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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For the	e 2023 calendar year, or tax year beginning and	ending					
В	Check if applicable	C Name of organization		D Employe	er identific	eation number		
	Addre	Academy for Creating Enterprise						
	Name chang Initial	Doing business as			064104			
	return Final return	PO Box 299	Room/suite		$ \begin{array}{c} \textbf{E} \text{Telephone number} \\ 801-609-7448 \end{array} $			
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross recei		1,345,456.		
	Ameno return			H(a) Is this a group return				
	Applic tion	Finame and address of principal officer: RODEL C REYLL		1	ordinates'			
	pendir	same as C above		H(b) Are all su	bordinates inc	cluded? Yes No		
1	Tax-exe	empt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) 4947(a)(1) c	or 527	lf "No,	attach a	list. See instructions		
J	Websit	te: www.the-academy.org		H(c) Group	exemption	n number		
K	Form of	organization: X Corporation Trust Association Other	L Year	of formation:	1999 м	State of legal domicile: UT		
	art I	Summary						
	1	Briefly describe the organization's mission or most significant activities: See \$	Schedu	le 0				
Activities & Governance								
rna	2	Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of	its net ass	ets.		
o Ve	3	Number of voting members of the governing body (Part VI, line 1a)			3	11		
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)				11		
80	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			5	10		
)iţi	6	Total number of volunteers (estimate if necessary)			6	3942		
Ċ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12				0.		
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11				0.		
				Prior Yea		Current Year		
ď	8	Contributions and grants (Part VIII, line 1h)		1,719		1,230,123.		
Revenue	9	Program service revenue (Part VIII, line 2g)			0.	0.		
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		4	,593.	115,333.		
<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0.	0.		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,724		1,345,456.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		906	,389.	1,247,876.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.		
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		697	,434.	658,899.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.	0.		
X	. b	Total fundraising expenses (Part IX, column (D), line 25) 325,56						
Ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			,704.	416,401.		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,036	,527.	2,323,176.		
	19	Revenue less expenses. Subtract line 18 from line 12			,937.	-977,720.		
Net Assets or	G T		Be	ginning of Cur		End of Year		
sset	20	Total assets (Part X, line 16)		4,780		3,757,438.		
at As	21	Total liabilities (Part X, line 26)			,804.	64,167.		
	_	Net assets or fund balances. Subtract line 21 from line 20		4,670	,991.	3,693,271.		
	art II	Signature Block						
		Ities of perjury, I declare that I have examined this return, including accompanying schedules			-	knowledge and belief, it is		
true	, correc	rt, and complete. Declaration of preparer (other than officer) is based on all information of wh	iich preparer	has any knowle	edge.			
		Signature of officer		 Date	`			
Sig				Date	;			
Hei	re	Robert Heyn, Executive Director Type or print name and title						
			Ir	Date	Chaol	PTIN		
D - '	.	Print/Type preparer's name Preparer's signature M. Dowld Winner and			Check			
Pai		M. Paul Winward M. Paul Winward From S. Company P.C.	ĮU	4/04/24				
	parer	Firm's name Squire & Company, PC Firm's address 1329 S 800 E		Firm	n's EIN 8	7-0343246		
use	Only			5.		12256000		
		Orem, UT 84097		Pho	ne no. o U .	12256900		
		RS discuss this return with the preparer shown above? See instructions				X Yes No Form 990 (2023)		
LH/	⊣ ror	Paperwork Reduction Act Notice, see the separate instructions. 332001 12	2-21-23			Form 330 (2023)		

l c	(Code:	_) (Expenses \$	including grants of \$	

including grants of \$ (Expenses \$

1,912,479. Total program service expenses

			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	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	⊢ ′		
Ü	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	۳		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		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			 ₩
	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.			
а	in roa, complete concease 2,			
	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			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	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		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		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		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	- . _		<u> </u>
13	,	19		x
20-	complete Schedule G, Part III			X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		 ^ `
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	L	X

Part IV Checklist of Required Schedules (continued) Yes No 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 Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete X 23 Schedule J 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 Х Schedule K. If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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 Х 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 Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Х 26 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 Х 27 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete 32 Х Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 36 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 Х 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 9 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Form 990 (2023) Academy for Creating Enterprise

Part 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	X							
За	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 5b		X						
b	, , , , , , , , , , , , , , , , , , , ,									
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
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	OI.								
-	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).	7-		Х						
a	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		Α.						
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?	7c		х						
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		25						
e	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?									
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h								
	sponsoring organization have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
a Did the sponsoring organization make any taxable distributions under section 4966?										
b										
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.)									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	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 Enter the amount of reserves on hand 13b									
с 14а		14a		Х						
	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	1-10								
	excess parachute payment(s) during the year?	15		x						
	If "Yes," see the instructions and file Form 4720, Schedule N.	.0								
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		L						
	If "Yes," complete Form 6069.									

