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)

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. 1645-0047

2023
Open to Public Inspection

Department of the Treasury Internal Revenue Service

A	For th	e 2023 calendar year, or tax year beginning and	ending	'					
В	Check if applicab	C Name of organization		D Employer identifi	cation number				
	Addre	BUILDING ONE COMMUNITY CORP							
	Name			27-5024317					
	initial return		Room/suite	E Telephone numbe	r				
	Final return	A17 SHIDDAN AVENUE	1100mpsuno	203-674-8585					
	termir ated			G Gross receipts \$	4,085,026.				
	Amen return	STANFORD, CT 00302		H(a) Is this a group re	eturn				
	Application	F Name and address of principal officer; Edward Farbor		for subordinates					
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	ocluded? Yes No				
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. See instructions				
	Websi			H(c) Group exemption					
92.970.00	STATEMATICATES NOTICE B	forganization: X Corporation Trust Association Other	L Year	of formation: 2011	∧ State of legal domicile: CT				
温度	art I		NO ONE OC	NAME OF STREET					
ģ	y 1	Briefly describe the organization's mission or most significant activities: BUILDII SERVICES THAT EDUCATE, EMPLOY, EMPOWER AND ENGAGE IMMIGRANTS		MMUNITY PROVIDES					
ĝ	2			U. 050/ 50 1					
Activities & Governance	3	and a second a second and a second a second and a second a second and a second and a second a second a second		1	19				
Č	4	Number of independent voting members of the governing body (Part VI, line 1b)		<u>3</u>	19				
o)	8 T	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			48				
Ţ.	6	Total number of volunteers (estimate if necessary)			445				
1	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	• • • • • • • • • • • • • • • • • • • •	7a	0.				
٨	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.				
				Prior Year	Current Year				
đ	8 8	Contributions and grants (Part VIII, line 1h)	3,255,731.	3,162,805.					
Revenue	9	Program service revenue (Part VIII, line 2g)		264,053.	126,559.				
9,0	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	16,431.	76,588.					
Ω	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		293,386.	-15,858.				
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,829,601.	3,350,094.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		20,000.	0.				
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0. 2,389,241.				
ď	3 15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)							
Frnences	2 16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
Š	<u>ا</u> ا	Total fundraising expenses (Part IX, column (D), line 25) 492,							
	111	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		769,374.	905,943.				
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,942,061.	3,295,184.				
-	<u>19</u>	Revenue less expenses. Subtract line 18 from line 12	Do.	887,540. ginning of Current Year	54,910. End of Year				
Assets or	ਹੋ ਹਵਾ 20	Total assets (Part X, line 16)	D6	4,078,725.	4,006,872.				
ASSE	21	Total liabilities (Part X, line 26)		694.946.	536,272.				
Net	22	Net assets or fund balances. Subtract line 21 from line 20		3,383,779.	3,470,600.				
	art II								
7.5110		lities of perjury, I declare that I have examined this return, including accompanying schedules	s and stateme	ints, and to the best of my	knowledge and belief, it is				
		t, and complete. Declaration of preparer (other than officer) is based on all information of wh		·					
		SUSAN ADAMSEN, TREASURER							
Sig	gn n	Signature of officer		Date					
He	re	mm h. adamse		7/2	9/2024				
,		Type or print name and title	,						
		Print/Type preparer's name Preparer's signature		Date Check	PTIN				
Pai		ALEXANDER LAZZARUOLO Alexander Lazzar	ruolo l	4/9/2024 self-employ					
	parer	Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP		Firm's EIN	13-3628255				
USE	Only	Firm's address ONE BATTERY PARK PLAZA, 7TH FL.							
		NEW YORK, NY 10004	*··*·	Phone no.212					
Ma	ıy tne II	RS discuss this return with the preparer shown above? See instructions			X Yes No				

27-5024317

Pa	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		<u> </u>
1	Briefly describe the organization's mission:		
	BUILDING ONE COMMUNITY PROVIDES SERVICES THAT EDUCATE, EMPLOY, EMPOWER AND ENGAGE IMMIGRANTS AND THE BROADER COMMUNITY.		
2	Did the organization undertake any significant program services during the year which were not listed on the	ne	
	prior Form 990 or 990-EZ?		Yes X No
	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 service	ces?	Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service	•	•
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	others, the total ex	penses, and
	revenue, if any, for each program service reported.		110 050 \
4a	(Code:) (Expenses \$1,534,367. including grants of \$) "EMPOWER" PROGRAMS: PROVIDE INDIVIDUAL AND FAMILY SUPPORT, LEGAL	(Revenue \$	118,859.
	SERVICES AND PROGRAMS FOR ISSUES THAT AFFECT THE IMMIGRANT COMMUNITY.		
	CONNECT CLIENTS WITH EXISTING LOCAL HEALTH, EDUCATIONAL AND SOCIAL		
	SERVICE PROVIDERS.		
	DENTICE THOUSENES.		
4b	(Code:) (Expenses \$ 548,623. including grants of \$)	(Revenue \$	7,700.)
	"EMPLOY" PROGRAMS: FACILITATE AN ORDERLY, SAFE AND SECURE WORKER CENTER		,
	THAT CONNECTS EMPLOYERS WITH WORKERS AND PROVIDES TRAINING TO ENHANCE		
	JOB SKILLS. THE CENTER IS AN ENVIRONMENT WHERE DAY WORKERS RECEIVE		
	ADDITIONAL SUPPORT AND HAVE ACCESS TO RECREATIONAL FACILITIES.		
4c	,,	(Revenue \$)
	"EDUCATE" PROGRAMS: OFFER ADULT ENGLISH LANGUAGE CLASSES, TAUGHT IN A		
	VARIETY OF FORMATS AND ACCOMMODATING MANY SCHEDULES.		
	Other and the Company of the Company		
4d	Other program services (Describe on Schedule O.) (Expenses \$ 118,570. including grants of \$) (Revenue \$		1
40			
40	Total program service expenses 2,708,880.		Form 990 (2023)
			1 01111 200 (2023)

