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.

Department of the Treasury Internal Revenue Service

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

Inspection

ΑI	For the	2024 calendar year, or tax year beginning and e	ending				
	Gheck If applicabl	C Name of organization		D Employer identifie	cation number		
	Addre	Academy for Creating Enterprise					
	Name	Doing business as		87-06410	40		
	Initial return	,	Room/suite	E Telephone number			
Ш	returni termin			(801) 609-7448			
	zted	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts S 2,247,896.			
	Amen	Leni, or 84045		H(a) is this a group re			
	Application pendir	F Name and address of principal officer: KODEL'C REYT		for subordinates	? Yes X No		
_		same as C above		H(b) Are all subordinates in	cluded? Yes No		
1.	Тах-ех	empt status: X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or	r 527	If "No," attach a	list. See instructions		
_	Websi			H(c) Group exemptio			
_	_	organization: X Corporation Trust Association Other	L Year	of formation: 1999 N	# State of legal domicile; UT		
P	art I	Summary					
	1	Briefly describe the organization's mission or most significant activities: $~\Psi\!e~1g$					
Governance		mindset in faith-driven people through tra	ining	g and suppor	t to		
2	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass	sets.		
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	11		
ĕ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	11		
45 17	۱ -	Total number of individuals employed in calendar year 2024 (Part V, line 2a)			9		
ě	6	Total number of volunteers (estimate if necessary)			4467		
ctivities	7 a			7a	0.		
₹		Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.		
				Prior Year	Current Year		
	8	Contributions and grants (Part VIII, line 1h)		1,230,123.	2,140,153.		
ž	9	Program service revenue (Part VIII, line 2g)		0.	0.		
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		115,333.	107,743.		
č	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,345,456.	2,247,896.		
	-	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,247,876.	1,459,875.		
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
	45	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)		658,899.	717,251.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
ě	ь	Total fundraising expenses (Part IX, column (D), line 25) 340, 61	2.				
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	$ \vdash$	416,401.	340,113.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,323,176.	2,517,239.		
		Revenue less expenses. Subtract line 18 from line 12		-977,720.	-269,343.		
53	a		Be	ginning of Gurrent Year	End of Year		
Assets or	20	Total assets (Part X, line 16)		3,757,438.	3,473,829.		
Sec.	21	Total habilities (Part X, line 26)		64,167.	49,901.		
푘	22	Net assets or fund balances. Subtract line 21 from line 20		3,693,271.	3,423,928.		
_	art II	Signature Block					
Unc	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of my	knowledge and belief, it is		
	-	t, and complete. Declaration of preparer (other than officer) is based on all information of whice					
8ig	ın	Signature of officer		Date			
Her		Robert Heyn, Executive Director					
		Type or print name and title					
_		Preparer's name Preparer's signature	1	Date Check	PTIN		
Paid	d	M. Paul Winward M. Paul Winward	lo	3/27/25 referroley	F00290039		
	- parer	Firm's name Squire & Company, PC	- 10		7-0343246		
	Only	Firm's address 1329 S 800 E					
		Orem, UT 84097		Phone no 80	12256900		
Ma	v the II	S discuss this return with the preparer shown above? See instructions		i none no. o o	X Yes No		
	7						

2,039,821.

4e Total program service expenses

Form 990 (2024) Academy for Creating Enterprise 87-0641040 Page 3 [Part IV] Checklist of Required Schedules

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
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			
	dunng the tax year? If "Yes," complete Schedule C, Part II	4		x
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
۰		8		x
_	Schedule D, Part III			-
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		٠.,
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			١
	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	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? 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
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	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	111		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13		13		X
		14a		X
	Did the organization maintain an office, employees, or agents outside of the United States? 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			
		14b	x	
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140	-	
15			x	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Α.	_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			٠.
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			ļ "
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	\vdash	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			٠.,
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	, , , , , , , , , , , , , , , , , , , ,			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		X

Part IV Checklist of Required Schedules (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Х Part IX, column (A), line 2? | f "Yes," complete Schedule I, Parts I and III 22 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? | # "Yes," complete 23 Х 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24cd Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current 26 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 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Х 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?

