Hig emi | For | organization (W-2/ 1099-MISC/ | organizations (W-2/ 1099-MISC/ | from the organization and |
| | hours for related | vidua | itulio | 8 | emp' | nest oloye | mer | 1099-NEC) | 1099-NEC) | related organizations |
| | organizations | Individual trustee or director | nstitutional trus | | key employee | com | | | | |
| | below | stee | ruste | | Ф | Highest compensated employee | | | | |
| | dotted line) | | Ö | | | ated | | | | |
| | | | | | | | | | | |
| | | | | \perp | | | | | | |
| (1) J Stanley Sanders | | | | | | | | | | |
| Chairman | 60 00 | Х | | 4 | | | | | | |
| (2) Charles Dickerson | 60.00 | | l I. | | | | | | | |
| Director | | | 1 | x | _ | | _ | 90,000. | | |
| (3) Sandra Wheeler | | | | | | | | | | |
| Secretary | | Х | | _ | | | _ | | | |
| (4) Sandra G Bennett | | | | | | | | | | |
| Director | | Х | | _ | | | | | | |
| (5) Hansonia Caldwell | | | | | | | | | | |
| Director | | Х | | _ | | | | | | |
| (6) Anne Marie Johnson | | | | | | | | | | |
| Director | | Х | | _ | | | | | | |
| (7) James Montgomery | | | | | | | | | | |
| Director | | Х | | | | | | | | |
| (8) Akilah Morgan | 40.00 | | | | | | | | | |
| Office Manager | | | | | X | | | 75,000. | | |
| (9) Jazin Morales | | | | | | | | | | |
| Director | | Х | | | | | _ | | | |
| (10) Wilma Pinder | L | | | | | | | | | |
| Director | | Х | | | | | | | | |
| (11) Marcus Smith | L | | | | | | | | | |
| Director | | X | | | | | | | | |
| (12) Jonathan Weedman | L | | | | | | | | | |
| Consultant | | Х | | | | | | | 30,000. | |
| (13) Earl Wooten | | | | | | | | | | |
| Director | | Х | | | | | | | | |
| <u>(14)</u> | L | | | | | | | | | |
| | | | | | | | | | | |

| Part | VII Section A. Officers, Directors, Tr | <u>ustees, Ke</u> | <u>ey En</u> | nplo | oye | es, | and | Hig | hest Compens | ated En | nployees | S | (con | tinued |
|-------------|--|--|--------------|-------------------------------|--------|-------------------|------------------------------|-------|---------------------------------------|-------------------------|------------|---------|---------------------|----------|
| | | | | | | (C) | | | | | | | | |
| | (A) | (B) Position (do not check more than one | | | | | | | (D) |) | | (F) | | |
| | Name and title | Average | box | box, unless person is both an | | | | | Reportable compensation | Reportable compensation | Estim | ated an | | |
| | | hours per week | От | cer an | a a ai | director/trustee) | | | from the | from rela | ated | cor | npensa | |
| | | (list any | or c | 3 78 | 9 | 6 | em | FO | organization (W-2/ 1099-MISC/ | organizatio 1099-M | ` | | rom the nization | |
| | | hours for related | or director | Institutional true | Ę | key employe | ploye | mer | 1099-NEC) | 1099-NI | | - | | izations |
| | | organizations | 9 1 | nal t | | Joye | e comp | | | | | | | |
| | | below dotted line) |) see | usiee | | " | Hignest compensa employee | | | | | | | |
| | | dotted fille) | | " | | | ted | | | | | | | |
| (15) | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| <u>(16)</u> | | | | | | | | | | | | | | |
| <u>(17)</u> | | | | | | | | | | | | | | |
| <u>(18)</u> | | | | | | | | | | | | | | |
| <u>(19)</u> | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| <u>(21)</u> | | | | | | | | | | | | | | |
| <u>(22)</u> | | | | | | | | | | | | | | |
| <u>(23)</u> | | | | | | | | | | | | | | |
| (24)_ | | | | | | | | | | | | | | |
| (25) | | | | | | | | | | | | | | |
| | | <u> </u> | | | | | | | 1.65 000 | 20 (| 200 | | | |
| 1b | Subtotal | | | | | | | | 165,000. | 30,0 | 000. | | | |
| c d | Total from continuation sheets to Part VII, Sect Total (add lines 1b and 1c) | | | | | | | | 165,000. | 30,0 | 200 | | | |
| | Total number of individuals (including but no | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | reportable compensation from the organizati | | | | | | , | | | *, | | | | |
| | | | | | | | | | | | | | Yes | No |
| 3 | Did the organization list any former officer, direct | | | | | | - | | | | | | | v |
| 4 | employee on line 1a? If "Yes," complete Schedul For any individual listed on line 1a, is the sum of | | | | | | | | | | | 3 | | X |
| ~ | organization and related organizations greater th | | | | | | | | | | | | | |
| | individual | | | | | | | | | | | 4 | | x |
| 5 | Did any person listed on line 1a receive or accrue | e compensat | tion fro | m ar | ny ui | nrela | ated or | gani | ization or individua | | | | | |
| | for services rendered to the organization? If "Yes | s," complete | Sched | ule . | J for | sucl | n perso | on. | <u> </u> | | | 5 | Х | |
| | on B. Independent Contractors | | | | | | | _ 41_ | | 41 . | 00.000 -f | | | |
| 1 | Complete this table for your five highest comcompensation from the organization. Report | • | | | | | | | | | | n'e tay | , voa | r |
| | (A) | Compensa | tion ic | , | e ca | IICIIC | uai ye | are | (B) | iiii tiile Oi | gariizalio | (C) | уса | 1. |
| | Name and business addres | ss | | | | | | | Description of servic | es | | Compens | ation | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | - | | | |
| 2 | Total number of independent contractors (inc | _ | | | | | se liste | ed a | bove) who | | | | | |
| | received more than \$100,000 of compensati | ion from the | e orga | niza | tion | | | | | | | | | |