27-5024317

Form 990 (2023) BUILDING ONE COMMUNITY CORP Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	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		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		х
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,	<u> </u>		
•	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? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		x
•	Schedule D, Part III	- °		
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?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
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 foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
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		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
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	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
	5			

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ı a	Officerist of nequired Scriedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			v
	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			х
04-	Schedule J	23		
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	040		х
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	240		
4	Did the constitution of the first fi	24c 24d		
		240		
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	250		х
L	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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	OEL		х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		
26				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		х
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	20		
21	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L. Part III	27		х
20	, , ,	21		
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? <i>If</i>			
а		28a		х
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? F F F F F F F F F	200		
·	"Yes," complete Schedule L, Part IV	28c		х
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	25		
30	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	ان ا		
U.	Schedule N. Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	55		
٠.	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1000		
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	555		
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
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 O	38	х	
Pa	t 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	<u></u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 49			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

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Form	990 (2023) BUILDING ONE COMMUNITY CORP 27-502	431	7	Р	age 5
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	48			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	[2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	[3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		Х
b	If "Yes," enter the name of the foreign country	_			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	[5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit				
	any contributions that were not tax deductible as charitable contributions?	[6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				
	were not tax deductible?	[6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the pay	or?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required				
	to file Form 8282?		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0	?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	_			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	\dashv			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	_			
С	Enter the amount of reserves on hand				
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				

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excess parachute payment(s) during the year?

that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

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

If "Yes," see the instructions and file Form 4720, Schedule N.

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

If "Yes," complete Form 6069.

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 19 **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. 19 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 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? 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 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 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 X 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure 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 X Own website Another's website X Upon request Other (explain on Schedule O) 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.

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

06902

ANKA BADURINA, EXECUTIVE DIRECTOR - 203-674-8585

417 SHIPPAN AVENUE, STAMFORD, CT

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week	box	not c , unle: cer ar	ss per	ition more rson i	than o	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) ANKA BADURINA	40.00	1								
EXECUTIVE DIRECTOR				Х				129,211.	0.	1,344.
(2) JOSE LUIS ZEPEDA	2.00	1								
CHAIRMAN		Х		Х				0.	0.	0.
(3) MARY SOMMER	2.00									
VICE-CHAIRMAN		Х		Х				0.	0.	0.
(4) EDWARD PARDOE	2.00	1								
TREASURER		Х		Х				0.	0.	0.
(5) ELEANOR RIEMER	2.00	1								
SECRETARY		Х		Х				0.	0.	0.
(6) SUSAN ADAMSEN	2.00									
DIRECTOR		Х						0.	0.	0.
(7) SONIA ALCANTARILLA	2.00									
DIRECTOR		Х						0.	0.	0.
(8) ALDO CABRERA	2.00									
DIRECTOR		Х						0.	0.	0.
(9) ADHLERE COFFY	2.00									
DIRECTOR		Х						0.	0.	0.
(10) DAVID COHEN	2.00									
DIRECTOR		Х						0.	0.	0.
(11) PATRICK DE SAINT-AIGNAN	2.00									
DIRECTOR		Х						0.	0.	0.
(12) TALAY HAFIZ	2.00									
DIRECTOR		Х						0.	0.	0.
(13) BELLE HORWITZ	2.00									
DIRECTOR		Х						0.	0.	0.
(14) LAURA JORDAN	2.00									
DIRECTOR		Х						0.	0.	0.
(15) BRUCE KOE	2.00									
DIRECTOR		Х						0.	0.	0.
(16) TAMU LUCERO	2.00]								
DIRECTOR		Х						0.	0.	0.
(17) ARISLEYDA RIEHL	2.00]								
DIRECTOR		Х						0.	0.	0.

332007 12-21-23 Form **990** (2023)