17 ## 17 ## 17 ## 19 X "Yes." complete Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? # Х "Yes," complete Schedule L, Part IV Х Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? | "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х Х 35a Did the organization have a controlled entity within the meaning of section \$12(b)(13)? 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 36 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 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 199 Х Note: All Form 990 filers are required to complete Schedule O Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V No Yes 8 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

Form 990 (2024) Page 5 Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Ves No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements. 9 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? х Х Sal Did the organization have unrelated business gross income of \$1,000 or more during the year? 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 Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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). Sa. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line Sa or Sb, did the organization file Form 8886-T? 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? Х b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 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? Х 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Х d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7q h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: a Instation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a Section 501(c)(29) qualified nonprofit health insurance issuers. a 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 c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? Х 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O ... 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? Х If "Yes," see the instructions and file Form 4720, Schedule N. Х 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 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 4958?

17

If "Yes," complete Form 6069.

Academy for Creating Enterprise Form 990 (2024) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Ves No 11 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. b Enter the number of voting members included on line 1a, above, who are independent 11 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customanly performed by or under the direct supervision Х of officers, directors, trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? Х 85 b Each committee with authority to act on behalf of the governing body? Х is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? X b. If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a х b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х on Schedule O how this was done 13 Did the organization have a written whistleblower policy? х 14 Did the organization have a written document retention and destruction policy? 14 х 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official Х b Other officers or key employees of the organization х 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation. in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure None List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection, indicate how you made these available. Check all that apply. Another's website X Upon request Other (explain on Schedule O) X Own website 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records

Lanae Hooper - 801-609-7448 PO Box 299, Lehi, UT 84043

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

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

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

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

Check this box if neither the organization in	or any related	orga	niza	tion	con	npen	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)							(D)	(E)	(F)
Name and title	Average	Position (do not check more than one					Reportable	Reportable	Estimated	
	hours per	bos	, uniec	ss per	raan l	a both	n an	compensation	compensation	amount of
	week	-	officer and a director/trustee)		tee)	from	from related	other		
	(list any	guerdo						the	organizations	compensation
	hours for	8	20			H		organization	(W-2/1099-MISC/	from the
	related organizations	H	huste			90.		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	1 5	90		흏	50.5	١.	1033-1420)		organizations
	line)	ndvittal baste or	Institutional	8	Ocy employee	Mighest compensated employee	Sme			0.3222
(1) Robert Heyn	40.00	-	_	_			"			
Executive Director				Х				157,153.	0.	2,162.
(2) Curtic Beesley	40.00									
Exec VP of Operations						Х		118,481.	0.	4,254.
(3) Cameron Crowther	40.00									
Exec Vice President				Х				104,934.	0.	6,538.
(4) Eric Louden	1.00									
Board Chair		X		Х			_	0.	0.	0.
(5) Lyle & Cricket Parry	1.00							_	_	_
Treasurer		X	Ш	Х		Ш	_	0.	0.	0.
(6) Joe & Jolene Swenson	1.00							_	_	
Vice Chair		X	Ш			Ш	_	0.	0.	0.
(7) Shaun Ritchie	1.00							_	_	_
Board Member		X					_	0.	0.	0.
(8) Brian & Louise Murphy	1.00									
Board Member		Х					_	0.	0.	0.
(9) Stephen W Gibson	1.00									
Board Member		X					_	0.	0.	0.
(10) Tanner Milne	1.00									
Board Member		X					_	0.	0.	0.
(11) Andrew Barfus	1.00							_	_	
Board Member		X				Ш	_	0.	0.	0.
(12) Carrie Thompsen	1.00							_	_	_
Board Member		X				Ш	_	0.	0.	0.
(13) Doug Holmes	1.00							_	_	_
Board Member		X	Ш	_	_	Ш	<u> </u>	0.	0.	0.
(14) Rich Andrus	1.00	_								
Board Member		X	Ш		_		_	0.	0.	0.
		-								
		<u> </u>			_		<u> </u>			
		-								
		-			_		<u> </u>			
		-								