Part VIII Statement of Revenue

| | | Check if Schedule O | contains a resp | onse | or note to any lir | ne in this Part VII | | | |
|---|-------|---|--------------------|-----------|---------------------------------------|----------------------|--|--------------------------------------|--|
| | | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512–514 |
| | 1a | Federated campaigns . | | 1a | 868,682. | | | | |
| s, Grants smounts | b | Membership dues | | 1b | , | | | | |
| | | Fundraising events | | 1c | | | | | |
| | C | | | | 41,000. | | | | |
| | d | Related organizations . | | 1d | · · · · · · · · · · · · · · · · · · · | | | | |
| 3ifts ar A | е | Government grants (cont | | 1e | 2,045,474. | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | f | All other contributions, gif | ts, grants, | | | | | | |
| | | and similar amounts not included above 1f | | | | | | | |
| the the | g | Noncash contributions in | cluded in | | | | | | |
| ë G | | lines 1a-1f | | 1g | s | | | | |
| နှင့် | h | | | | | 2,955,156. | | | |
| | | Total: 7 da III do Ta Ti | | <u> </u> | Business Code | | | | |
| | 2a | Concert Perf | ormances | | 711190 | 133,373. | 133,373. | | |
| æ | | | | | 711190 | 133,373. | 133,373. | | |
| <u>.</u> ≥ | b | | | | | | | | |
| Sel Du | С | | | | | | | | |
| E § | d | | | | | | | | |
| ž & | е | | | | | | | | |
| Program Service Revenue | f | All other program service r | evenue | | | | | | |
| _ | g | Total. Add lines 2a-2f . | | | | 133,373. | | | |
| | | Investment income (includ | | | | · | | | |
| | " | other similar amounts) . | | | | 94,096. | 94,096. | | |
| | 4 | Income from investment of | | | | | 0 = 7 0 0 0 1 | | |
| | | | • | • | | | | | |
| | 5 | Royalties | | | | | | | |
| | | | (i) Real | | (ii) Personal | | | | |
| | 6a | Gross rents | 6a | | | | | | |
| | b | Less: rental expenses | 6b | | | | | | |
| | С | Rental income or (loss) | 6c | | | | | | |
| | d | Net rental income or (loss) | | | | | | | |
| | 72 | Gross amount from | (i) Securitie | | (ii) Other | | | | |
| | ۱ ' a | sales of assets | | | , , | | | | |
| | | other than inventory | 7a | | | | | | |
| | h | Less: cost or other basis | " | | | | | | |
| | | | 76 | | | | | | |
| evenue | | and sales expenses | | | | | | | |
| Ke | | Gain or (loss) | | | | | | | |
| æ | d | Net gain or (loss) | | · <u></u> | | | | | |
| Other R | 8a | Gross income from fundra | ising | | | | | | |
| ₹ | | events (not including \$ _ | | . | | | | | |
| | | of contributions reported o | n line | | | | | | |
| | | 1c). See Part IV, line 18 | | 8a | | | | | |
| | ь | Less: direct expenses . | | 8b | | | | | |
| | | Net income or (loss) from t | | | | | | | |
| | | Gross income from gaming | = | " | · · · · · · · · · · · · · · · · · · · | | | | |
| | Эа | = | = | | | | | | |
| | | activities. See Part IV, line | | 9a | | | | | |
| | | Less: direct expenses . | | 9b | | | | | |
| | С | Net income or (loss) from (| gaming activities | <u> </u> | | | | | |
| | 10a | Gross sales of inventory, le | | | | | | | |
| | | returns and allowances . | | 10a | | | | | |
| | b | Less: cost of goods sold | | 10b | | | | | |
| | С | Net income or (loss) from s | sales of inventory | , | | | | | |
| | | () | | | Business Code | | | | |
| vo | 11a | | | | | | | | |
| e e | b | | | | | | | | |
| lan enu | | | | | | | | | |
| ie K | C | All ather recognition | | | | | | | |
| Miscellanous Revenue | | All other revenue | | | | | | | |
| | | Total. Add lines 11a-11d | | | | | 207 462 | | |
| | 12 | Total revenue. See instruc | ctions | | | 3,182,625. | 22 | | I |