19 ALEKSANDR TROYB 2.00	Part VII Section A. Officers, Directors,	Trustees, Key Emp	oloy	ees,	and	Ηiς	ghes	t C	ompensated Employee	s (continued)				
The state of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the compensation of the compensation from the organization of the compensation of the compensation of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the compensation from the organization of the compensation of the	(A)	1 ' '			•	•			(D)	(E)			(F)	
Complete of completes to Part VII, Section A 2.0	Name and title	1 -	(do					ne	· ·	•				
Compensation Comp									1	•	า			of
Note														tion
119 Subtotal 129 ELER WILLIAMS 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1 '	direc				- - - -			U				
119 Subtotal 129 ELER WILLIAMS 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		related	tee or	ustee			ensate		(W-2/1099-MISC/	1099-NEC)		orga	anizat	ion
119 Subtotal 129 ELER WILLIAMS 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1 "	al trus	nal tr		loyee	comp		1099-NEC)					
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DIRECTOR X 0 0 0 0 0	(18) ANDREW SCHAU		느	드	10	- A	포늄	요						
The Subtotal 129,211			х						0.		0.			0.
DIRECTOR X 0, 0, 0, 0	(19) ALEKSANDR TROYB	2.00												
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Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No									129,211.		0.		1,	
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Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address NONE Description of services Compensation	, .	•				•			•			5		Х
the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address NONE (B) Compensation Compensation		•												
(A) Name and business address NONE (B) Description of services Compensation	1 Complete this table for your five higher	est compensated inc	lepe	nder	nt co	ontra	actor	s th	nat received more than \$	100,000 of comp	ensa	tion fro	m	
Name and business address NONE Description of services Compensation			ear e	ndir	ng w	ith c	or wi	thin		ear.				
			MO.	NE					• •	ervices	C	(C comper) Isatio	n
2 Total number of independent contractors (including but not limited to those listed above) who received more than	Traine and but		INO.	ME				\dashv	Decemplion of s	OI VIOCO		ompor	ioutio	<u> </u>
2 Total number of independent contractors (including but not limited to those listed above) who received more than														
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2 Total number of independent contractors (including but not limited to those listed above) who received more than								\dashv						
2 Total number of independent contractors (including but not limited to those listed above) who received more than														
	2 Total number of independent contract	ors (including but n	ot lin	niter	to t	thos	se lis	ted	above) who received mo	ore than				

27-5024317

Form 990 (2023) BUILDING OF Part VIII Statement of Revenue

			Check if Schedule O c	onts	aine a r	esnonse	or note to any lin	e in this Part VIII			
			Offeck if Schedule O C	OTILE	ا الله الله	СЗРОПЗС	or note to any iin	(A)	(B)	(C)	(D)
								Total revenue	Related or exempt	Unrelated	Revenue excluded
									function revenue	business revenue	from tax under sections 512 - 514
П											SECTIONS 212 - 214
nts	1					1a					
iz in		b	Membership dues			1b					
S, G		С	Fundraising events			1c	403,396.				
ξ k		d	Related organizations			1d					
s, C		е	Government grants (contri	butio	ons)	1e					
Sign		f	All other contributions, gifts,	grant	s, and						
Contributions, Gifts, Grants and Other Similar Amounts			similar amounts not included			1f	2,759,409.				
ΞĒ		g	Noncash contributions included in I			1g \$	95,747.				
Sign		-	Total. Add lines 1a-1f		·	<u> </u>		3,162,805.			
<u> </u>							Business Code				
	9	2 a	PARTNERSHIPS/PROGRAI	MS			900099	126,559.	126,559.		
Ş	-	b									
er ue											
m S		C									
gra Be		d									
Program Service Revenue		e	All alls and								
4			All other program service					106 550			
	_		Total. Add lines 2a-2f					126,559.			
	3	3	Investment income (includ					06 245			06.245
								86,347.			86,347.
	4	1	Income from investment o	f tax	-exem	pt bond p	roceeds				
	5	5	Royalties								
					(i)	Real	(ii) Personal				
	6	3 a	Gross rents	6a							
		b	Less: rental expenses	6b							
		С	Rental income or (loss)	6с							
		d	Net rental income or (loss)								
	7	7 a	Gross amount from sales of		(i) Se	ecurities	(ii) Other				
			assets other than inventory	7a	6	63,594.					
		b	Less: cost or other basis								
ē			and sales expenses	7b	6	73,353.					
en		С	Gain or (loss)	7c		-9,759.					
Revenue								-9,759.			-9,759.
her	8		Gross income from fundraisir								
g					396.						
			contributions reported on	line	1c). Se	ee					
			Part IV, line 18				45,721.				
		b									
		С	Net income or (loss) from t					-15,858.			-15,858.
	g		Gross income from gamin		_						
			Part IV, line 19								
		b	Less: direct expenses								
			Net income or (loss) from								
	10		Gross sales of inventory, le								
			and allowances				1				
		b	Less: cost of goods sold								
			Net income or (loss) from s								
							Business Code				
Miscellaneous Revenue	11	1 a									
ane		b									
elle		С									
lisc		d	All other revenue								
2			Total. Add lines 11a-11d								
	12		Total revenue. See instructio					3,350,094.	126,559.	0.	60,730.

332009 12-21-23

Form 990 (2023) BUILDING ONE COMMUNITY CORP Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must c	complete column (A).
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	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
	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	130,555.	108,527.	1,151.	20,87
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,933,504.	1,607,279.	17,041.	309,184
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	7,977.	6,631.	70.	1,276
9	Other employee benefits	151,258.	125,737.	1,334.	24,18
0	Payroll taxes	165,947.	137,948.	1,463.	26,536
1	Fees for services (nonemployees):				
а	Management				
b	Legal				
C.	Accounting	38,475.		38,475.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	281,159.	219,888.	24,006.	37,265
2	Advertising and promotion	24,943.	23,944.	374.	625
3	Office expenses	72,705.	68,426.	764.	3,515
4	Information technology				
5	Royalties				
6	Occupancy	218,571.	200,787.	6,831.	10,953
7	Travel				
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
:0	Interest				
21	Payments to affiliates				
	Depreciation, depletion, and amortization	69,306.	66,534.	1,040.	1,732
3	Insurance	41,059.	35,967.	1,713.	3,379
	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	PROGRAM SUPPLIES	121,025.	107,212.		13,813
b	DEVELOPMENT	38,700.			38,700
С					
d					
e .	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	3,295,184.	2,708,880.	94,262.	492,042
:6	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)				

