Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A F	or the	2023 calend	ar year, or ta					, 2023, a	nd endi	ng		, 20
В	Check if a	applicable:	C Name of orga	anization Z	Addi's F	aith Four	ndatio	on				identification number
	ddress c	change	Doing busine	ess as							26-0	542314
	lame cha	ange	Number and	street (or P.O. box	x if mail is not delive	red to street address)			Room/sui	e	E Telephon	e number
I	nitial retu	ırn	2410 R	iverway	y Oak Dr	ive					(281)910-5937
=	inal retur	rn/terminated		state or province, od, TX	country, and ZIP or 77345	foreign postal code					G Gross red	eipts 45,141.
=		n pending		ddress of principal						H(a) Isthisa	roup return for s	
		1	Amber			2410 Riverway Oa	k Dr Kingw	wood, TX 773	345		subordinates ir	
1 1	ax-exem	npt status:	501(c)(3)	501(c) () (insert no.)	4947(a)(1) or	527	7				ee instructions
J V	Vebsite:			thfound	dation.c	rg				H(c) Group e	exemption num	ber
K F	orm of o	rganization:	Corporation	Trust Ass	ociation Othe	r	L	Year of formation	on: 200	· · · ·	State of legal d	
Pa		Summary										
	1			ization's miss	ion or most sign	nificant activities:						
						pediatrio	bra	in tur	or c	ancer	s and	to help
ce		provid	de assi	stance	to fami	lies with	n a cl	hild w	7ith	cance	r.	
nan												
ver	2	Check this b	ox if the o	organization o	discontinued its	operations or disp	osed of m	ore than 25	5% of its	net assets		
Activities & Governance	3	Number of vo	oting membe	rs of the gove	rning body (Pa	rt VI, line 1a) .					3	8
حة س	4	Number of in	ndependent v	oting membe	rs of the govern	ing body (Part VI,	line 1b)				4	7
itie	5			-	_	2023 (Part V, line					5	7
₹	6	Total numbe	r of volunteer	s (estimate if	necessary) .						6	35
ĕ	7a	Total unrelate	ed business i	revenue from	Part VIII, colum	ın (C), line 12 .					7a	0.
	b	Net unrelated	d business ta	xable income	from Form 990	-T, Part I, line 11					7b	0.
										Prior Year		Current Year
	8	Contributions	s and grants ((Part VIII, line	1h)					851,8	74.	843,874.
<u>o</u>	9		_									
Revenue	10	-				d 7d)						1,267.
	11					c, 10c, and 11e)						
_	12					rt VIII, column (A),				851,8	74.	845,141.
	13					lines 1-3)						
	14											
	15		ries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								18.	143,958.
es	16a		fessional fundraising fees (Part IX, column (A), line 11e)									
Expenses			otal fundraising expenses (Part IX, column (D), line 25) 209,872.									
Ϋ́	17) 1f-24e)				704,6	95.	701,146.
_	18					column (A), line 25				816,5		845,104.
	19									35,3		37.
_ s				-					Begin	ning of Curre		End of Year
ance	20	Total assets	(Part X, line	16)						99,6	80.	124,451.
Net Assets or Fund Balances	21	Total liabilitie	s (Part X, line	e 26)						2,0	28.	26,762.
PRE	22	Net assets o	r fund balanc	es. Subtract I	ine 21 from line	20				97,6	52.	97,689.
Pai	rt II	Signatur	re Block									
						anying schedules and s			f my knowl	edge and belie	ef, it is	
true,	correct, a	and complete. Ded	claration of prepar	er (other than offic	cer) is based on all ii	nformation of which prep	oarer nas any	knowledge.			ı	
Sigı	า [Signature of office	cer								Date	
Her	е	Shana	Koehle	r, Trea	asurer							
		Type or print nan	ne and title									
		Print/Type pre	eparer's name		Preparer's signatu	re	[Date		Check	if PT	IN
Paid	t									self-em	oloyed	
	parer	Firm's name			•				F	rm's EIN	- 1	
	Only		s							hone no.		
-	,											
May	the IRS	S discuss this	return with th	e preparer sh	nown above? S	ee instructions						. Yes No

rai	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: To help fund research for pediatric brain tumor cancers and to help
	provide assistance to families with a child with cancer.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$547,079. including grants of \$) (Revenue \$843,874.) Fundraisers for medical charity
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
40	Total program service expenses 547.079.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		x	
_	complete Schedule A	1	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2	A	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			х
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If		v	
_	"Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			l
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
a	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	
k				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a				
	Schedule D, Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If</i>			
-	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
13	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		
.,	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	-17		
10		10	x	
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yos " complete School to School t	40		x
20-	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule.H</i>	20a		
) 21		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	24		x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u> </u>	1 42