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 (A) Total expenses (B) Do not include amounts reported on lines 6b. 7b. Fundraising Program service expenses Management and general expenses 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 67,133. 67,133. and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 22,147. 22,147. 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 46,000. 67,134. 67,134. 1,584. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and 79,780. 79,780. 1,584. persons described in section 4958(c)(3)(B) 548,168. 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 30,000. 30,000. q 46,373. 46,373. 10 11 Fees for services (nonemployees): 525. 30,000. а 100. Legal....... 15,743. 193,631. Professional fundraising services. See Part IV, line 17. . е f Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . . 56,517. 12 14,310. 37,194. 3,133. 13 14 15 122,760. 122,760. 16 34,723. 34,723. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 17,384. 17,384. 19 Conferences, conventions, and meetings 20 21 22 Depreciation, depletion, and amortization 40,661. 23 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.) 3,140. Dues & Subscription Repairs & Maint 1,000. b 264. Bank Fees c d All other expenses е 79,133. 1,361,493. 524,628. 3,168. Total functional expenses. Add lines 1 through 24e . . 25 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 (B) End of year Beginning of year 316,409. 157,829. 1 1 Cash - non-interest-bearing 1,214,120. 2 2 3 3 4 4 5 Loans and other receivables from any current or former officer, director. trustee, key employee, creator or founder, substantial contributor, or 35% 131,284. controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 107,472. 126,284. 7 7 8 8 9 9 10a Land, buildings, and equipment: cost or other 5,778,307. basis. Complete Part VI of Schedule D 10a 21,360. 5,778,307. 10c 10b 11 11 12 12 13 13 14 14 15 15 445,241. 7,407,824. 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 -511. 866,418. 17 17 18 18 19 19 20 20 6,541,406. 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, _iabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 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 25 -511. 7,407,824. 26 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net Assets or Fund Balances 445,241. 7,407,824. 27 27 28 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29 30 30 Paid-in or capital surplus, or land, building, or equipment fund 445,752. 31 Retained earnings, endowment, accumulated income, or other funds 31 445,752. 32 32 445,241. 7,407,824. 33

3a

Form 990 (2023)

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

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

SCHEDULE A

(Form 990)

Public Charity Status and Public Support

 $Complete \ if the \ organization \ is \ a \ section \ 501(c)(3) \ organization \ or \ a \ section \ 4947(a)(1) \ nonexempt \ charitable \ trust.$ Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