Form 990 (2023) Part X Balance Sheet

Par	. /\	Check if Schedule O contains a response or	note to an	y line in this Part X			
		, 2002			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			197,382.	1	224,540.
	2	Savings and temporary cash investments			1,096,165.	2	325,517.
	3	Pledges and grants receivable, net	480,295.	3	498,000.		
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su	ubstantial c	contributor, or 35%			
		controlled entity or family member of any of		5			
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons descri	bed in sec	tion 4958(c)(3)(B)		6	
ဖွ	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
۲ ۲	9	Prepaid expenses and deferred charges	3,755.	9	16,154.		
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D	10a	318,766.			
	b	Less: accumulated depreciation	10b	115,006.	59,830.	10c	203,760.
	11	Investments - publicly traded securities			964,996.	11	1,603,822.
	12	Investments - other securities. See Part IV, lin	ne 11		702,982.	12	707,362.
	13	Investments - program-related. See Part IV, li		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	573,320.	15	427,717.		
	16	Total assets. Add lines 1 through 15 (must e	equal line 3	33)	4,078,725.	16	4,006,872.
	17	Accounts payable and accrued expenses	92,249.	17	75,035.		
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple	ete Part IV	of Schedule D		21	
န္	22	Loans and other payables to any current or f	ormer offic	er, director,			
≝∣		trustee, key employee, creator or founder, su	ubstantial c	contributor, or 35%			
Liabilities		controlled entity or family member of any of		22			
-	23	Secured mortgages and notes payable to un		23			
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax					
		parties, and other liabilities not included on li	ines 17-24)	. Complete Part X			
		of Schedule D		·····	602,697.		461,237.
_	26	Total liabilities. Add lines 17 through 25			694,946.	26	536,272.
ر س		Organizations that follow FASB ASC 958,	check her	e X			
Š		and complete lines 27, 28, 32, and 33.			0.200.412		0 505 501
alar 	27	Net assets without donor restrictions	2,369,413.	27	2,705,781.		
Ä	28	Net assets with donor restrictions	1,014,366.	28	764,819.		
<u> </u>		Organizations that do not follow FASB AS	C 958, che	eck here			
느		and complete lines 29 through 33.	_				
ţş (29	Capital stock or trust principal, or current fur				29	
SSe	30	Paid-in or capital surplus, or land, building, o				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			2 202 770	31	2 470 600
ž	32	Total net assets or fund balances			3,383,779.	32	3,470,600.
	33	Total liabilities and net assets/fund balances			4,078,725.	33	4,006,872.

27-5024317

Pa	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	3	,350,	094.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	,295,	184.	
3						
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3	,383,	779.	
5	Net unrealized gains (losses) on investments	5		31,	911.	
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	3	,470,	600.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule () .				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed or	n 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?		2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	oasis,				
	consolidated basis, or both:					
	X 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?		2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain on Scher	dule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	d audit			1	
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			
			Form	990	(2023)	

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

QUZ3
Open to Public Inspection

Name of the organization **Employer identification number** BUILDING ONE COMMUNITY CORP 27-5024317 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,920,456.	3,376,980.	2,316,847.	3,255,731.	2,795,064.	13,665,078.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1,920,456.	3,376,980.	2,316,847.	3,255,731.	2,795,064.	13,665,078.
	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)						4,231,608.
6	Public support. Subtract line 5 from line 4.						9,433,470.
	etion B. Total Support						3,433,470.
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	1,920,456.	3,376,980.	2,316,847.	3,255,731.	2,795,064.	13,665,078.
	Gross income from interest,	2,520,100.	0,0,0,200.	2,020,027.	0,200,702.	2,750,002.	20,000,000
0	· ·						
	dividends, payments received on						
	securities loans, rents, royalties,	9,549.	14 014	9,438.	20 246	06 247	140 204
_	and income from similar sources	9,549.	14,814.	9,430.	20,246.	86,347.	140,394.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)			2,919.	2,980.		5,899.
	Total support. Add lines 7 through 10						13,811,371.
	Gross receipts from related activities,	<u>.</u>				12	1,530,384.
13	First 5 years. If the Form 990 is for the	J	st, second, third, fo	ourth, or fifth tax ye	ear as a section 5	01(c)(3)	
0-	organization, check this box and stop						
	ction C. Computation of Publi						60.20
	Public support percentage for 2023 (li	, ,,,	•	***		14	68.30 %
	Public support percentage from 2022					15	68.68 %
16a	33 1/3% support test - 2023. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the o	•		•		•	
	and stop here. The organization quali	ifies as a publicly s	upported organizat	tion			
17a	10% -facts-and-circumstances test	- 2023. If the orga	anization did not ch	neck a box on line	13, 16a, or 16b, a	and line 14 is 10% o	or more,
	and if the organization meets the facts			=		VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatior	n qualifies as a pub	olicly supported org	ganization		
b	10% -facts-and-circumstances test	- 2022. If the orga	anization did not ch	neck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets th	e facts-and-circum	stances test, chec	k this box and sto	p here. Explain in	n Part VI how the	
	organization meets the facts-and-circu	ımstances test. The	e organization qual	ifies as a publicly s	supported organiz	ation	
18	Private foundation. If the organizatio	n did not check a b	oox on line 13, 16a	, 16b, 17a, or 17b,	check this box ar	nd see instructions	
						Schedule A	Form 990) 2023