Part \	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
							(D)	(E)			(F)			
	Name and title	Average			Pos		i Shank		Reportable	Reportable	:	E:	stimate	edi
		hours per	box	, unie	as pe	rson l	is both	n an	compensation	compensatio	ın I	ar	nount	of
		Week	_	cer an	1020	irecto	av/trus	200)	from	from related	- I		other	
		(list any hours for	guedo						the organization	organization (W-2/1099-MI)			ipensa rom th	
		related	1 5	籍			H		(W-2/1099-MISC/	1099-NEC)			janizat	
		organizations	曹	12		藍	i i		1099-NEC)	1033-1120)		-	d relat	
		below	Indivitual trustee or	Institutional trustee	a	ce employee	in the	<u> </u>				org	anızatı	ons
		line)	8	12	8	ž	Highest compensated employee	Pamer						
			╙		╙		\perp	_						
			1											
			<u> </u>		<u> </u>	_	\vdash	<u> </u>			\longrightarrow			
			1											
			\vdash		\vdash	\vdash		\vdash			\dashv			
			1											
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			\vdash		\vdash	\vdash	Н	\vdash			\dashv			
			1											
			Т			Т	П	Т			\neg			
1b 8	ubtotal								380,568.		0.	1	2,9	
c To	otal from continuation sheets to Part VI	l, Section A							0.		0.			0.
	otal (add lines 1b and 1c)								380,568.		0.	_ 1	2,9	54.
	otal number of individuals (including but n	at limited to th	ose	liste	d ab	oove) wh	o re	ceived more than \$100,	000 of reportable	÷			3
	empensation from the organization										—		Yes	No
3 D	id the organization list any former officer,	director trusts	1	oeur e	-mn	love	- ~	bud	hest compensated emp	ovee on	Γ		1.03	140
	ne 1a? If "Yes," complete Schedule J for si	-					_	_				3		х
	or any individual listed on line 1a, is the su													
	nd related organizations greater than \$150									-		4	х	
	id any person listed on line 1a receive or a										····			
re	ndered to the organization? # "Yes." com	plete Schedule	Jf	or su	ich i	pers	on .					5		Х
	n B. Independent Contractors													
1 C	omplete this table for your five highest co	mpensated ind	iepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of comp	pensat	tion fr	om	
th	e organization. Report compensation for t	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
	(A) Name and business	address	3/1/	ONTE	,				(B) Description of s				C) nsatio	
	THE TEN SESSION	2001033	IN	ONE				\dashv	Description of 3			ompe	1134.00	
								╛						
								\dashv						
								\dashv						
	otal number of independent contractors (in	-	ot lin	nrteo	i to		se lis)	ted	above) who received mo	ore than				
31	100,000 of compensation from the organic	CALIUT												

- 24		Check if Schedule O co	entains a respons	e or note to any lin	e in this Part VIII			
		Greek II Schedule G Co	Filens & respons	e or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated	(D) Revenue excluded from tax under sections 512 - 514
Program Bervice Contributions, Gifts, Grants Bevenue and Other Similar Amounts	1 a b c c c c c c c c c c c c c c c c c c		tb 1c 1d outloos) 1e rants, and tb 2 1s-1f 1g \$	Business Code	2,140,153.	TOTAL CONTRACTOR	business revenue	
64	•	:						
ă		All other program service re			<u> </u>			
	3	Total. Add lines 2a-2f	ng dividends, inte	rest, and	107,743.			107,743.
	5	Royalties		-				
	b	Less: rental expenses	(i) Real 6a 6b	(ii) Personal				
	7 a	Net rental income or (loss) Gross amount from sales of	(i) Securities					
r Revenue		and sales expenses Gain or (loss)						
Other		Gross income from fundraising including \$ contributions reported on line Part IV, line 18	of ne 1c). See	a				
	c	Less: direct expenses Net income or (loss) from fu Gross income from gaming	undraising events	b				
	b	Part IV, line 19 Less: direct expenses Net income or (loss) from q	9	ia ib				
	10 a	Gross sales of inventory, les and allowances Less: cost of goods sold	ss returns 10	Db .				
nneous	11 a			Business Code				
Miscellaneous Revenue		All other revenue						
	12	Total revenue. See instruction:	ıs		2,247,896.	0.	0.	107.743.

Section 501(c)(3) and 501(c)(4	organizations must com-	plete all columns. All other or	ganizations must complete column (A).
--------------------------------	-------------------------	---------------------------------	---------------------------------------