| Name of the | he organizati | on | | | | | | Employer identification | n number |
|-------------|---------------|-----------------------------|--------------------------|--------------------------------------|---|-------------------------|-------------------------|--|----------------------------------|
| | | | | | OS ANGELES I | | | 45-3622466 | |
| Part I | | | | | l organizations mus | | | | ons. |
| The orga | | • | | | is: (For lines 1 throug | | - | • | |
| 1 ∐ | | | | | on of churches descri | | | 0(b)(1)(A)(i). | |
| 2 ∐ | | | | | . (Attach Schedule E | • | | | |
| 3 ∐ | • | • | | | ganization described i | | | | |
| 4 📙 | | | - | • | onjunction with a hos | oital desc | ribed in s | section 170(b)(1)(A |)(iii). Enter the |
| | | name, city, | | | | | | | |
| 5 📙 | _ | • | | | ollege or university ov | vned or o | perated b | y a governmental u | nit described in |
| . — | | | | nplete Part II.) | | | | | |
| 6 ∐ | • | • | • | • | mental unit described | | • | ,, ,, ,, , | |
| 7 ∐ | • | | - | | antial part of its supp | ort from a | a governr | nental unit or from t | he general public |
| | | | |)(A)(vi). (Compl | · | 5 | | | |
| ≗⊟ | | - | | • |)(1)(A)(vi). (Complete | | | | |
| 9 📙 | _ | | _ | | d in section 170(b)(1 | | | - | |
| | | - | ı-ıand - gra | nt college of agr | iculture (see instruction | ons). Ent | er the hai | me, city, and state c | or the college or |
| 40 🗆 | university: | | برال مسم مال | ivaa (1) | then 22 1/20/ of its | | | | in food and anoog |
| 10 📙 | receipts fr | zation that om activitie | normally l es related | receives (1) mor to its exempt fu | re than 33 ¹ /3% of its nctions, subject to ce related business taxa | support t rtain exce | rom conti eptions: a | ributions, membersr nd (2) no more than | 11p rees, and gross |
| | support fr | om gross ir | nvestment | t income and un | related business taxa | ble incon | ne (less s | ection 511 tax) from | businesses |
| 44 🖂 | | | | | 75. See section 509 (| | | | |
| 11 12 | • | • | | • | sively to test for public ively for the benefit of, | • | | ` ' ' ' | out the numbers of |
| 12 📙 | - | - | | • | escribed in section 5 | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | - | scribes the type of sup | | | | |
| аГ | | | | _ | supervised, or control | - | _ | • | _ |
| а <u>Г</u> | | | | • | egularly appoint or ele | - | | • , , , , | |
| | | _ | • | | Sections A and B. | ot a maje | officy Of the | c directors or trusted | 53 of the supporting |
| ьΓ | _ ~ | | | - | d or controlled in con | nection w | ith its sur | onorted organization | n(s) by having |
| ~ _ | | | - | • | anization vested in th | | | | ` ' ' |
| | | _ | | | , Sections A and C. | o came p | ,0,00,10 (1 | at control of manag | go tiro oupportou |
| с Г | | ` ' | | - | ng organization opera | ted in co | nnection | with, and functional | ly integrated with. |
| ٠ ـ | | | - | | s). You must comple | | | | ,g, |
| dГ | | _ | | • | porting organization | | | | ted organization(s) |
| | | | • | • | zation generally must | • | | | • , |
| | | | | • | mplete Part IV, Sect | • | | | |
| е Г | Check th | his box if th | e organiza | ation received a | written determination | from the | IRS that | it is a Type I, Type | II, Type III |
| _ | | | | | onally integrated supp | | | | |
| f E | nter the กเ | umber of su | ipported c | organizations . | | | | | |
| g P | Provide the | following in | nformation | n about the supp | orted organization(s) | | | | |
| (i) | Name of supp | orted organiza | ation | (ii) EIN | (iii)Type of organization | (iv) Is the | organization | (v) Amount of monetary | (vi) Amount of |
| | | | | | (described on lines 1-10 above (see instructions)) | listed in you | ur governing ment? | support (see instructions) | other support (see instructions) |
| | | | | | above (see metractions)) | | | mondonona) | mondenons) |
| | | | | | | Yes | No | | |
| (A) | | | | | | | | | |
| | | | | | | | | | |
| (B) | | | | | | | | | |
| | | | | | | | | | |
| (C) | | | | | | | | | |
| (D) | | | | | | | | | |
| | | | | | | | | | |
| (E) | | | | | | | | | |
| Total | | | | | | | | | _ |