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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 Q. See instructions.

	to line 6a, 6b, or 10b below, describe the circumstances, processes, or changes on schedule O. See instructions.								
	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sec	tion A. Governing Body and Management			l					
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 11								
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent	-							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		v						
_	officer, director, trustee, or key employee?	2	X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		.					
	of officers, directors, trustees, or key employees to a management company or other person?	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X					
5									
6	Did the organization have members or stockholders?	6		X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			x					
	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	l		 ₩					
_	persons other than the governing body?	7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		v						
a	The governing body?	8a	X						
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			x					
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9							
360	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		V						
40-	Did the averagination have least shorters by anchor or officiation	40-	Yes	No X					
	Did the organization have local chapters, branches, or affiliates?	10a							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х						
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	IIa							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X						
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe	120							
·	on Schedule O how this was done	12c	X						
13		13	X						
14		14	X						
15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent								
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	Х						
	Other officers or key employees of the organization	15b	X						
	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								
	taxable entity during the year?	16a		х					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100							
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure	10.0							
17	List the states with which a copy of this Form 990 is required to be filed None								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availal	ble					
-	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 0)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l financ	cial						
	statements available to the public during the tax year.		-						
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
	Lanae Hooper - 801-609-7448								
	PO Box 299, Lehi, UT 84043								

Form 990 (2023)

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)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do		Pos	itior	l than d	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation	amount of
	week (list any	-	T an		10010	174140		from the	from related organizations	other compensation
	hours for	ndividual trustee or director				- O		organization	(W-2/1099-MISC/	from the
	related	tee or	ıstee			nsate		(W-2/1099-MISC/	` 1099-NEC)	organization
	organizations	ll trus	nal trı		loyee	om pe		1099-NEC)		and related
	below	lividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Robert Heyn	line)	ılı	si Si	#0	Ş.	:£,£	- F			
-	40.00	1		х				130,660.	0.	2,989.
Executive Director (2) Shaun Ritchie	1.00			A				130,000.	0.	4,969.
(2) Shaun Ritchie Board Chair	1.00	Х		х				0.	0.	0.
(3) Lyle & Cricket Parry	1.00	Λ		^				0.	0.	· ·
Treasurer	1.00	Х		Х				0.	0.	0.
(4) Eric Louden	1.00	Λ		^				0.	0.	<u>0 •</u> _
Vice Chair	1.00	Х						0.	0.	0.
(5) Joe Swenson	1.00	25							0.	<u></u>
Board Member	1.00	х						0.	0.	0.
(6) Jolene Swenson	1.00	T								
Board Member		х						0.	0.	0.
(7) Stephen W Gibson	1.00								-	
Board Member		Х						0.	0.	0.
(8) Robert Harbertson	1.00									
Board Member		Х						0.	0.	0.
(9) Andrew Barfus	1.00									
Board Member		Х						0.	0.	0.
(10) Reyna Aburto	1.00									
Board Member		Х						0.	0.	0.
(11) Doug Holmes	1.00									
Board Member		Х						0.	0.	0.
(12) Rich Andrus	1.00									_
Board Member		Х						0.	0.	0.
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		1								

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

Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	l Hiç	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			(0	C)			(D)	(E)			(F)
Name and title	Average			Pos	ition			Reportable	Reportable		Est	imated
	hours per					than o		compensation	compensation			ount of
	week					r/trus		from	from related	- 1	(other
	(list any	ctor						the	organization	s	comp	ensation
	hours for	Individual trustee or director				- G		organization	(W-2/1099-MIS	SC/	fro	m the
	related	tee or	stee			nsat		(W-2/1099-MISC/	1099-NEC)		orga	nization
	organizations	trus	lal tr		oyee	e e		1099-NEC)			and	related
	below	/idua	Institutional trustee	Je.	Key employee	Highest compensated employee	ner				orga	nizations
	line)	Indi	Insti	Officer	Key	High	Former					
		1										
		1										
		1										
						_						
		-										
	1						<u> </u>					
		1										
1h Subtotal	1			l		_	l	130,660.		0.		2,989
1b Subtotal c Total from continuation sheets to Part V								0.		0.		0
								130,660.		0.		2,989
d Total (add lines 1b and 1c)								•	000 ()			1,909
2 Total number of individuals (including but r	not limited to th	ose	liste	d ab	ove) wn	o re	eceived more than \$100,	000 of reportable	9		
compensation from the organization												Yaa Na
										ſ		Yes No
3 Did the organization list any former officer			•	•	•		•	•	•			
line 1a? If "Yes," complete Schedule J for s	such individual										3	X
4 For any individual listed on line 1a, is the s	•							•	•			
and related organizations greater than \$15	0,000? If "Yes,	" со	mple	ete S	Sche	edule	Jf	or such individual			4	X
5 Did any person listed on line 1a receive or												
rendered to the organization? If "Yes," con	nplete Schedule	e J fo	or su	ıch r	oers	on .					5	X
Section B. Independent Contractors	•											
Complete this table for your five highest co	mpensated inc	lepe	nder	nt cc	ontra	actor	rs th	nat received more than \$	100,000 of com	ensat	ion fro	 m
the organization. Report compensation for												
(A)	·)			<u> </u>			Ť	(B)			(C)
Name and business	address	NO	ONE	3				Description of s	ervices	С	ompen	, sation
								•			•	
							\dashv					
							\dashv					
							_					
2 Total number of independent contractors (ncluding but n	ot lin	nited	to t	thos	se lis	ted	above) who received mo	ore than			
\$100,000 of compensation from the organ					C							