_	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	1,459,875.	1,459,875.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	262,087.	157,253.	52,417.	52,417.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	380,189.	132,880.	70,383.	176,926.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	23,602.	14,634.	1,888.	7,080.
10	Payroli taxes	51,373.	30,824.	4,110.	16,439.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
c	Accounting	15,349.	13,047.	767.	1,535.
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.)	40,163.	36,533.	1,281.	2,349.
12	Advertising and promotion	43,676.	20,748.		22,928.
13	Office expenses	2,198.	1,183.	304.	711.
14	Information technology	73,731.	66,508.	1,588.	5,635.
15	Royalties				
16	Occupancy	8,400.	4,467.	1,389.	2,544.
17	Travel	111,760.	89,323.	13.	22,424.
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	253.	253.		
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.)	20.205	6 405	2	20.604
a	Other	38,397.	6,107.	2,666.	29,624.
b	Supplies	6,186.	6,186.		
c					
d					
e	All other expenses		0.000.000	455.555	B 4 6
25	Total functional expenses. Add lines 1 through 24e	2,517,239.	2,039,821.	136,806.	340,612.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here rtollowing SOF 98-2 (ASG 959-720)				

Form 990 (2024)
Part X Balance Sheet

Par	tΧ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	64,679.		127,972.
	2	Savings and temporary cash investments	3,092,621.		2,609,147.
		Pledges and grants receivable, net		3	734,922.
		Accounts receivable, net		4	638.
		Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
,	7	Notes and loans receivable, net		7	
Assets		Inventories for sale or use		8	
¥	9	Prepaid expenses and deferred charges	4,144.	9	1,150
		Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	ь	Less: accumulated depreciation 10b		10c	
		Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	3,473,829
\neg	17	Accounts payable and accrued expenses			49,901
	18	Grants payable		18	· ·
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director,			
<u> </u>		trustee, key employee, creator or founder, substantial contributor, or 35%			
iabilities		controlled entity or family member of any of these persons		22	
3	23	Secured mortgages and notes payable to unrelated third parties		23	
		Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	64,167.	26	49,901.
\neg		Organizations that follow FASB ASC 958, check here			
8		and complete lines 27, 28, 32, and 33.			
١	27	Net assets without donor restrictions	3,069,077.	27	2,599,599.
äl	28	Net assets with donor restrictions		28	824,329.
힐		Organizations that do not follow FASB ASC 958, check here			
₽		and complete lines 29 through 33.			
6	29	Capital stock or trust principal, or current funds		29	
윓ㅣ	30	Paid in or capital surplus, or land, building, or equipment fund		30	
ASS	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances		Total net assets or fund balances		32	3,423,928.
-	33	Total liabilities and net assets/fund balances	3,757,438.	33	3,473,829.

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
	Total revenue (must equal Part VIII, column (A), line 12)		2	, 24	7.8	96.
2	Total expenses (must equal Part IX, column (A), line 25)	2		,51		
3	Revenue less expenses. Subtract line 2 from line 1	3		-26		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		,69		
5		5		,	J , Z	
6		6				
	Donated services and use of facilities	7				
7	Investment expenses	8				
8	Prior period adjustments	9				0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9				٠.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		2	,42	3 0	20
Dai	rt XII Financial Statements and Reporting	10		,44	3,5	20.
rai						
	Check if Schedule O contains a response or note to any line in this Part XII				Yes	
	Accounting method used to prepare the Form 990: Cash X Accrual Other				162	140
1			—			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.				х
23	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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 Scho	edule O.				
3а	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?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requir	ed audit	:			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

SCHEDULE A

Department of the Treasury

(Form 990)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

2024

OMB No. 1545-0017

Open to Public Inspection

Employer identification number

Internal Revenue Service

Name of the organization

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

Academy for Creating Enterprise 87-0641040 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33 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.) An organization organized and operated exclusively to test for public safety. See | section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (h) is the organization listed (I) Name of supported (v) Amount of monetary (vi) Amount of other (II) EIN (III) Type of organization In your governing document: (described on lines 1-10 organization support (see Instructions) support (see instructions) Yes above (see Instructions)) Total

Schedule A (Form 990) 2024 Academy for Creating Enterprise 87-0641 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	tion A. Public Support								
Gale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total		
	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	1868328.	3720818.	1719997.	1117264.	2140153.	10566560.		
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	1868328.	3720818.	1719997.	1117264.	2140153.	10566560.		
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)						903,674.		
	Public support. Subtract line 5 from line 4.						9662886.		
Sec	tion B. Total Support								
Gale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total		
7	Amounts from line 4	1868328.	3720818.	1719997.	1117264.	2140153.	10566560.		
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.	107,743.	282,905.		
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						10849465.		
12	Gross receipts from related activities,	etc. (see instructio	ns)			12			
13	First 5 years. If the Form 990 is for th	-				3 71 7	_		
_	organization, check this box and stop	p here							
	tion C. Computation of Publi								
	Public support percentage for 2024 (I					14	89.06 %		
	Public support percentage from 2023					15	91.80 %		
16a	33 1/3% support test - 2024. If the				14 is 33 1/3% or m	ore, check this bo			
	stop here. The organization qualifies		-						
b	b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box								
	and stop here. The organization qualifies as a publicly supported organization								
17a	7a 10% -facts-and-circumstances test - 2024. 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-circle						H		
18	Private foundation. If the organization	n did not check a l	box on line 13, 16;	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	s		