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

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

Section A. Public Suppor		ow, picase comp	· · · · · · · · · · · · · · · · · · ·				
Calendar year (or fiscal year beginr	ning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
Gifts, grants, contributions, membership fees received. include any "unusual grants"	and (Do not						
2 Gross receipts from admiss merchandise sold or service formed, or facilities furnishe any activity that is related to organization's tax-exempt p	sions, es per- ed in o the						
3 Gross receipts from activities are not an unrelated trade conness under section 513	- 1						
4 Tax revenues levied for the ization's benefit and either or expended on its behalf	·						
5 The value of services or factorinished by a governmentathe organization without ch	al unit to						
6 Total. Add lines 1 through	5						
7a Amounts included on lines 3 received from disqualified	′′′						
b Amounts included on lines 2 and 3 re from other than disqualified persons exceed the greater of \$5,000 or 1% or amount on line 13 for the year	that f the						
c Add lines 7a and 7b							
8 Public support. (Subtract line 7ct Section B. Total Support							
Calendar year (or fiscal year beginn		(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	· ' /	(a) 2019	(6) 2020	(6) 2021	(4) 2022	(6) 2020	(i) iotai
10a Gross income from interest dividends, payments receiv securities loans, rents, roya and income from similar so	ed on Ities,						
b Unrelated business taxable inco	ome						
c Add lines 10a and 10b	business ne 10b,						
regularly carried on 12 Other income. Do not incluour loss from the sale of cap assets (Explain in Part VI.)	ital						
13 Total support. (Add lines 9, 10c, 1	11, and 12.)						
14 First 5 years. If the Form 9	90 is for the	organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizatio	on,
check this box and stop he		SUBBORT DOR					
Section C. Computation						1 1	
Section C. Computation 15 Public support percentage	for 2023 (line	e 8, column (f), d	livided by line 13,	column (f))		15	
Section C. Computation 15 Public support percentage 16 Public support percentage	for 2023 (line from 2022 S	e 8, column (f), d chedule A, Part	livided by line 13, o	column (f))		15 16	
Section C. Computation 15 Public support percentage 16 Public support percentage Section D. Computation	for 2023 (line from 2022 S of Invest i	e 8, column (f), d chedule A, Part nent Income	livided by line 13, on the line 15 in the line 15 i			16	
Section C. Computation 15 Public support percentage 16 Public support percentage Section D. Computation 17 Investment income percent	for 2023 (line from 2022 S of Invest r age for 202 3	e 8, column (f), d chedule A, Part ment Income 3 (line 10c, colur	livided by line 13, on the livided by line 15	ine 13, column (f))		16	%
Section C. Computation 15 Public support percentage 16 Public support percentage Section D. Computation 17 Investment income percent 18 Investment income percent	for 2023 (line from 2022 S of Investi age for 2023 age from 20	e 8, column (f), d chedule A, Part ment Income 3 (line 10c, colur 22 Schedule A,	livided by line 13, of lil, line 15	ine 13, column (f))		16 17 18	% % %
Section C. Computation 15 Public support percentage 16 Public support percentage Section D. Computation 17 Investment income percent 18 Investment income percent 19a 33 1/3% support tests - 20	for 2023 (line from 2022 S of Investr age for 2023 age from 20 023. If the o	e 8, column (f), d chedule A, Part ment Income 3 (line 10c, colur 22 Schedule A, rganization did n	livided by line 13, of lill, line 15 Percentage mn (f), divided by line 17 Part III, line 17 not check the box	ine 13, column (f)) on line 14, and line	e 15 is more than	16 17 18 33 1/3%, and line 17	% % % %
Section C. Computation 15 Public support percentage 16 Public support percentage 17 Section D. Computation 18 Investment income percent 19 33 1/3% support tests - 20 19 more than 33 1/3%, check	for 2023 (line from 2022 S of Investrage for 2023 age from 2023. If the othis box and	e 8, column (f), d chedule A, Part ment Income 3 (line 10c, colur 22 Schedule A, rganization did n stop here. The	livided by line 13, of lill, line 15 Percentage mn (f), divided by line 17 Part III, line 17 not check the box organization quali	ine 13, column (f)) on line 14, and line ifies as a publicly s	e 15 is more than supported organiz	16	% % % 7 is not
Section C. Computation 15 Public support percentage 16 Public support percentage Section D. Computation 17 Investment income percent 18 Investment income percent 19a 33 1/3% support tests - 20	for 2023 (line from 2022 S of Investrage for 2023 age from 2023. If the othis box and 022. If the o	e 8, column (f), d chedule A, Part ment Income 3 (line 10c, colur 22 Schedule A, rganization did n stop here. The rganization did n	livided by line 13, or lill, line 15 e Percentage mn (f), divided by line 17 mot check the box organization qualitation check a box or	ine 13, column (f)) on line 14, and line ifies as a publicly s	e 15 is more than 3 supported organiza a, and line 16 is m	16 17 18 33 1/3%, and line 17 ation	% % % 7 is not