		Check if Schedule O contains a response or note to any lin	e in this Part VIII			
		oricon in correction of correction a response of mote to arry in	(A)	(B)	(C)	(D)
			Total revenue	Related or exempt		Revenue excluded
				function revenue	business revenue	from tax under sections 512 - 514
"		Fodowsted commeiting 40				000110110 012 011
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns 1a				
ij d	13	Membership dues 1b				
ts, An	C	Fundraising events				
ig ig	C	Related organizations 112 950				
ns, jin	e	Government grants (contributions) 1e 112,859.				
e ë	f	All other contributions, gifts, grants, and				
혈兼		similar amounts not included above If 1,117,264.				
d d	ç	Noncash contributions included in lines 1a-1f 1g \$				
<u>2 g</u>	h		1,230,123.			
		Business Code				
မွ	2 a					
ه چَ	b	·				
S	c	:				
an	c	l				
Program Service Revenue	e					
P.	f	All other program service revenue				
		Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest, and				
		other similar amounts)	115,333.			115,333.
	4	Income from investment of tax-exempt bond proceeds				•
	5	Royalties				
	•	(i) Real (ii) Personal				
	6 a	Gross rents 6a				
		Less: rental expenses 6b				
		Rental income or (loss) 6c				
		Net rental income or (loss)				
		Gross amount from sales of (i) Securities (ii) Other				
	1 a	3. 505 amount nom saist of				
		assets other than inventory 7a				
•	I.	Less: cost or other basis				
her Revenue		and sales expenses 7b 7c 7c				
eve		. ,				
Ř		Net gain or (loss)				
	8 a	Gross income from fundraising events (not				
ᅙ		including \$ of				
		contributions reported on line 1c). See				
		Part IV, line 18 8a				
		Less: direct expenses 8b				
		Net income or (loss) from fundraising events				
	9 a	Gross income from gaming activities. See				
		Part IV, line 199a				
		Less: direct expenses 9b				
	C	Net income or (loss) from gaming activities				
	10 a	Gross sales of inventory, less returns				
		and allowances 10a				
	b	Less: cost of goods sold 10b				
	C	Net income or (loss) from sales of inventory				
"		Business Code				
ņo a	11 a	·				
ane audi	b					
Miscellaneous Revenue	c					
Aisc B	c	All other revenue				
2	e	Total. Add lines 11a-11d				
	12	Total revenue See instructions	1.345.456.	0.	0	115 333.