Schedule A (Form 990) 2024 Academy for Creating Enterprise Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	tion A. Public Support		· ·					
Gale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total	
	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions,							
	merchandise sold or services per-							
	formed, 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 bus-							
	iness under section 513							
+	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							
6	Total. Add lines 1 through 5							
73	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 enceed the greater of \$5,000 or 1% of the							
	amount on line 13 for the year							
	Add lines 7a and 7b							
	Public support. (Subtractific To from Inc 6.)							
	ction B. Total Support							
Gale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total	
9	Amounts from line 6							
	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties, and income from similar sources							
	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							
12	regularly carned on Other income. Do not include gain				-			
12	or loss from the sale of capital							
	assets (Explain in Part VI.)							
	Total support. (Add lines 9, 10c, 11, and 12.)							
14	First 5 years. If the Form 990 is for th	ie organization's fil	rst, second, third, f	ourth, or fifth tax y	year as a section 5	01(c)(3) organizatio	on,	
_	check this box and stop here							
	ction C. Computation of Publi							
	Public support percentage for 2024 (I	***		olumn (f))		15	96	
	Public support percentage from 2023					16	96	
	ction D. Computation of Inves							
	Investment income percentage for 20					17	96	
	Investment income percentage from					18	96	
198	33 1/3% support tests - 2024. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 17	7 is not	
	more than 33 1/3%, check this box ar	nd stop here. The	organization qualif	tes as a publicly s	upported organiza	tion		
b	b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and							
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	is a publicly suppo	rted organization		
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	, or 19b, check th	is box and see ins	tructions		

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.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(8) 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")? # "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.
- Sa. Did the organization add, substitute, or remove any supported organizations during the tax year? $\# \gamma_{es}$. 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).
- 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		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		$\overline{}$
	6		
	7		
	8		_
	9a		
	9b		
	9c		
	10a		
	10b		
dule	A /Ener	n 990)	2024

Pa	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a	\vdash	
	A family member of a person described on line 11a above?	11b	\Box	
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
e	grovide detail in Part VI.	11c	Ш	
sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization.	2		
-	non o. Type if oupporting organizations		Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). stion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3				
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	Conjuete Delow.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental			
	entity (see instructions).			_
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	$\overline{}$	
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
_	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	-		
	trustees of each of the supported organizations? If "Yes" or "No," provide details in "Part VI.	3a		
D	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	96-		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

	service in the service is a service in the service			
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying t	brust or	n Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must o			
Sect	ion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of pnor-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		
8ect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
ь	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
-	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 pnor-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
8ect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

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

Schedule A (Form 990) 2024

emergency temporary reduction (see instructions).

instructions).

	and the state of t		
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continu	ued)	
8ect	ion D - Distributions	Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported		
	organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive		
	(provide details in Part VI). See Instructions.	8	
9	Distributable amount for 2024 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Sect	ion E - Distribution Allocations (see Instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2024 (reason-			
	able cause required - exp(ain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2024			
_ a	From 2019			
b	From 2020			
c	From 2021			
d	From 2022			
e	From 2023			
f	Total of lines 3a through 3e			
g	Applied to under distributions of prior years			
h	Applied to 2024 distributable amount			
i	Carryover from 2019 not applied (see instructions)			
j	Remainder, Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2024 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2024 distributable amount			
С	Remainder, Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2025. Add lines 3 _j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2020			
b	Excess from 2021			
c	Excess from 2022			
d	Excess from 2023			
e	Excess from 2024			

Schedule A (Form 990) 2024

SCHEDULE D

(Form 990) (Rev. December 2024) 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