Pa	rt IV Checklist of Required Schedules (continued)			ago
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part.I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (See the Schedule			
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a	X	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part.IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part L	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			l
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			l
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note : All Form 990 filers are required to complete Schedule Q	38	X	<u> </u>
Par				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
_	5. 4. 1		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	1

Par	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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		X
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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		
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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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-C?	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		Х
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
a	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:			
a	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.)			
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	120		
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 Q	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (2023) Addi's Faith Foundation 26-0542314 Page 6 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 8 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 7 b Enter the number of voting members included in line 1a, above, who are independent 1h 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 X 3 X 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8a X Each committee with authority to act on behalf of the governing body?........... Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?...... 10b 11a X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?. . . b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." 12c X X 13 13 X 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a X 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a 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 Section C. Disclosure ТX 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

State the name, address, and telephone number of the person who possesses the organization's books and records. (281)910-5937
Amber Bender 2410 Riverway Oak Dr Kingwood, TX 77345

X Upon request

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,

Another's website

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

Other (explain on Schedule O)

X Own website

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

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

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

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

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

Check this box if neither the organization nor any rela	ited organiza	tion co	mpen	sate	d any c	urrer	t officer, director, o	r trustee.	
		(C)							
(A)	(B)	Position					(D)	(E)	(F)
Name and title	Average	`			than one		Reportable	Reportable compensation	Estimated amount
realite did title	hours			•	is both a or/trustee		compensation		of other
	per week			,			from the	from related	compensation
	(list any	or c	nst	Officer	em em	+ormer	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	hours for related	vidu	itulio	cer	oloye	mer	1099-NEC)	1099-NEC)	related organizations
	organizations	Individual trustee or director	nal t		employee	3			
	below	stee	institutional trustee		employee Key employee				
	dotted line)		ě						
(1) Amber Bender	40.00								
Director, Founder			3	ζ			28,800.		
(2) Troy Ahrens	05.00								
Board Chair			2	ζ					
(3) Niki Dixon	02.00								
Director			2	ζ					
(4) Jonathon Hoyme	02.00								
Director			3	ζ					
(5) Heather Keller	03.00								
Secretary			2	2					
(6) Shana Koehler	07.00								
Treasurer			2	ζ					
(7) Tim Studdert	02.00								
Director			2	2					
(8) Lisa Holley	02.00								
Director			2	ζ					
_(9)									
<u>(10)</u>									
(11)									
(12)									
(13)									
				_					
<u>(14)</u>									

Part	VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	oye	es,	and	Hig	hest Compens	ated Empl	oyees		(continue
						(C)							
	(A) Name and title	(B) Average hours per week (list any	officer and a director/trus					n)	(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W		com	(F) ated amount of other spensation om the
		hours for related organizations below dotted line)	or director	Institutional trustee	Officer	key employee	employee	-ormer	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)			ization and organizations
<u>(15)</u>													
<u>(16)</u>													
(17)													
(18)_													
<u>(19)</u>													
<u>(20)</u>													
<u>(21)</u>													
(22)_													
<u>(23)</u>													
(24)													
<u>(25)</u>													
1b	Subtotal							•	28,800.		-		
c d	Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c)		 						28,800.	A 400 000			
	Total number of individuals (including but not reportable compensation from the organization)		hose	liste	d al	00V6	e) who	o red	ceived more thar	1 \$100,000 of	<u> </u>		
3	Did the organization list any former officer, directed	or, trustee, ke	ey emp	oloye	ee, c	or hig	ghest (com	pensated				Yes No
4	employee on line 1a? <i>If "Yes," complete Schedule</i> For any individual listed on line 1a, is the sum of r											3	X
	organization and related organizations greater tha	an \$150,000	? If "Y	'es,"	con	nplet	te Sch	edul	le J for such			4	x
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	compensat	ion fro	m ar	ny ui	nrela	ated or	rgani	ization or individua	I		5	х
Secti	on B. Independent Contractors	, ,									<u>-</u>		
1	Complete this table for your five highest comcompensation from the organization. Report	-	-									s tax	year.
	(A) Name and business addres						•		(B) Description of service			(C)	
2	Total number of independent contractors (increceived more than \$100,000 of compensation)	-					se liste	ed a	above) who				