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

6 Compensation not included above to disqualified persons (as defined under section 4958(t)(1) and persons described in section 4958(t)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(t)) employer contributions) 9 Other employee benefits 17, 499. 9,012. 1,487. 7,01 10 Payrolit taxes 11 Fees for services (nonemployees): a Management b Legal c Accounting 13,949. 3,069. 8,370. 2,55 d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees 9 Other. (If line 11) amount exceeds 10% of line 25, column (A), amount, list line 11 gexpenses on Schotlus (1) and 11,754. 6,065. 1,310. 4,33 15 Royalties 16 Occupancy 11,754. 6,065. 1,310. 4,33 17 Travel 18 Payments to affiliates 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 10 Ocher expenses. Itemize expenses on tovored above, (List miscallaneous expenses on Schotlus (1)) and 11 in Invariance 10 Other conventions, and meetings 11 Interest 12 Payments to affiliates 19 Other expenses. Itemize expenses on tovored above, (List miscallaneous expenses on Interest (1) and 11 interest (1) and 12 interest (1) an		Check if Schedule O contains a respons	se or note to any line in t	his Part IX	1	_
27.5, 86, 96, and 106 of Part VIII 1.5	Do r	· I	(A)	(B)	(C)	(D)
and domests governments. See Part IV, line 21 (247, 876. 1, 247, 876. 1) (247, 876. 1)		, , ,	TOTAL EXPENSES		general expenses	
2 Grants and other assistance to domestic individuals. See Part N, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part N, line 12 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 1 30,660. 78,396. 26,132. 26,13 6 Compensation not included above to disqualified persons (as defined under section 4580)(19) and persons described in section 4580)(19) and 19) and	1	Grants and other assistance to domestic organizations				
individuals. See Part M, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part M, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Other salaries and wages 8 Pension plan acruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other enjoyee benefits 17, 499. 9, 012. 1, 487. 7, 01 19 Payrolt taxes 17, 499. 9, 012. 1, 487. 7, 01 10 Payrolt taxes 17, 499. 9, 012. 1, 487. 7, 01 10 Payrolt taxes 18 Fees for services (nonemployees): 19 Adappement 10 Legal 10 Adappement 11 Fees for services (nonemployees): 11 Fees for services (nonemployees): 21 Advertising and promotion 22 Accounting 23 Other (If line 11) amount exceeds 10% of line 25, column (A), amount, list line 11) expenses on Sch 0.) 24 Advertising and promotion 25 Other (If line 11) amount exceeds 10% of line 25, column (A), amount, list line 11) expenses on Sch 0.) 26, 038. 4, 969. 16, 283. 4, 7 27 Travel 10 Occupancy 11, 754. 6, 065. 1, 31.0. 4, 3' 17 Travel 10 Occupancy 11, 754. 6, 065. 1, 31.0. 4, 3' 17 Travel 10 Office expenses 11 Fees or services, conventions, and meetings 11 Insurance 22 Depreciation, depletion, and amortization 13 1, 247, 876. 13, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 247, 876. 1, 461, 0.0. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 132. 26, 133. 3, 660. 27, 499. 29, 102. 1, 487. 27, 100. 29, 876. 3, 36		and domestic governments. See Part IV, line 21				
a Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation or furnited above to disqualified persons (as defined under section 4958(f)(3)(8) Other safers and wages Persion plan accrusis and contributions (include section 49(f)(x) and 49(f) employer contributions) Other employee benefits To Payroll taxes As Person plan accrusis and contributions (include section 49(f)(x) and 49(f) employer contributions) Other employee benefits To Payroll taxes As Person plan accrusis and contributions (include section 49(f)(x) and 49(f) employer contributions) Other employee benefits To Payroll taxes As Person plan accrusis and contributions (include section 49(f)) and 49(f) employer contributions) Other employee benefits To Payroll taxes As Person plan accrusis and contributions (include section 49(f)) and 49(f) employer contributions) To Payroll taxes As Person plan accrusis and contributions (include section 49(f)) and 49(f) employer contributions) To Payroll taxes As Person plan accrusis and contributions (include section 49(f)) and 49(f) and	2	Grants and other assistance to domestic				
organizations, foreigin 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 6 Compensation not included above to disqualified persons (as defined under section 4958(r)(1)) and persons described in section 4958(r)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 4901(x) and 4930) employer contributions (include section 401(x) and 4930 employer contributions (include associated and 4930 employer contributions (include associated 401(x) and 4930 employer contributions (include associated 4930 employer contributions (include associated 4930 employer contributions (include associated 4930 employer contributions (include 4930 employer contributions (include 4930 employer contributi		individuals. See Part IV, line 22				
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 6 Compensation not included above to disqualified persons (as defined under section 4956(r)(1)) and persons described in section 4956(r)(1) and apersons described in section 4956(r)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 40(f)) and 40(f) and 40(f) employer contributions) 9 Other employee benefits 17 , 499	3	Grants and other assistance to foreign				
## Benefits paid to or for members		organizations, foreign governments, and foreign				
5 Compensation of current officers, directors, trustees, and key employees trustees, and key employees trustees, and key employees the section 498(pt(1)) and persons (sa defined under section 498(pt(1)) and persons (sectined in section 4988(pt(1)) and persons (sectined in section 4988(pt(1)) and approximate and contributions (include section 491(pt) and 492(pt) an		individuals. See Part IV, lines 15 and 16	1,247,876.	1,247,876.		
5 Compensation of current officers, directors, trustees, and key employees trustees, and key employees trustees, and key employees the section 498(pt(1)) and persons (sa defined under section 498(pt(1)) and persons (sectined in section 4988(pt(1)) and persons (sectined in section 4988(pt(1)) and approximate and contributions (include section 491(pt) and 492(pt) an	4	Benefits paid to or for members				
trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4988(f)(1)) and persons described in section 4988(c)(3)(8) 7 Other salaries and wages Pension plan accruals and contributions (include section 498(c)(3)(8) 8 Pension plan accruals and contributions (include section 401(k) and 498(t)) employer contributions 9 Other employee benefits 17, 499, 9,012, 1,487, 7,01 10 Payroli taxes 11 Fees for services (nonemployees): a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 I Investment management fees 9 Other, (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0, 12 12 Advertising and promotion 13 Office expenses 15,572, 3,556, 744, 1,99 14 Information technology 11,754, 6,065, 1,310, 4,37 17 Travel 16 Occupancy 11,754, 6,065, 1,310, 4,37 17 Travel 17 Corrigences, conventions, and meetings 18 Payments to travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses in line 26, in line 25, column (A), amount, list line 24e expenses on Schedule 0.) 24 Other expenses in line 26, in line 25, column (A), amount, list line 124e expenses on Schedule 0.) 32, 855, 8,927, 1,678, 22,21 32, 855, 8,927, 1,678, 22,21 34 Other expenses on Schedule 0.) 32, 855, 8,927, 1,678, 22,21 35 Supplies 37, 761, 7,761, 7,761, 7,761, 22,21 36 Jaint exest. 20 Jaint line column (A), amount, list line 24e expenses and dilines 1 through 24e 2,323,176, 1,912,479, 85,136, 325,51	5					
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persons (as defined under section 4958(r)(1)) and persons described in section 4958(r)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 17,499. 9,012. 1,487. 7,01 10 Payroll taxes 49,700. 29,876. 3,968. 15,81 1 Fees for services (nonemployees): a Management b Legal c Accounting 1 13,949. 3,069. 8,370. 2,55 d Lobbying e Protessional fundraising services. See Part IV, line 17 for Investment management fees 9 Other. (If line 11) amount exceeds 10% of line 25, column (A), amount, list line 11 gexpenses on Sch 0.) 12 Advertising and promotion 44,590. 20,531. 113. 23,91 13 Office expenses 5,572. 3,556. 74. 1,99 14 Information technology 203,237. 198,834. 1,395. 3,01 15 Royalties 16 Occupancy 11,754. 6,065. 1,310. 4,33 17 Travel 69,862. 66,495. 163. 3,21 18 Payments of travel or entertainment expenses for any tederal, state, or local public officials Ocnferences, conventions, and meetings 10 Interest 11 Payrol taxes 12 Payments of travel or entertainment expenses for any tederal, state, or local public officials Ocnferences, conventions, and meetings 10 Interest 11 Payrol taxes 12 Payments of travel or entertainment expenses for any tederal, state, or local public officials Ocnferences, conventions, and meetings 10 Interest 11 Payrol taxes 12 Payments of travel or entertainment expenses for any tederal, state, or local public officials 12 Ocnferences, conventions, and meetings 13 Office expenses interest expenses not covered allowe. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e axpenses on Schedule 0.) 24 Other expenses 5 Total functional expenses. Add lines 1 through 24e 2 Ja2,323,176. 1,912,479. 85,136. 325,51	6	I		-		-
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## Sees for services (nonemployees): a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 26 , 038 .				29 876	3 968	15 856
a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other: (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) Advertising and promotion 44,590. 20,531. 113. 23,9 3 Office expenses 5,572. 3,556. 74. 1,395. 3,00 15 Royalties Cocupancy 11,754. 6,065. 1,310. 4,3 17 Travel 69,862. 66,495. 163. 3,2 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings linterest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 783. 783. 783. 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.) a Other b Supplies 7,761. 7,761. 7,761. 5 Total functional expenses. Add lines 1 through 24e 2,323,176. 1,912,479. 85,136. 325,5			47,100·	٥٥,٥١٥٠	3,,,,,,,	13,030.
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d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 26, 038.			12 040	2 060	0 270	2 510
e Professional fundraising services. See Part IV, line 17 f Investment management fees			13,949.	3,009.	0,3/0.	2,510.
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Other (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 26, 038. 4, 969. 16, 283. 4, 77	е					
Column (A), amount, list line 11g expenses on Sch 0. 26, 038. 4, 969. 16, 283. 4, 75						
13 Office expenses	g	,	0.5 0.00	4 060	16 000	4 506
13 Office expenses		column (A), amount, list line 11g expenses on Sch O.)		4,969.		4,786.
Information technology	12					
15 Royalties 16 Occupancy 11 754 6 065 1 310 4 3 3 2 1 1 1 1 1 1 1 1 1	13					1,942.
11, 754. 6, 065. 1, 310. 4, 3 17 Travel 69, 862. 66, 495. 163. 3, 20 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 23 Insurance 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 0.) 23 Other 24 Supplies 25 Supplies 27, 761. 7, 761. 29 All other expenses 20 Interest 20 Depreciation, depletion, and amortization 21 Insurance 22 Other expenses on Schedule 0.) 23 Jay 855. 8, 927. 1, 678. 22, 25 24 Other expenses 25 Total functional expenses. Add lines 1 through 24e 2, 323, 176. 1, 912, 479. 85, 136. 325, 55 26 Joint costs. Complete this line only if the organization	14	Information technology	203,237.	198,834.	1,395.	3,008.
Travel 69,862. 66,495. 163. 3,20 Replayments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance 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.) Other Supplies 7,761. All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization	15	Royalties				
Travel 69,862. 66,495. 163. 3,20 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 783. 783. 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 0.) 25 Supplies 7,761. 7,761. 26 All other expenses 25 Total functional expenses. Add lines 1 through 24e 2, 323,176. 1,912,479. 85,136. 325,50 26 Joint costs. Complete this line only if the organization	16	Occupancy				4,379.
for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 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 0.) a Other 5 Supplies 7,761. 7,761. All other expenses 25 Total functional expenses. Add lines 1 through 24e 2,323,176. 1,912,479. 85,136. 325,56	17	Travel	69,862.	66,495.	163.	3,204.
19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 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 0.) a Other b Supplies 7,761. 7,761. 7,761. All other expenses 25 Total functional expenses. Add lines 1 through 24e 2,323,176. 1,912,479. 85,136. 325,56	18	Payments of travel or entertainment expenses				
Interest Interest Interest Insurance Ins		for any federal, state, or local public officials				
Interest Interest Interest Insurance Ins	19	Conferences, conventions, and meetings				
Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) Other Supplies All other expenses All other expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization	20	· [
Depreciation, depletion, and amortization Insurance This insurance This ine 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) a Other Supplies Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization 783. 783. 783. 783.						
23 Insurance						
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) a Other b Supplies 7,761. 7,761. All other expenses All other expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization			783.	783.		
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.) a Other						
amount, list line 24e expenses on Schedule 0.) a Other b Supplies c d e All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization		above. (List miscellaneous expenses on line 24e. If				
a Other 32,855. 8,927. 1,678. 22,29 b Supplies 7,761. 7,761. c d e All other expenses 25 Total functional expenses. Add lines 1 through 24e 2,323,176. 1,912,479. 85,136. 325,50 26 Joint costs. Complete this line only if the organization		amount, list line 24e expenses on Schedule O)				
b Supplies 7,761. 7,761. c d	а		32,855.	8,927.	1,678.	22,250.
c d e All other expenses 25 Total functional expenses. Add lines 1 through 24e 2,323,176. 1,912,479. 85,136. 325,50					=, 3. 2 -	,-
d		- I I	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,,,,,,		
e All other expenses Total functional expenses. Add lines 1 through 24e 2,323,176. 1,912,479. 85,136. 325,50 Joint costs. Complete this line only if the organization						
Total functional expenses. Add lines 1 through 24e 2,323,176. 1,912,479. 85,136. 325,50 26 Joint costs. Complete this line only if the organization		All other expenses				
26 Joint costs. Complete this line only if the organization		-	2 323 176	1 912 479	85 136	325,561.
			2,020,110.	-,,-u,-,,-,,•	00,100	323,301.
TERROLEGO DE COMOTO ED EL DONE LOSES REURE A L'OTRODUCCO I	20					
educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)						
	00001					Form 990 (2023)