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Schedule A (Form 990) 2023

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	За		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	35		
	9с		
	10a		
	10b		
ule	A (Forn	n 990)	2023

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Schedule A (Form 99

Pa	TIV 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?	11a		
	A family member of a person described on line 11a above?	11b		
С	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		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion 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		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
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 (see in	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	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. Answer lines 3a and 3b below.			
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? If "Yes" or "No" provide details in Part VI.	3a		
b				
_	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgai	nizations				
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.						
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
_3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
_5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
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					
е	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					
Sect	ion C - Distributable Amount			Current Year			
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
_3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
_4	Enter greater of line 2 or line 3.	4					
_5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functional	ılly integrat	ed Type III supporting orga	ınization (see			
	instructions)						

Schedule A (Form 990) 2023

Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Secti	on D - Distributions		·		Current Year			
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1				
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported						
	organizations, in excess of income from activity			2				
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	s	3				
4	Amounts paid to acquire exempt-use assets			4				
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5				
6	Other distributions (describe in Part VI). See instructions.			6				
7	Total annual distributions. Add lines 1 through 6.			7				
8	Distributions to attentive supported organizations to which the	ne organization is responsive						
	(provide details in Part VI). See instructions.			8				
9	Distributable amount for 2023 from Section C, line 6			9				
10	Line 8 amount divided by line 9 amount			10				
		(i)	(ii)		(iii)			
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2023	•	Distributable Amount for 2023			
1	Distributable amount for 2023 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2023 (reason-							
	able cause required - explain in Part VI). See instructions.							
3	Excess distributions carryover, if any, to 2023							
<u>a</u>	From 2018							
b	From 2019							
c	From 2020							
d	From 2021							
е	From 2022							
f	Total of lines 3a through 3e							
<u>g</u>	Applied to underdistributions of prior years							
<u>h</u>	Applied to 2023 distributable amount							
<u>_i</u>	Carryover from 2018 not applied (see instructions)							
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2023 from Section D,							
	line 7: \$							
a	Applied to underdistributions of prior years							
b	Applied to 2023 distributable amount							
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2023, if							
	any. Subtract lines 3g and 4a from line 2. For result greater							
	than zero, explain in Part VI. See instructions.							
6	Remaining underdistributions for 2023. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2024. Add lines 3j							
	and 4c.							
8	Breakdown of line 7:							
	Excess from 2019							
	Excess from 2020							
	Excess from 2021							
	Excess from 2022							
<u>e</u>	Excess from 2023							

Schedule A (Form 990) 2023

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Inspection

Name of the organization

BUILDING ONE COMMUNITY CORP

Employer identification number

27-5024317

Par			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6. (a) Donor advised funds	(b) Funds and other accounts
	Takel groups as an all of consu	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2 3	Aggregate value of contributions to (during year) Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	ed funds
J	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
•	for charitable purposes and not for the benefit of the donor o		
Par			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	tion or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		
	Number of conservation easements on a certified historic stru	***************************************	2c
d	Number of conservation easements included on line 2c acqu		
•	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	e organization during the tax
4	year Number of states where property subject to conservation eas	coment is located	
5	Does the organization have a written policy regarding the per		
Ŭ	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
			,
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the footn	note to the organization's financial statem	ents that describes the
Dos	organization's accounting for conservation easements.	i Aut Historical Tracquires or Of	ibar Cimilar Assats
Par	t III Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" on Form		and bedeater the above to
па	If the organization elected, as permitted under FASB ASC 95	•	
	of art, historical treasures, or other similar assets held for pub	, ,	'
h	service, provide in Part XIII the text of the footnote to its finar If the organization elected, as permitted under FASB ASC 95		
D	art, historical treasures, or other similar assets held for public	·	
	provide the following amounts relating to these items.	exhibition, education, or research in furti	lerance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1		\$
			•
2	If the organization received or held works of art, historical trea		
_	the following amounts required to be reported under FASB A		J , F
а	Revenue included on Form 990, Part VIII, line 1	· ·	\$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2023

Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tre	asures, or Oth	er Si	milar Asse	ets _{(co}	ntinue	ed)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the f	ollowing that make	signifi	icant use of it	s		
	collection items (check all that apply).								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	n how they further th	e organization's ex	empt p	purpose in Pa	art XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	sures, or other simil	ar ass	ets			
	to be sold to raise funds rather than to be ma						Ye		No No
Par	t IV Escrow and Custodial Arrang	gements Comple	te if the organizatior	answered "Yes" o	n Forn	n 990, Part IV	, line 9,	or	
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodi	an, or other intermed	liary for contribution	s or other assets no	ot inclu	uded			
	on Form 990, Part X?					[Ye	S	No
b	If "Yes," explain the arrangement in Part XIII				_				
							Amo	ount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance				L	1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or cu	istodial account liab	oility?		Ye	s	No
	If "Yes," explain the arrangement in Part XIII.								
Pai	t V Endowment Funds Complete if	the organization and							
		(a) Current year	(b) Prior year	(c) Two years back		Three years ba			
1a	Beginning of year balance	1,914,366.	1,101,439.	1,038,336		349,60	_		46,659.
b	Contributions	1,874,151.	2,054,261.	1,080,977	•	1,501,96	0.	32	25,064.
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	1,823,698.	1,241,334.	1,017,874		813,22	4.	32	22,123.
f	Administrative expenses						_		
g	End of year balance		1,914,366.		•	1,038,33	6.	34	<u>49,600.</u>
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a)) held as:					
а	Board designated or quasi-endowment	61.0740	_%						
b	Permanent endowment	%							
С	Term endowment38.9260	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	nd administered for	the			_	
	organization by:							Y	es No
	(i) Unrelated organizations?						3a	(i)	X
								(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza						<u>3</u>	b	
4	Describe in Part XIII the intended uses of the		wment funds.						
Pai	t VI Land, Buildings, and Equipm		. D. I. N. II. 44 0	5 000 B 11		40			
	Complete if the organization answered		· · · · · · · · · · · · · · · · · · ·	Í		Т			
	Description of property	(a) Cost or o	` ,	' '		mulated	(d) E	Book v	alue /
		basis (investr	nent) basis	(other) c	deprec	ciation			
	Land								
	Buildings			315 133		111 100		_	
	Leasehold improvements			315,182.		111,422.		20	03,760.
	Equipment			3,584.		3,584.			0.
	Other								12 760
Tota	. Add lines 1a through 1e. (Column (d) must e	<u>qual Form 990, Part</u>	X, line 10c, column	<i>(B))</i>			:		03,760.
						School	IIIA I) (F	nrm 0	90) 2023