		Check if Schedule O contains a response	onse	or note to any lir	ne in this Part VIII	l		
					(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
								sections 512-514
	1a	Federated campaigns	1a					
	b	Membership dues	1b					
ants	С	Fundraising events	1c	585,376.				
ָהָ פ <u>ַ</u>	d	Related organizations	1d					
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (contributions)	1e					
ns, o	f	All other contributions, gifts, grants,		250 400				
er S		and similar amounts not included above	1f	258,498.				
흕돌	g	Noncash contributions included in	4	6				
and Co	١,	lines 1a-1f	1g	•	843,874.			
	h	Total. Add lines 1a-1f	• •	Business Code	043,074.			
	20			Business Code				
9	2a b							
er.	C							
gram Serv Revenue	d							
grar Re	l e		_					
Program Service Revenue	f	All other program service revenue	_					
ш	1	Total. Add lines 2a-2f						
	1	Investment income (including dividends, inte						
	້	other similar amounts)			1,267.	1,267.		
	4	Income from investment of tax-exempt bond						
	5	Royalties						
		(i) Real		(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7a	Gross amount from (i) Securities	3	(ii) Other				
		sales of assets						
		other than inventory 7a						
	b	Less: cost or other basis						
ne		and sales expenses 7b						
venue	С	Gain or (loss)						
Re.	1	Net gain or (loss)						
Other Re	8a	Gross income from fundraising						
ŏ		events (not including \$						
		of contributions reported on line						
	١.	1c). See Part IV, line 18	8a					
		Less: direct expenses	8b	•				
	1	Net income or (loss) from fundraising events	·					
	9a	Gross income from gaming						
	١,	activities. See Part IV, line 19	9a					
	1	Less: direct expenses	9b	l .				
			<u> </u>					
	10a	Gross sales of inventory, less returns and allowances	10a					
	l b	Less: cost of goods sold	10a					
		Net income or (loss) from sales of inventory						
		The second of th		Business Code				
Ø	11a							
non ue	b							
ella	C							
Miscellanous Revenue	d	All other revenue						
Σ	e	Total. Add lines 11a-11d	<u>.</u> .					
	12	Total revenue. See instructions			845,141.	1,267.		

Sec	tion 501(c)(3) and 501(c)(4) organizations must complete Check if Schedule O contains a response or no			st complete column (/	
Do n	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	Db, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		·	<u> </u>	·
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	28,800.		8,640.	20,160.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	105 165	07.450	10 000	FR 01R
7	Other salaries and wages	105,167.	27,450.	19,800.	57,917.
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	9,991.	2,100.	1,918.	5,973.
10	Payroll taxes	9,991.	2,100.	1,910.	3,313.
11	Fees for services (nonemployees):				
a	Management				
b	Legal				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A), amount, list line 11g expenses on Schedule O.)	11,000.			11,000.
12	Advertising and promotion	122,791.		7,969.	114,822.
13	Office expenses	18,706.		18,706.	
14	Information technology	20,893.		20,893.	
15	Royalties				
16	Occupancy	7,720.		7,720.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	0 505		0.505	
23	Insurance	2,507.		2,507.	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
_	(A), amount, list line 24e expenses on Schedule O.) Funds-MD Anderson Researc	255,000.	255,000.		
a	Assistance to families	262,529.	262,529.		
b	TIDSTRUCTURE CO LAMITITES	202/329.	202/323.		
c d					
e e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	845,104.	547,079.	88,153.	209,872.
<u>25 </u>	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)				