		Check if Schedule O contains a response or	note to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		201,837.	1	64,679.
	2	Savings and temporary cash investments			2	3,092,621.
	3	Pledges and grants receivable, net			3	594,920.
	4	Accounts receivable, net			4	1,074.
	5	Loans and other receivables from any current				·
		trustee, key employee, creator or founder, su				
		controlled entity or family member of any of t			5	
	6	Loans and other receivables from other disqu				
		under section 4958(f)(1)), and persons descril			6	
G	7	Notes and loans receivable, net		7		
Assets	8	Inventories for sale or use			8	
As	9	Prepaid expenses and deferred charges			9	4,144.
	10a	Land, buildings, and equipment: cost or othe				·
		basis. Complete Part VI of Schedule D				
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, lir			12	
	13	Investments - program-related. See Part IV, lii		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must e	1 4 500 505	16	3,757,438.	
	17	Accounts payable and accrued expenses			17	64,167.
	18	Grants payable			18	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Comple			21	
w	22	Loans and other payables to any current or fo				
<u> </u>		trustee, key employee, creator or founder, su				
Liabilities		controlled entity or family member of any of t			22	
Ë	23	Secured mortgages and notes payable to uni			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				
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		109,804.	26	64,167.
		Organizations that follow FASB ASC 958, o	check here X			
es		and complete lines 27, 28, 32, and 33.				
anc	27	Net assets without donor restrictions		3,353,378.	27	3,069,077.
Bal	28	Net assets with donor restrictions			28	624,194.
pu		Organizations that do not follow FASB ASC				
Ī		and complete lines 29 through 33.				
Ģ	29	Capital stock or trust principal, or current fun		29		
sets	30	Paid-in or capital surplus, or land, building, or			30	
As	31	Retained earnings, endowment, accumulated			31	
Net Assets or Fund Balances	32	Total net assets or fund balances		4 4-4 44	32	3,693,271.
	33	Total liabilities and net assets/fund balances	4,780,795.	33	3,757,438.	