Employer identification number

Open to Public Inspection

Name of the organization

Academy for Creating Enterprise 87-0641040

Par	tΙ	Organizations Maintaining Donor Advised	d Funds or Othe	er Si	milar Funds or Ad	cour	nts. Complete if the	
		organization answered "Yes" on Form 990, Part IV, lin	e 6.					
			(a) Donor advised funds (t			b) Funds and other accounts		
1	Total	number at end of year						
2		gate value of contributions to (during year)						
3	Aggre	gate value of grants from (during year)						
4		gate value at end of year						
5		e organization inform all donors and donor advisors in v	writing that the asset	s hel	d in donor advised fund	is		
	are th	e organization's property, subject to the organization's	exclusive legal contr	ol?			Yes No	
6		e organization inform all grantees, donors, and donor a						
		aritable purposes and not for the benefit of the donor of						
	ımper	missible private benefit?					Yes No	
Par	t II	Conservation Easements. Complete if the org	anization answered	"Yes	on Form 990, Part IV,	line 7.		
1	Purpo	se(s) of conservation easements held by the organization	on (check all that app	pły).				
	$\dot{\Box}$	Preservation of land for public use (for example, recreat			Preservation of a histo	oncally	important land area	
	一	Protection of natural habitat	,	\equiv	Preservation of a certi		•	
	\equiv	Preservation of open space			•			
2	Comp	plete lines 2a through 2d if the organization held a qualif	ed conservation con	ntribu	tion in the form of a co	nserva	tion easement on the last	
		f the tax year.					Held at the End of the Tax Year	
а	Total	number of conservation easements				2a		
ь						2b		
c		per of conservation easements on a certified historic stru				2c		
d		er of conservation easements included on line 2c acqui				-		
		nistoric structure listed in the National Register				2d		
3		per of conservation easements modified, transferred, reli				$\overline{}$	during the tax	
	year							
4	-	per of states where property subject to conservation eas	ement is located					
5		the organization have a written policy regarding the per		pecti	on, handling of			
		ons, and enforcement of the conservation easements it					Yes No	
6		and volunteer hours devoted to monitoring, inspecting,					ements during the year	
							,	
7	Amou	int of expenses incurred in monitoring, inspecting, hand	ling of violations, and	d enf	orcina conservation ea	semen	ts during the year	
8	Does	each conservation easement reported on line 2d above	satisfy the requirem	ents	of section 170(h)(4)(B)(i)		
		ection 170[h](4)[B](ii)?			1 25 11 21		Yes No	
9		t XIII, describe how the organization reports conservation					d	
		ce sheet, and include, if applicable, the text of the footn						
		ization's accounting for conservation easements.	-					
Par	t III	Organizations Maintaining Collections of	Art, Historical	Trea	sures, or Other S	imila	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 95	8, not to report in its	reve	nue statement and bala	ance si	heet works	
	of art,	historical treasures, or other similar assets held for pub	lic exhibition, educa	tion,	or research in furtherar	nce of	public	
	servic	e, provide in Part XIII the text of the footnote to its finan	icial statements that	desc	ribes these items.			
ь	If the	organization elected, as permitted under FASB ASC 95	8, to report in its rev	enue	statement and balance	sheet	works of	
	art, hi	stoncal treasures, or other similar assets held for public	exhibition, education	n, or	research in furtherance	of pul	blic service,	
		de the following amounts relating to these items.	_					
		evenue included on Form 990, Part VIII, line 1					\$	
		ssets included in Form 990, Part X					\$	
2		organization received or held works of art, historical trea						
		flowing amounts required to be reported under FASB A						
а		nue included on Form 990, Part VIII, line 1	_				\$	
b		s included in Form 990, Part X					\$	