Schedule D (Form 990) 2023 BUILDING ONE COM	MUNITY CORP	2.	7-5024317	Page 3
Part VII Investments - Other Securities				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market	value
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A) FIXED INCOME - ETF'S	707,362.	END-OF-YEAR MARKET VALUE		
(B)	·			
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	707,362.			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.	707,302.			
Complete if the organization answered "Yes"	on Form 900 Part IV line	11c See Form 990 Part V line 13		
(a) Description of investment	(b) Book value		d of year market	- volue
·	(b) Book value	(c) Method of valuation: Cost or end	a-or-year market	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))				
Part IX Other Assets				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.		
(a)	Description		(b) Book	value
(1) SECURITY DEPOSITS				22,189.
(2) ROU ASSET OPERATING LEASES				405,528.
(3)				-
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	/_ (D)\			427,717.
Total. (Column (b) must equal Form 990, Part X, line 15, co Part X Other Liabilities	<u>I. (Б)) </u>			127,717.
Complete if the organization answered "Yes"	on Form 900 Part IV line	11e or 11f See Form 990 Part V line 25		
(a) Description of liability	orr orr 550, r art rv, line	110 01 111. Occ 1 0111 330, 1 art X, iiiic 23	(b) Book	valuo
			(b) DOOK	value
(1) Federal income taxes				461 227
(2) OPERATING LEASE LIABILITIES				461,237.
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

461, 2

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

Schedule D (Form 990) 2023

461,237.

Par	t XI Reconciliation of Revenue per Audited Financial Stat		evenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, lin				3,401,078.
1				1	3,401,078.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ما	31,911.		
a	Net unrealized gains (losses) on investments		19,073.	-	
b	Donated services and use of facilities		15,075.	-	
C C	Recoveries of prior year grants Other (Describe in Part VIII.)			-	
d	Other (Describe in Part XIII.) Add lines 2a through 2d			20	50,984.
е 3				2e 3	3,350,094.
4	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				-,,
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				
	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,350,094.
	t XII Reconciliation of Expenses per Audited Financial Sta	tements With E	xpenses per F		, , -
	Complete if the organization answered "Yes" on Form 990, Part IV, lin				
1	Total expenses and losses per audited financial statements			1	3,314,257.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				, ,
– a	Donated services and use of facilities	2a	19,073.		
b	Prior year adjustments		·	1	
C	Other losses			1	
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d	•		2e	19,073.
3	Subtract line 2e from line 1			3	3,295,184.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	3.)		5	3,295,184.
Pai	t XIII Supplemental Information				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b an	d 2b; Part V, line 4	; Part X, lir	ne 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	y additional informa	tion.		
PART	V, LINE 4:				
NET	ASSETS WITHOUT DONOR RESTRICTIONS ARE NOT SUBJECT TO DONO	R-IMPOSED			
REST	RICTIONS AND ARE AVAILABLE FOR OPERATIONS AND BOARD-DESIG	NATED			
PURP	OSES.				
	DOLDE OF DIDEGRADS IDODERE I DOLLGO TO TOTALLICE IND WITH				
THE	BOARD OF DIRECTORS ADOPTED A POLICY TO ESTABLISH AND MAIN	TAIN A FUNDED			
DO 3 D	D DEGLOVAMED ODERATING DEGERNE / MAR "ODERATING DEGERNE"	3			
BOAR	D DESIGNATED OPERATING RESERVE (THE "OPERATING RESERVE")	AT A LEVEL			
חחד א	MILLE MO ANNUAL DECORAM BUNDING AND MUE GOOMS OF ODERAMING	AND			
RELA	TIVE TO ANNUAL PROGRAM FUNDING AND THE COSTS OF OPERATING	AND			
MATN	MAINING MUD ODGANIZAMION MUD GOAL OF MUD ODDDAMING DECED	WE IC MO			
MAIN	TAINING THE ORGANIZATION. THE GOAL OF THE OPERATING RESER	VE 15 TO			
дсит	EVE AND MAINTAIN BETWEEN THREE AND SIX MONTHS OF OPERATIN	С ЕХЬЕМСЕС			
ACUI	BYD AND MAINIAIN DEIWEEN THREE AND SIA MONIES OF OPERATIN	G EAFENSES.			
AT D	ECEMBER 31, 2023 AND DECEMBER 31, 2022, THE OPERATING RES	ERVE TOTALED			
\$1 2	00.000 AND \$900.000 RESPECTIVELY.				