Pa	Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,	345	5,4	<u>56.</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,	323	3,1	76.	
3	Revenue less expenses. Subtract line 2 from line 1	3	-	977	7,7	20.	
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4						
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)						
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,	693	3,2	71.	
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	0.					
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						
	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						
	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 Sch						
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?			3а		х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi						
_	are quite a realizable units of Check to Control describe about the addition to the describe and the requirement of the control describe and the control describes a			2h			

Form **990** (2023)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

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

OMB No. 1545-0047

Open to Public Inspection

Academy for Creating Enterprise

Employer identification number 87-0641040

- 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.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 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, 4 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 7 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.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 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 10 An organization that normally receives (1) more than 33 1/3% 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 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 а 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.
 - Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С 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 of	ngarnzations					
g Provide the following information						
(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	nization listed na document?	(v) Amount of monetary	(vi) Amount of other
organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
		,				
	·				·	

Enter the number of supported organizations

(Form 990) 2023 Academy for Creating Enterprise 87-0641 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(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	tion A. Public Support							
Cale	ndar 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.")	1552871.	1868328.	3720818.	1719997.	1117264.	9979278.	
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	1552871.	1868328.	3720818.	1719997.	1117264.	9979278.	
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)						657,822.	
6	Public support. Subtract line 5 from line 4.						9321456.	
Sec	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
7	Amounts from line 4	1552871.	1868328.	3720818.	1719997.	1117264.	9979278.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources		54,941.	295.	4,593.	115,333.	175,162.	
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						10154440.	
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	_	
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)		
	organization, check this box and stop							
	ction C. Computation of Publi					T		
	Public support percentage for 2023 (I					14	91.80 %	
	Public support percentage from 2022					15	93.71 %	
16a	6a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and							
	stop here. The organization qualifies as a publicly supported organization							
b	33 1/3% support test - 2022. If the o							
	and stop here. The organization qualifies as a publicly supported organization							
17a	'a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,							
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization							
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization							
b	10% -facts-and-circumstances test	-					10% or	
	more, and if the organization meets the				· ·			
	organization meets the facts-and-circu				•		H	
18	Private foundation. If the organization	n did not check a l	<u>oox on line 13, 16a</u>	a, 16b, 17a, or 17b	, cneck this box ar	na see instructions	·	

(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.)

Sec	etion A. Public Support	siow, picase comp	oloto i dit ii.j				
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.")						
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 organ- ization'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						
	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						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	• • • • • • • • • • • • • • • • • • • •	() 0040	T (1) 0000	() 0004	(1) 0000	1 () 2000	(O.T.)
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6 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						
	Add lines 10a and 10b 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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)		1				<u> </u>
14	First 5 years. If the Form 990 is for the	J		,	•	()()	· —
	check this box and stop here						
	ction C. Computation of Publi					T 1	
	Public support percentage for 2023 (li	, , , , , , , , , , , , , , , , , , , ,	•	column (f))		15	%
	Public support percentage from 2022					16	%
Sec	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	23 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2022 Schedule A, Part III, line 17						
19a	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization qual	ifies as a publicly s	supported organiza	ation	
b	33 1/3% support tests - 2022. If the	•			•	•	
20	line 18 is not more than 33 1/3%, chec Private foundation. If the organization						

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")? *If* "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).
- 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).
- 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		
	_		
	3c		
	4a		
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	4b		
	4c		
	5a		
	5b		
	5c		
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	8		
	0		
	9a		
	9b		
	9c		
	10a		
	401		
_	10b	- 000\	0000

Par	Part IV Supporting Organizations (continued)			
			Yes	No
11	1 Has the organization accepted a gift or contribution from any of the following persons?			
а	a A person who directly or indirectly controls, either alone or together with persons described on line	es 11b and		
	11c below, the governing body of a supported organization?	11a		
b	b A family member of a person described on line 11a above?	11b		
С	c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b,	or 11c. provide		
	detail in Part VI.	11c		
Sect	ection B. Type I Supporting Organizations	·		
			Yes	No
	more supported organizations have the power to regularly appoint or elect at least a majority of the directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported	•		
	effectively operated, supervised, or controlled the organization's activities. If the organization had m			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees wer			
	supported organizations and what conditions or restrictions, if any, applied to such powers during to			
	, , , , , , , , , , , , , , , , , , , ,			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," expl	lain in		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that of			
	supervised, or controlled the supporting organization.	2		
Seci	ection C. Type II Supporting Organizations		1	l
			Yes	No
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI ho			
	or management of the supporting organization was vested in the same persons that controlled or m	-		
0 1	the supported organization(s).			
Sect	ection D. All Type III Supporting Organizations		1	
			Yes	No
	organization's tax year, (i) a written notice describing the type and amount of support provided dur			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) of	copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previous	sly provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the	supported		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in	n Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization	zation(s).		
3	3 By reason of the relationship described on line 2, above, did the organization's supported organization	ations have a		
	significant voice in the organization's investment policies and in directing the use of the organization	on's		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization	ation's		
	supported organizations played in this regard.	3		
Sect	ection E. Type III Functionally Integrated Supporting Organizations			
		the year (see instructions).		
а				
b				
С	5 The specified a	। governmental entity (see instructio		·
2			Yes	No
	, , , , , , , , , , , , , , , , , , , ,	·		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI			
	those supported organizations and explain how these activities directly furthered their exempt p	, ,		
	how the organization was responsive to those supported organizations, and how the organization de			
	that these activities constituted substantially all of its activities.			
	, , ,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes,	, ,		
	Part VI the reasons for the organization's position that its supported organization(s) would have eng			
	these activities but for the organization's involvement.	2b		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	71 0 7			
	of its supported organizations? If "Vos." describe in Part VI the role played by the organization in t	this record 3h	1	i