		Check if Schedule O contains a response or note to any line in this Pa	art X			
				(A)		(B)
				Beginning of year		End of year
	1	Cash - non-interest-bearing		99,680.	1	124,451.
	2	Savings and temporary cash investments	[2	
	3	Pledges and grants receivable, net	[3	
	4	Accounts receivable, net	[4	
	5	Loans and other receivables from any current or former officer, director,				
		trustee, key employee, creator or founder, substantial contributor, or 35%				
		controlled entity or family member of any of these persons	[5	
	6	Loans and other receivables from other disqualified persons (as defined				
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .			6	
	7	Notes and loans receivable, net	[7	
ets	8	Inventories for sale or use	[8	
Assets	9	Prepaid expenses and deferred charges			9	
`	10a	Land, buildings, and equipment: cost or other				
			982.			
	b	Less: accumulated depreciation 10b 2,	982.		10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equal line 33)		99,680.	16	124,451.
	17	Accounts payable and accrued expenses		2,028.	17	26,762.
	18	Grants payable	[18	
	19	Deferred revenue	[19	
	20	Tax-exempt bond liabilities	[20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	[21	
ç,	22	Loans and other payables to any current or former officer, director,				
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%				
abi		controlled entity or family member of any of these persons			22	
=	23	Secured mortgages and notes payable to unrelated third parties	[23	
	24	Unsecured notes and loans payable to unrelated third parties	[24	
	25	Other liabilities (including federal income tax, payables to related third				
		parties, and other liabilities not included on lines 17-24). Complete Part X				
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		2,028.	26	26,762.
		Organizations that follow FASB ASC 958, check here				
ç,		and complete lines 27, 28, 32, and 33.				
nce	27	Net assets without donor restrictions		97,652.	27	37,689.
ala	28	Net assets with donor restrictions			28	60,000.
<u>Б</u>		Organizations that do not follow FASB ASC 958, check here				
ᇤ		and complete lines 29 through 33.				
ō	29	Capital stock or trust principal, or current funds			29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund]		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds]		31	
Net Assets or Fund Balances	32	Total net assets or fund balances		97,652.	32	97,689.
Z	33	Total liabilities and net assets/fund balances		99,680.	33	124,451.

•	000 (2020)				. <u>~</u> 9	<u> </u>
Par	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI			<u></u>	. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1	8	45,		
2	Total expenses (must equal Part IX, column (A), line 25)	2	8	45,		
3	Revenue less expenses. Subtract line 2 from line 1	3			37	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		97,	652	2.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		97,	689	9.
Par	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				. [
				Ye	es l	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a	2	ζ
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2	:b	2	ζ
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2	c c		
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule 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?		3	a	3	ζ
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3	b		
IYA			F	orm 99	0 (20	1231

SCHEDULE A

(Form 990)

Public Charity Status and Public Support

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Employer identification number Name of the organization 26-0542314 Addi's Faith Foundation 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).) 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 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 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 university: An organization that normally receives (1) more than 33 ½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 ½% of its 10 🔲 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). 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. a 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. **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. 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. **d** 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 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). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 other support (see listed in vour governing support (see document? above (see instructions)) instructions) instructions) Yes (A) (B) (C) (D) (E) Total

Addi's Faith Foundation 26-0542314 Page 2 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 places correlate Part III. Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secu	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
		415,973.	413,365.	624,499.	851,875.	843,874	3,149,586.
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	415,973.	413,365.	624,499.	851,875.	843,874	3,149,586.
5	The portion of total contributions by						
	each person (other than a governmental						
	unit or publicly supported organization)						
	included on line 1 that exceeds 2%						
	of the amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						3,149,586.
	on B. Total Support			_			
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	415,973.	413,365.	624,499.	851,875.	843,874	.3,149,586.
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10						3,149,586.
12	Gross receipts from related activities, etc	•	•			12	585,376.
13	First 5 years. If the Form 990 is for the o						
	organization, check this box and stop he	re					
	on C. Computation of Public Suppo	rt Percentag	je				
14	Public support percentage for 2023 (line					14	100.00%
15	Public support percentage from 2022 Sch					15	%
16a	33 1/3 % support test-2023. If the organ						·
	box and stop here. The organization qua	•		•			
b	33 1/3 % support test-2022. If the organ						
	check this box and stop here. The organ	-			-		
17a	10%-facts-and-circumstances test-202	•			•		
	10% or more, and if the organization me						
	Part VI how the organization meets the fa	acts-and-circur	nstances test.	The organizat	ion qualifies as	s a publicly s	upported
	organization						
b	10%-facts-and-circumstances test-202	•					
	15 is 10% or more, and if the organization					•	
	Explain in Part VI how the organization m				-		
	supported organization						_
18	Private foundation. If the organization of						
	instructions						
1.13.7.4							