| Secti | on A. Public Support | | | | | | |
|----------|---|-----------------|-----------------|----------------|-----------------|-----------------|-----------|
| Calen | dar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (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. | | | | | | |
| | on B. Total Support | | | 1 | | 1 | |
| | dar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (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 | | | | | | |
| 40 | is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain or | | | | | | |
| | loss from the sale of capital assets | | | | | | |
| 4.4 | (Explain in Part VI.) | | | | | | + |
| 11 | Total support. Add lines 7 through 10 | (and instruct | iona) | | | 42 | |
| 12 13 | Gross receipts from related activities, etc. First 5 years. If the Form 990 is for the o | • | | | | 12 | (01/0)/2) |
| 13 | | | | | | | |
| Socti | organization, check this box and stop her on C. Computation of Public Suppo | rt Porcontae | | | | | |
| 14 | Public support percentage for 2023 (line 6 | | | 11 column (f | 1) | 14 | <u></u> % |
| 15 | Public support percentage from 2022 Sch | | | | | 15 | |
| 16a | 33 1/3 % support test–2023. If the organi | | | | | | |
| IVa | box and stop here. The organization qua | | | | | | |
| b | 33 1/3 % support test–2022. If the organ | | | | | | |
| | check this box and stop here. The organi | | | | | | |
| 17a | 10%-facts-and-circumstances test–202 | • | | | - | | |
| ı ı a | 10% or more, and if the organization me | _ | | | | | |
| | Part VI how the organization meets the fa | | | | | | |
| | organization | | | - | | | |
| h | 10%-facts-and-circumstances test–202 | | | | | | |
| D | 15 is 10% or more, and if the organization | - | | | | | |
| | Explain in Part VI how the organization m | | | | | - | |
| | supported organization | | | | - | - | |
| 18 | Private foundation. If the organization di | | | | | | |
| | instructions | riot oriook a | SON ON INTO TO | , 10a, 10b, 17 | ۵, ۵, ۱۱۵, ۵۱۱۵ | on and box an | Id 300 |

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

(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.)

| Secti | on A. Public Support | | | | | | |
|-------|--|-----------------|------------------|-----------------|------------------|-----------------|-----------|
| Caler | idar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | | , , | , , | | | |
| | received. (Do not include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, merchandise | | | | | | |
| | sold or services 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 | | | | | | |
| J | unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the | | | | | | |
| 4 | 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 | | | | | | |
| 7a | Amounts included on lines 1, 2, and 3 | | | | | | |
| | received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 | | | | | | |
| | received from other than disqualified | | | | | | |
| | persons that exceed the greater of \$5,000 | | | | | | |
| | or 1% of the amount on line 13 for the year | | | | | | |
| С | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c from | | | | | | |
| | line 6.) | | | | | | |
| | on B. Total Support | | • | | | | |
| Caler | ndar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, | | | | | | |
| | payments received on securities loans, rents, | | | | | | |
| | royalties, and income from similar sources | | | | | | |
| b | Unrelated business taxable income (less | | | | | | |
| | section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| С | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business | | | | | | |
| | activities not included on line 10b, whether | | | | | | |
| | or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or | | | | | | |
| | loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | |
| | and 12.) | | | | | | |
| 14 | First 5 years. If the Form 990 is for the or | ganization's f | irst, second, th | ird, fourth, or | fifth tax year a | s a section 50° | (c)(3) |
| | organization, check this box and stop here | e | | | | | |
| Secti | on C. Computation of Public Suppo | rt Percentac | ae | | | | |
| 15 | Public support percentage for 2023 (lin | | | y line 13, co | lumn (f)) | . 15 | % |
| 16 | Public support percentage from 2022 | Schedule A. | Part III, line 1 | 15 | | . 16 | <u></u> % |
| | on D. Computation of Investment In | | | | | | |
| 17 | Investment income percentage for 2023 (| | | by line 13, co | lumn (f)) | . 17 | % |
| 18 | Investment income percentage from 202 | | | | | . 18 | % |
| 19a | 331/3 % support tests-2023. If the organ | | | | | more than 331 | |
| | line 17 is not more than 331/3 %, check this l | | | | | | |
| b | 331/3 % support tests-2022. If the organize | | | | | | |
| | line 18 is not more than 331/3%, check this b | | | | | | |
| 20 | Private foundation. If the organization did | | | | | | |