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization BUILDING O	NE COMMUNITY CORP					Employer ide 27-502431	ntification number
	- Complete if the organization answe	ered "Y	'es" or	n Form 990, Part IV, I	ine 1		
Indicate whether the organization rais a	sed funds through any of the following sed funds through any of the following Solicitates for oral agreement with any individual part VII) or entity in connection with providuals or entities (fundraisers) pursursursursursursursursursursursursursu	tion of tion of fundra (includ	non-g gover aising ding of onal fo	overnment grants nment grants events fficers, directors, trus undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser) (ii) Activity		have o	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No				
Total	1	1	<u> </u>				
Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit o			or has been notified	it is e	exempt from re	I gistration
or incertaing.							
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule G (Form 990) 2023							

Pa	ırt I	Fundraising Events. Complete if the of fundraising event contributions and groups are the contributions.				
		or furidraising event contributions and gre	(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
e			BREAKFAST 2023	FALL COLLOQUIUM		col. (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	361,035.	88,082.		449,117.
	2	Less: Contributions	333,135.	70,261.		403,396.
	3	Gross income (line 1 minus line 2)	27,900.	17,821.		45,721.
	4	Cash prizes				
ø		Noncash prizes				
sued	6	Rent/facility costs	10,893.	1,432.		12,325.
Direct Expenses	7	Food and beverages	32,850.	9,264.		42,114.
_		Entertainment				
	9	Other direct expenses	4,378.	2,762.		7,140.
	10	Direct expense summary. Add lines 4 through	. ,			61,579.
Pa	ırt I	Net income summary. Subtract line 10 from li Gaming. Complete if the organization a		000 Part IV line 10 or		-15,858.
		\$15,000 on Form 990-EZ, line 6a.	answered res on Form	1 990, Fait IV, line 19, 01 1	reported more than	
une		,	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue				
ç	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
_	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	ı 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
a	ls t	ter the state(s) in which the organization condu he organization licensed to conduct gaming ac No," explain:	tivities in each of these	states?		Yes No
		ere any of the organization's gaming licenses re Yes," explain:				Yes No
2200		L12_93			Caha	dule G (Form 990) 2023

Scne	edule G (Form 990) 2023 BUILDING ONE COMMUNITY CORP 2	7-5024317	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility	13a	%
	An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
	If IIVes II and and the assessment of assessment and building and the assessment of		
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
_	of gaming revenue retained by the third party \$ If "Yes," enter name and address of the third party:		
C	if res, entername and address of the third party.		
	Nama		
	Name		
	Address		
	Addiess		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	L Yes	└─ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year \$		
Pa	Tt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part III, lines 9	, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		

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Schedule 0	G (Form 990) BUILDING ONE COMMUNITY CORP	27-5024317	Page 4
Part IV	G (Form 990) BUILDING ONE COMMUNITY CORP Supplemental Information (continued)		
	(continued)		

SCHEDULE M (Form 990)

Noncash Contributions

27-5024317

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Employer identification number BUILDING ONE COMMUNITY CORP

Types of Property Part I (a) (b) (c) (d) Number of Noncash contribution Check if Method of determining contributions or amounts reported on applicable noncash contribution amounts Form 990, Part VIII, line 1g items contributed Art - Works of art Art - Historical treasures 2 Art - Fractional interests 3 Books and publications 4 Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded 42,540.FMV 10 Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 15 Real estate - Residential Real estate - Commercial 16 17 Real estate - Other 18 Collectibles Food inventory 19 Drugs and medical supplies 20 Taxidermy 21 Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 (DONATED GOODS 141 53,207.FMV 25 Other Other 26 27 Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions _____29 for which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? Х 30a **b** If "Yes," describe the arrangement in Part II. Х Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33 describe in Part II

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

Schedule M (Form 990) 2023

332142 09-11-23 Schedule M (Form 990) 2023

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

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

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

BUILDING ONE COMMUNITY CORP	27-5024317			
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:				
"ENGAGE" PROGRAMS: ENGAGE THE BROADER COMMUNITY.				
EXPENSES \$ 118,570. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.				
FORM 990, PART VI, SECTION B, LINE 11B:				
A DRAFT 990 IS ISSUED TO THE BOARD OF DIRECTORS FOR REVIEW BEFORE FILING OF				
RETURN.				
FORM 990, PART VI, SECTION B, LINE 12C:				
THE GOVERNANCE COMMITTEE AND MANAGEMENT REVIEWS AND MONITORS.				
FORM 990, PART VI, SECTION B, LINE 15:				
EVALUATION AND COMPENSATION OF THE EXECUTIVE DIRECTOR IS MANAGED BY THE				
EXECUTIVE COMMITTEE OF THE BOARD WITH INPUT FROM OTHER BOARD MEMBERS				
FORM 990, PART VI, SECTION C, LINE 19:				
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST				
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.				

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

Schedule O (Form 990) 2023

Forms included in Electronic Filing

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