Schedule A (Form 990) 2023 Addi's Faith Foundation

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

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

Secti	on A. Public Support				•	,	
Caler	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons.						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
-	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the oil	ganization's f	irst, second, th	ird, fourth, or	fifth tax year a	s a section 501	I(c)(3)
	organization, check this box and stop her	e					
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2023 (lin		· /·	•	` ' '		%
16	Public support percentage from 2022			15		. 16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2023	•		-			%
18	Investment income percentage from 202						%
19a	3						
	line 17 is not more than 331/3 %, check this	_	-	•			_
b	331/3 % support tests-2022. If the organize						
	line 18 is not more than 331/3%, check this b	-	-	-			
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b,	check this box	and see instru	ctions

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	Section	A. All	Sup	porting	organizations
---	---------	--------	-----	---------	---------------

50011	on A. An outporting organizations		V	NI.
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
_	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?			
	If "Yes," complete Part I of Schedule L (Form 990).	8		
9 a	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.	9a		
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 .	9b		
С	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.	9с		
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.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to			

10b

determine whether the organization had excess business holdings.)

Part	Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b an	d l		
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above? 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	11b VI. 11c		
	on B. Type I Supporting Organizations	<i>n.</i> 110		
	<u> </u>		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or memberships of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
•				
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 Par VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	:		
	supervised, or controlled the supporting organization.			
Section	on C. Type II Supporting Organizations		1.,	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the director		Yes	No
	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).			
Section	on D. All Type III Supporting Organizations	1	_L	
			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 has the organization maintained a close and continuous working relationship with the supported organization(s).	2 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	е		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test. Complete line 2 below.	e instru	ctions	s).
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.	al entity	(see	_
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 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,	of		
	how the organization was responsive to those supported organizations, and how the organization determine that these activities constituted substantially all of its activities.	ed 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	nt,		
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
h	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of ea of its supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard			

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgar	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	_		•
See instructions. All other Type III non-functionally integrated supporting of	orgar		
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
			(optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year
Section B - Willimum Asset Amount			(optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	Illy in	tegrated Type III support	ing organization (see

UYA Schedule A (Form 990) 2023

d Excess from 2022 Excess from 2023

Schedul	e A (Form 990) 2023 Addi's Faith Found				6-0542314 Page
Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nizations (continu	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		1	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purp	nizations	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required	-	t 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 whic	h the organization is res	sponsive		
	(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	
			(ii)		(iii)
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistribution	ns	Distributable
		Excess Distributions	Pre-2023		Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023				
	(reasonable cause required- explain in Part VI). See instr.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section				
	D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
С	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:				
а	Excess from 2019				
b	Excess from 2020				
С	Excess from 2021				

UYA Schedule A (Form 990) 2023

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17 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 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 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 2, 5, and 6. Also complete this part for any additional information. (See instructions.)						
-						

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990, 990-EZ or 990-PF.

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

2023

Addi's Faith Foundation

Employer identification number

26-0542314

Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
0	The first Constant Date of Constant Date				
	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
General Rule					
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a intributions.				
Special Rules					
▼ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33½3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year					
Caution: An organization tha	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it				

must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

SCHEDULE D (Form 990)

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.