Part IV Supporting Organizations

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

| | Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete | Par | t V.) | |
|-------|--|-----|-------|----|
| Secti | on A. All Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing | | | |
| | documents? If "No," describe in Part VI how the supported organizations are designated. If designated by | | | |
| | class or purpose, describe the designation. If historic and continuing relationship, explain. | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status | | | |
| | under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported | | | |
| | organization was described in section 509(a)(1) or (2). | 2 | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer | | | |
| | lines 3b and 3c below. | 3a | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and | | | |
| | satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the | | | |
| | organization made the determination. | 3b | | |
| С | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) | | | |
| | purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | 3с | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If | | | |
| | "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign | | | |
| - | supported organization? If "Yes," describe in Part VI how the organization had such control and discretion | | | |
| | despite being controlled or supervised by or in connection with its supported organizations. | 4b | | |
| С | Did the organization support any foreign supported organization that does not have an IRS determination | | | |
| • | under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used | | | |
| | to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) | | | |
| | purposes. | 4c | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," | | | |
| | answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN | | | |
| | numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; | | | |
| | (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action | | | |
| | was accomplished (such as by amendment to the organizing document). | 5a | | |
| b | Type I or Type II only. Was any added or substituted supported organization part of a class already | - | | |
| - | designated in the organization's organizing document? | 5b | | |
| С | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to | - | | |
| • | anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class | | | |
| | benefited by one or more of its supported organizations, or (iii) other supporting organizations that also | | | |
| | support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in | | | |
| | Part VI. | 6 | | |
| 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> | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? | | | |
| • | If "Yes," complete Part I of Schedule L (Form 990). | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more | H | | |
| Ju | disqualified persons, as defined in section 4946 (other than foundation managers and organizations described | | | |
| | in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. | 9a | | |
| b | Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which | ۳ | | |
| , , | the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i> | 9b | | |
| С | Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit | 30 | | |
| U | from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. | 9с | | |
| 10a | Was the organization subject to the excess business holdings rules of section 4943 because of section | 1 | | |
| iva | 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated | | | |
| | supporting organizations)? If "Yes," answer line 10b below. | 10a | | |
| h | Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720. to | Iva | | |
| IJ | - Dia ino organization have any excess publicas notalitas in the tax year! 1035 obligation 0, 1 0/1/14/20, to | | | |

10b

determine whether the organization had excess business holdings.)

| Part | V Supporting Organizations (continued) | | | |
|---------------|---|------------|----------|----------------|
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? | 110 | | |
| b | A family member of a person described on line 11a above? | 11a 11b | | |
| | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI . | 11c | | |
| | on B. Type I Supporting Organizations | 1110 | | |
| | | | Yes | No |
| 1 | Did the governing body, members of the governing body, officers acting in their official capacity, or memberships of one or | | | 11.5 |
| | more supported organizations have the power to regularly appoint or elect at least a majority of the organizations'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. | | | |
| | organizations and what conditions of restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 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. | | | |
| Conti | | 2 | | |
| Section | on C. Type II Supporting Organizations | | Yes | N ₂ |
| 4 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | res | NO |
| 1 | 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 | on 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? | 1 | | |
| 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). | | | |
| • | | 2 | | |
| 3 | By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's | | | |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| | supported organizations played in this regard. | 3 | | |
| Section | on E. Type III Functionally Integrated Supporting Organizations | | <u> </u> | |
| | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in | nstruo | tions | :)_ |
| a | The organization satisfied the Activities Test. Complete line 2 below. | | | 7- |
| b | The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| С | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity. Instructions instructions. | entity | (see | |
| 2 | Activities Test. Answer lines 2a and 2b below. | | Yes | No |
| <i>-</i> а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | | 100 | 110 |
| u | the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify</i> | | | |
| | 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. | 2a | | |
| 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. | 2b | | |
| 3 | Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> | | | |
| а | 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? <i>If "Yes" or "No," provide details in Part VI.</i> | 2- | | |
| ı | • | 3a | | |
| 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 | 31- | | |

5 Income tax imposed in prior year

6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).

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|---|--------|----------------------------------|-----------------------------|
| Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O | rgar | iizations | |
| 1 Check here if the organization satisfied the Integral Part Test as a qualifying | j trus | t on Nov. 20, 1970 <i>(expla</i> | nin in Part VI). |
| See instructions. All other Type III non-functionally integrated supporting of | orgar | | |
| Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year |
| occion A - Adjusted Net Income | | | (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 | İ | |
| 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 | <u> </u> | |
| 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) |
| 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 | | |

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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