Sche	dule A (Form 990) 2023 Academy for Creating E	nterpri	se	87-0641040 Page 6
Pai				
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (<i>explair</i>	n in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete S	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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	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		

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

5

6

Schedule A (Form 990) 2023

5

4 Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Fai	t v Type in Non-Functionally integrated 509(aj(s) Supporting Orga	ilizations (continu	<u>ıed) </u>	
Sect	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	npt 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	s of supported organizations		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	e 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	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	ıs	(iii) 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				
a	From 2018				
b	From 2019				
c	From 2020				
d	From 2021				
<u>e</u>	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2023 distributable amount				
i_	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: \$				
<u>a</u>	Applied to underdistributions of prior years				
<u>b</u>	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				
•	Evenes from 2023				

Schedule A (Form 990) 2023

332028 12-21-23 Schedule A (Form 990) 2023

Schedule B

(Form 990)

Schedule of Contributors

0000

Employer identification number

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

OMB No. 1545-0047

	Academy for Creating Enterprise	87-0641040				
Organization type (chec	rganization 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					
	on is covered by the General Rule or a Special Rule . 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spec	cial Rule. See instructions.				
General Rule						
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a contri					
Special Rules						
sections 509(a) contributor, du	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
contributor, du literary, or educ	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.					
year, contributi is checked, ent purpose. Don't	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ons <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions total ter here the total contributions that were received during the year for an <i>exclusively</i> recomplete any of the parts unless the General Rule applies to this organization becausable, etc., contributions totaling \$5,000 or more during the year	aled more than \$1,000. If this box eligious, charitable, etc., use it received nonexclusively				
answer "No" on Part IV,	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedul line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 9 filing requirements of Schedule B (Form 990).					

Name of organization Employer identification number

Academy for Creating Enterprise

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	ıl space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Ennoble Foundation 5369 Legacy Hill Drive West Jordan, UT 84081	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Bertin Family Foundation 723 Mont Clair Drive North Salt Lake, UT 84054	\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Craig Earnshaw 1301 Little Kate Road Park City, UT 84060	\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No. 4_	Name, address, and ZIP + 4 Ed Smith 9601 Verlaine Court Las Vegas, NV 89145	\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	McCullough Family Trust 1553 Ridgeview Circle Farmington, UT 84025	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Fidelity Investments 100 Crosby Parkway Salt Lake City, UT 84147	\$86,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

Academy for Creating Enterprise

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Deseret Trust Company PO Box 11558 Covington, KY 41015	\$ 75,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	Clint Argyle PO Box 1024 Spanish Fork, UT 84550	\$\$2,719.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	Micah Shea Trust 1005 North Grove Alpine, UT 84004	\$\$0,000.	Person X Payroll
(a)	(b)	(c)	(d)
	American Endowment Foundation 5700 Darrow Rd #118 Hudson, OH 44236	\$ 26,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

Academy for Creating Enterprise

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Page 4 Schedule B (Form 990) (2023) Name of organization **Employer identification number** Academy for Creating Enterprise 87-0641040 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

Academy for Creating Enterprise

Employer identification number 87-0641040

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin.		Similar Funds	or Accou	nts. Complete if the
	organization answered Tes Sitt Offi 550,1 art iv, iiii	(a) Donor advi	sed funds	(b) Fur	nds and other accounts
1	Total number at end of year			. ,	
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in v		held in donor advis	sed funds	
	are the organization's property, subject to the organization's	-			Yes No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor or				
	impermissible private benefit?				
Pai	t II Conservation Easements. Complete if the org	ganization answered "\	es" on Form 990,	Part IV, line 7	
1	Purpose(s) of conservation easements held by the organization	on (check all that apply	y)		
	Preservation of land for public use (for example, recreated	tion or education)	Preservation o	f a historically	important land area
	Protection of natural habitat	L	Preservation o	f a certified hi	storic structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contr	ibution in the form	of a conserva	1
	day of the tax year.				Held at the End of the Tax Year
а	Total number of conservation easements			<u>2a</u>	
b	-				
С	Number of conservation easements on a certified historic stru			2c	
d	Number of conservation easements included on line 2c acqui				
	on a historic structure listed in the National Register				
3	Number of conservation easements modified, transferred, rele	eased, extinguished, c	r terminated by the	e organization	during the tax
_	year				
4	Number of states where property subject to conservation eas		aktion bandling of		
5	Does the organization have a written policy regarding the per				□ v □ v.
6	violations, and enforcement of the conservation easements it		and onforcing con		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	mandling of violations,	and emorcing con	servation easi	ernents during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and	enforcina conserva	ntion easemen	its during the year
•	Thouse of expenses mounted in mornioring, inspecting, mand	aming or violations, and	ornoroning conserve	tion cascinor	its during the your
8	Does each conservation easement reported on line 2d above	satisfy the requiremen	nts of section 170(h	n)(4)(B)(i)	
_	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIII, describe how the organization reports conservation				
	balance sheet, and include, if applicable, the text of the footn				
	organization's accounting for conservation easements.	· ·			
Pai	t III Organizations Maintaining Collections of	f Art, Historical Ti	easures, or O	ther Simila	r Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 956	8, not to report in its re	evenue statement a	and balance s	heet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education	on, or research in f	urtherance of	public
	service, provide in Part XIII the text of the footnote to its finan	ncial statements that d	escribes these iten	ns.	
b	If the organization elected, as permitted under FASB ASC 956	8, to report in its rever	ue statement and	balance shee	t works of
	art, historical treasures, or other similar assets held for public	exhibition, education,	or research in furt	herance of pu	blic service,
	provide the following amounts relating to these items.				
	(i) Revenue included on Form 990, Part VIII, line 1				\$
					\$
2	If the organization received or held works of art, historical treat				
	the following amounts required to be reported under FASB A				
а	Revenue included on Form 990, Part VIII, line 1				\$
b	Assets included in Form 990, Part X				\$