Department of the Treasury Internal Revenue Service

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

Name o	f the organization		Employ	er identification number	
Addi	's Faith Foundation		26-	-0542314	
Part		rised Funds or Other Similar Fu			
	Complete if the organization answered "				
	, , , , , , , , , , , , , , , , , , , ,	(a) Donor advised funds		(b) Funds and other account	ts
1	Total number at end of year			(-,	
2	Aggregate value of contributions to (during year)		<u>, </u>		
3	Aggregate value of grants from (during year)		-		
4	Aggregate value at end of year		$\overline{}$		
	Did the organization inform all donors and donor advisors in			ore the ergenization's	
5		-			X No
•	property, subject to the organization's exclusive legal control				V NO
6	Did the organization inform all grantees, donors, and donor				
	purposes and not for the benefit of the donor or donor advis				37 N.
Dort	private benefit?	 		L Yes	A NO
Part		Vac" on Form 000 Port IV line 7			
	Complete if the organization answered "				
1	Purpose(s) of conservation easements held by the organization				
	Preservation of land for public use (for example, recrea	· =		y important land area	
	Protection of natural habitat	Preservation of	a certified	I historic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qua	lified conservation contribution in the form of	f a conse	ervation easement on the last d	lay
	of the tax year.			Held at the End of the	Tax Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements			2b	
С	Number of conservation easements on a certified historic s	tructure included on line 2a		2c	
d	Number of conservation easements included on line 2c acc	uired after July 25, 2006, and not on a histo	oric		
	structure listed in the National Register			2d	
3	Number of conservation easements modified, transferred, r	eleased, extinguished, or terminated by the			
	organization during the tax year				
4	Number of states where property subject to conservation ea	asement is located			
5	Does the organization have a written policy regarding the pe	· · · · · · · · · · · · · · · · · · ·	olations,		
	and enforcement of the conservation easements it holds?			Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting				_
	5/ 1 5	, , , , , , , , , , , , , , , , , , , ,		ů ,	
7	Amount of expenses incurred in monitoring, inspecting, har	ndling of violations, and enforcing conservat	ion easen	ments during the year	
	3, 4	3 • • • • • • • • • • • • • • • • • • •		3 ,	
8	Does each conservation easement reported on line 2d above	e 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 conserva				
Ū	include, if applicable, the text of the footnote to the organiza	•		•	
	conservation easements.	morro marola statomento trat desembes t	o organiz	ation a document for	
Part		s of Art. Historical Treasures.	r Othe	r Similar Assets	
rait	Complete if the organization answered "			7.000.0	
	If the organization elected, as permitted under FASB ASC 9			ce sheet works	
ıa	of art, historical treasures, or other similar assets held for p				
	service, provide in Part XIII the text of the footnote to its final			on public	
L	•			hoot works of	
b	If the organization elected, as permitted under FASB ASC set, historical tresource, or other similar posets held for pub.	·			
	art, historical treasures, or other similar assets held for pub	nc exhibition, education, or research in furtr	erance o	i public service,	
	provide the following amounts relating to these items.			•	
	(i) Revenue included on Form 990, Part VIII, line 1			. \$	

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts

b Assets included in Form 990, Part X .

required to be reported under FASB ASC 958 relating to these items.

Part	III Organizations Maintaining C	Collections of A	Art, His	torical T	reasures	, or Ot	her Similar <i>A</i>	SSE	ets (co	ontin	ued
3	Using the organization's acquisition, accessio (check all that apply).	n, and other records	, check ar	y of the fol	lowing that m	nake sign	ificant use of its o	ollec	tion iten	าร	
а	Public exhibition		d	Loan o	or exchange	program					
b	Scholarly research		е	Other							
С	Preservation for future generations			_							
4	Provide a description of the organization's coll	ections and explain	how they f	urther the o	organization's	s exempt	purpose in Part X	III.			
-			,		3		F P				
5	During the year, did the organization solicit or		-		•						No
Dart	rather than to be maintained as part of the organization's collection?										
Tart	Complete if the organization a 990, Part X, line 21.		on Forn	n 990, Pa	art IV, line	9, or r	eported an ar	nou	nt on	Forn	n
1a	Is the organization an agent, trustee, custodia on Form 990, Part X?		-						Ye:	; [No
b	If "Yes," explain the arrangement in Part XIII a	and complete the follo	owing tabl	e:							
							Am	ount			
С	Beginning balance					1c					
d	Additions during the year										
е	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on Fo								☐ Ye		No
b	If "Yes," explain the arrangement in Part XIII.					-				=	j
Part		Officer field if the ex	piariation	ias been pi	Ovided on 1 8	<u>ан Дин</u>		• •		•	
	Complete if the organization a	nswered "Yes"	on Forn	990 P	art IV line	10					
	- Complete ii iile organizationi a	(a) Current year		ior year	(c) Two year		(d) Three years ba	ıck	(e) Four	vears	hack
10	Positiving of year halance	(a) Curront your	(5)	ioi youi	(6) 1 110 300	aro baok	(a) Thiob your be	loit	(6) 1 041	youro	Daois
1a	Beginning of year balance							-			
b	Contributions										
С	Net investment earnings, gains, and										
	losses										
d	Grants or scholarships							_			
е	Other expenditures for facilities and										
	programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	nt year end balance	(line 1g, c	olumn (a))	held as:						
а	Board designated or quasi-endowment	%									
b	Permanent endowment %										
С	Term endowment %										
	The percentages on lines 2a, 2b, and 2c shou	ıld equal 100%.									
3a	Are there endowment funds not in the posses		tion that ar	e held and	administered	for the					
	organization by:	ŭ								Yes	No
	(i) Unrelated organizations?								3a(i)		
	(ii) Related organizations?								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizate								3b		
4	Describe in Part XIII the intended uses of the								_ 00 _		
Par			mient rund	13.							
ı aı	Complete if the organization a		on Forn	990 P	art IV line	11a S	See Form 990	Pa	art X I	ine 1	10
	Description of property	(a) Cost or other			other basis		Accumulated		d) Book		
	Description of property	(investme		l, ,	her)		epreciation	(u) DOOK	vaiue	
	Land	,	7	,,,,	- /	30					
1a	Land										
b	Buildings										
С	Leasehold improvements		• • • •								
d	Equipment	2	<u>,982.</u>				2,982.				
_	Othor	ı		I		1	I				

	 Other Securities he organization answered "Yes" on I 	Form 990 Part IV line 1	1b See Form 990 Part X line 12
(a) Descr	iption of security or category cluding name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	Form 990, Part X, line 12, col. (B))		
	— Program Related he organization answered "Yes" on	Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.
(a) Descr	iption of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
<u>(1)</u>		+	200. S. Old St your market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	Form 990, Part X, line 13, col. (B))		
Part IX Other Assets	s he organization answered "Yes" on l	Form 990 Part IV line 1	1d See Form 990 Part X line 15
	(a) Description	1 01111 000, 1 411 11, 11110 1	(b) Book value
<u>(1)</u>	(0, 1000.14.00.		(a) reconstance
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal i	Form 990, Part X, line 15, col. (B))		
Part X Other Liabili Complete if the line 25.	ties he organization answered "Yes" on l	Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X,
1.	(a) Description of liab	hility	(b) Book value
(1) Federal income taxes	(a) Description of haz	Dinty	(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	Form 000 Part V line 25 col (P))		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents With Rever	ue per R	eturn	
	Complete if the organization answered "Yes" on Form 990, P	art IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	- 1		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1		[3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	
Part			nses per	Return	
	Complete if the organization answered "Yes" on Form 990, P	art IV, line 12a.			
1	Total expenses and losses per audited financial statements		[1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		[2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		- 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	
Part 2	XIII Supplemental Information				
Provide	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, li	nes 1b and 2b; Part V	, line 4; Part	X, line 2;	
Part XI,	lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a	dditional information.			

UYA Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 Addi's Faith Foundation	26-0542314 Page 5
Part XIII Supplemental Information (continued)	

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

Inspection

Name of the organization Employer identification number								
Addi's Faith Foundation	n				26-054231	4		
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.								
1 Indicate whether the organization raise	d funds through a	any of the follo	wing activitie	es. Check all that app	oly.			
a Mail solicitations		е 🗌		n of non-government				
b Internet and email solicitations		f L		n of government grar	nts			
c Phone solicitations		g L	Special fu	ndraising events				
d In-person solicitations								
2a Did the organization have a written or o	=	-	-		rustees, or key employee			
listed in Form 990, Part VII) or entity in			_		h the fundraiser is to be	∐ Yes ∐ No		
b If "Yes," list the 10 highest paid individ compensated at least \$5,000 by the or		iliulaiseis) pu	isuani io agi	reements under which	in the fundraiser is to be			
our periodica di rodoi 40,000 by trie or	garnzanori.							
(i) Name and address of individual or entity (fundraiser)	(ii) Activity		draiser have or control of ibutions?	(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		· · · · · · · · · · · · · · · · · · ·			
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
Total			l					
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.								

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more

		gross receipts greater than	\$5,000.	_		
			(a) Event #1 Addishack	(b) Event #2 Walk 5k	(c)Other events	(d) Total events (add col. (a) through
<u>е</u>			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	80,040.	59,846.	446,062.	585,948.
"	2	Less: Contributions				
	3	Gross income (line 1				
		minus line 2)	80,040.	59,846.	446,062.	585,948.
	4	Cash prizes				
	5	Noncash prizes				
enses	6	Rent/facility costs	18,514.			18,514.
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses	3,433.	9,309.	83,508.	96,250.
	10	Direct expense summary. Ac	dd lines 4 through 9 in d	column (d)		114,764.
	11	Net income summary. Subtra				471,184.
Pa	rt III	Gaming. Complete if the o	rganization answered "	Yes" on Form 990, Part	IV, line 19, or reported	more
		than \$15,000 on Form 990		Г		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d)Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
ect Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ac	dd lines 2 through 5 in d	column (d)		0.
	8	Net gaming income summar	y. Subtract line 7 from	line 1, column (d)		0.
•	г.	nton the estate (a) in which the e				
9	a Is	nter the state(s) in which the os the organization licensed to c "No," explain:	onduct gaming activitie	aming activities: s in each of these state	s?	· · · · · · · · · Yes · · · No
	_					
		Vere any of the organization's of "Yes," explain:		d, suspended, or termir	,	r? ∐ Yes ∐ No
	_					