Schedule D (Form 990) 2023

e Other

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. line 10c. column (B))

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) (2) (3) (4) (5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990, Part X, line 15, col. (B)) Part X Other Liabilities Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.	Part VII	Investments - Other Securities Complete if the organization answered "Ves" or	n Form 990 Part IV line	11h See Form 990 Part X line 12	
	(a) Descrip	-			d-of-year market value
	1) Financia	al derivatives			
(A)					
(G) (G) (G) (G) (G) (G) (G) (G) (G) (F) (G) (G) (F) (G) (G) (F) (G) (F) (F) (G) (G) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G					
(G)	•				
Col.					
(b) (c) (c) (c) (c) (c) (d) (d) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e					
(G) (G) (G) (H) (G) (H) (G) (H) (G) (H) (H) (H) (H) (H) (H) (H) (H) (H) (H					
(G) (H) (G) (H) (H) (H) (H) (H) (H) (H) (H) (H) (H	(E)				
thil. (Col. (b) must equal Form 930, Part X, line 12, col. (8)	(F)				
Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment	(G)				
New Strengths - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	(H)				
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) 101 (10) (10) (10) (11) (2) (3) (4) (5) (5) (6) (7) (8) (9) 101 (10) (otal. (Col. (I	b) must equal Form 990, Part X, line 12, col. (B))			
(a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (2) (3) (4) (4) (5) (6) (7) (8) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10	Part VIII				
(1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Col., (b) must equal Form 990, Part X, line 13, col. (B)) Part X 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) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description (b) must equal Form 990, Part X, line 15, col. (B)) Part X Other Liabilities Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (4) (5) (6) (7) (8) (9) Other Liabilities (b) Book value (1) Federal income taxes (2) (3) (4) (4) (5) (6) (7) (9) Other Liabilities (b) Book value (c) Book value (d) Federal income taxes (p) (q) (q) (q) (q) (q) (q) (q) (q) (q) (q					
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SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Open to Public

Employer identification number

Internal Revenue Service Name of the organization Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

OMB No. 1545-0047

Academy for Creating Enterprise 87-0641040 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (e) If activity listed in (d) (c) Number of (d) Activities conducted in the region (f) Total (a) Region employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region Central America and the Caribbean 0 Chapter support Education/training 305,599. East Asia and the Pacific 0 0 Education/training Chapter support 242,297. 0 0 Education/training 679,467. South America Chapter support 0 Sub-Saharan Africa 0 Chapter support Education/training 20,513. 0 0 1,247,876. 3 a Subtotal **b** Total from continuation 0 sheets to Part I Totals (add lines 3a

1,247,876.

and 3b)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
			Program services	1247876.		0.		
2 Enter total number of exempt 501(c)(3) orga			e recognized as charities by the					

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.							
(a) Type of grant or assistance	f additional space is neede	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may		
	be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a	Yes	X No
	U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	res	ZZ NO
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to		
	Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing		
	Fund (see the Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

SCHEDULE 0 (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.

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Academy for Creating Enterprise

Employer identification number 87-0641040

Form 990, Part I, Line 1, Description of Organization Mission:
We ignite the entrepreneurial mindset in faith-driven people through
training and support to create more abundant lives.
Form 990, Part III, Line 4a, Program Service Accomplishments:
In the year 2023, chapter programs operated in the following countries:
the Philippines, Mexico, Brazil, Peru, Venezuela, Bolivia, Ecuador,
Colombia, Ghana, Nigeria, Argentina, Paraguay, Chile, and Guatemala.
The following numbers represent statistics for the year 2023:
Start Now training sessions held - 640
Chapter membership - 28,467
New Income Generating Activities (new small businesses) formed by
chapter members in 2022 - 8,613
The Annual Academy Awards in each Area (\$67,666 spent in all areas)
celebrates the achievements of members throughout the year
Webinars - 1,101webinars; 174,142 attendees throughout the year
Form 990, Part VI, Section A, line 2:
Family Relationship:
Joe Swenson - Member
Jolene Swenson - Member
Form 990, Part VI, Section B, line 11b:
A draft of the Form 990 is provided to each board member prior to filing.

Form 990, Part VI, Section B, line 12:

Schedule O (Form 990) 2023 Page **2**

Name of the organization	Academy for Creating Enterprise	Employer identification number 87-0641040
Board members	sign a conflict of interest statement when a	ppointed to the
board and are	reminded to identify an conflicts during boa	rd meetings.
Form 990, Part	VI, Section B, Line 15:	
Board performs	market salary studies to determine compensa	tion for all
positions. Boa	rd performs market salary studies to determi	ne compensation
for all positi	ons.	
Form 990, Part	VI, Section C, Line 19:	
Governing docu	ments are available upon request just as For	ms 990.