	le G (Form 990) 2023 Add1'S Faith Foundation 26-0542314 Page
11	Does the organization conduct gaming activities with nonmembers? Yes No
12	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?
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records:
	Todordo.
	Nama N
	Name ▶
	Addross N
	Address ▶
45-	Done the executive time have a contract with a third next from whom the executive vectors required
15a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the
	amount of gaming revenue retained by the third party \$
С	If "Yes," enter name and address of the third party:
	Name
	Address
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?
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 \$
Part	
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information.
	See instructions.

UYA Schedule G (Form 990) 2023

SCHEDULE L (Form 990)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

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

Internal Revenue Service

Name of the organization

Department of the Treasury

Employer identification number

Addi's Faith Fo	oundation					-0542			iber		
Part I Excess Bene	efit Transaction	ns (section 501(c)(3), section	on 501(c)(4), a	and section 501(c				only)	
Complete if the	ne organization	answered "Yes"	on Form 9	90, Part IV, lin	e 25a or 25b; or l	orm 990	0-EZ	, Part	V, lir	ne 40	b.
1 (a) Name of disqualified person		(a) Name of disqualified person and		fied person and	(c) Descrip	tion of trans	sactio	n		(d) Corrected	
			organization		(4) 2000					Yes	No
(1)											
(2)											
(3)											
(4)											
(2) (3) (4) (5) (6)											
(6)											
2 Enter the amount of			_	-				Φ.			
under section 4958								<u>پ</u>			
3 Enter the amount of	or tax, ir arry, or	n line ∠, above, re	eimbursea i	by the organiz	ation			Φ			
Part II Loans to and	Nor From Inte	rested Persons									
			on Form 9	90-F7 Part V	line 38a, or Forn	990 Pa	art I\/	/ line	26· d	or if th	ıe.
•	•	ount on Form 99				. 000, . 0	a	,	_0, (), ii (i	
(a) Name of interested person	(b) Relationship		(d) Loan to d			g) In def	fault?	(h) Apr	proved	(i) W	ritten
(-)	with organizatio	''	from the	principal amou	l ','	(3)		by boa		agree	
			organization	?				comm	ittee?		
			To Fron	_ n		Yes	No	Yes	No	Yes	No
(1)											
(3)											
(4)											
(2) (3) (4) (5) (6)											
(6)											
(7)											
(8)											
(9)											
(10)						\perp					
Total				\$							
		efiting Interester answered "Yes"		00 Part IV lin	0.27						
<u>.</u>	<u> </u>	onship between interes				10000	(-)	Durna			
(a) Name of interested pers	, ,	and the organization	sted (c) Arr	ount of assistance	e (d) Type of assis	stance	(e)) Purpo	se or a	assistar	ice
<u>(1)</u>											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											

(8) (9)

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	zatior nues?
Amber Bender	Dinastan Banadan	20 000	Darreal 1	Yes	No
mmer pender	Director, Founder	28,800.	Payroll		X
t V Supplemental Information					
	n for responses to questions on S	Schodula I. Soo in	structions		
1 Tovide additional informatio	Thor responses to questions on t	ochedule L. oee in	structions.		

UYA Schedule L (Form 990) 2023

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization	Employer identification number
Addi's Faith Foundation	26-0542314
	<u>'</u>

Schedule O (Form 990) 2023 Page 2

Name of the organization	Employer identification number						
Addi's Faith Foundation	26-0542314						
Part VI Line 11b							
After providing the complete Form 990 and given time for review, any							
Part VI Line 11b							
questions are answered before filing.							
Part VI Line 12c							
Time is allocated at a board meeting at least once a year	er to discuss						
Part VI Line 12c	i co discuss						
situations that could result in a conflict of interest.							
Part VI Line 19							
The organization's governing documents and financial sta	stomonta aro mado						
Part VI Line 19	dements are made						
available to the public upon request.							
available to the public upon request.							

UYA Schedule O (Form 990) 2023