Sche	dule D (Form 990) (Rev. 12-2024) Academy	y Ior Creat	ting Ent	erprise	OH 6	S::I	87-06	4104	J Pa	age 2
	t III Organizations Maintaining C							(conti	nu c a)	
3	Using the organization's acquisition, accession	on, and other record	s, check any of	the following that r	nake sign	ificant u	ise of its			
	collection items (check all that apply).		_							
a	a Public exhibition d Loan or exchange program									
b	Scholarly research	•	Other_							
c	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain	n how they furth	er the organization	's exemp	t purpo:	se in Part	XIII.		
5	During the year, did the organization solicit or						_	_		_
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arrang reported an amount on Form 990, Par		te if the organiz	ation answered "Ye	es" on Fo	rm 990,	Part IV, li	ne 9, or		
1a	is the organization an agent, trustee, custodia	an, or other intermed	hary for contribu	itions or other asse	ets not in	cluded				
	on Form 990, Part X?						\square	Yes		No
b	if "Yes," explain the arrangement in Part XIII a									
								Amoun	t	
c	Beginning balance					1c				
	Additions during the year					1d				
	Distributions during the year					1e				
f	Ending balance					11				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for escrow	or custodial accour	nt liability	?	\square	Yes		No
ь	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds Complete if	the organization ans	wered "Yes" or	Form 990, Part IV	, line 10.					
		(a) Current year	(b) Prior year	r (c) Two years	back (d	n) Three y	ears back	(e) Fou	years	back
1a	Beginning of year balance									
b	Contributions									
	Net investment earnings, gains, and losses									
d	Grants or scholarships									
e	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
	End of year balance									
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g, colum	n (a)) held as:						
а	Board designated or quasi-endowment		96							
b	Permanent endowment	96								
c	Term endowment	96								
	The percentages on lines 2a, 2b, and 2c shou	uld equal 100%.								
3a	Are there endowment funds not in the posses	ssion of the organiza	tion that are he	d and administere	d for the					
	organization by:								Yes	No
	(i) Unrelated organizations?							3a(ī)		
								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizat	tions listed as requir	ed on Schedule	R?				3b		
4	Describe in Part XIII the intended uses of the		wment funds.							
Par	t VI Land, Buildings, and Equipm	ent								
	Complete if the organization answered	d "Yes" on Form 990), Part IV, line 11	a. See Form 990, I	Part X, lin	e 10.				
	Description of property	(a) Cost or o	ther (b)	Cost or other	(c) Acc	umulate	ed	(d) Boo	k valur	e
_		basis (investr	nent) b	asis (other)	depre	eciation				
	Land									
b	Buildings									
c	Leasehold improvements									
d	Equipment									
e	Other									
Total	. Add lines 1a through 1e. (Column (d) must er	gual Form 990, Part	X. line 10c. colu	ımn (B))						0.

Schedule D (Form 990) (Rev. 12-2024)

Part VII Investments - Other Securities			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	1-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
_(C)			
(D)			
(E)			
(F)			
(G)			
(H) Total (Col. (h) must as all Farm 200, Bart V, Kee 10, col. (B1)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990 Part IV line	11c See Form 990 Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	1-of-vear market value
	(0)	(0)	,
(1)		1	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets		•	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (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	
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, col			
Liability for uncertain tax positions. In Part XIII, provide constraints in builds for uncertain tax positions under		-	
organization's liability for uncertain tax positions under	FASE ASC 740. Check h	iere ii trie text of the foothote has been pro	Wided in Part All

SCHEDULE F (Form 990) (Rev. December 2024)

Department of the Treasury

Internal Revenue Service

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.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

Academy for Creating Enterprise 87-0641040

Part I 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? 2 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.) (c) Number of (d) Activities conducted in the region (b) Number of (e) if activity listed in (d) (a) Region (f) Total 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 Antigua & Barbuda, Program services Chapter Aruba, Bahamas, o support Education/training 367,181. East Asia and the Pacific Australia, Brunei, Burma, Program services Chapter Cambodia. 0 0 support Education/training 263,789. South America Argentina, Bolivia, Brazil, Chile, Program services Chapter Columbia, Ecuador, 0 0 support 776,092. Education/training Sub Saharan Africa Angola, Benin, Botowana, Burkina Program services Chapter Faso 0 0 support Education/training 52,813.

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

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Schedule F (Form 990) (Rev. 12-2024)

1,459,875,

1,459,875.

٥.

and 3b)

3 a Subtotal

c Totals (add lines 3a

b Total from continuation sheets to Part I Part II 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 recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

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)
		Central America						
		and the Carribean	Program services	367,181.		٥.		
		East Asia and the						
			Program services	263,789.		٥.		
		South America	Program services	776,092.		0.		
		Sub Saharan						
		Africa	Program services	52,813.		0.		
			 recognized as charities by the t or counsel has provided a sect	-	_			

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a	tax
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	

3 Enter total number of other organizations or entities

Schedule F (Form 990) (Rev. 12-2024)

Schedule F (Form 990) (Rev. 12:2024) Academy for Creating Enterprise 87-0641040

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, Inc 16.

Part III can be duplicated if additional space is needed.											
(a) Type of grant or assistance	(b) Region	(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)				

Schedule F (Form 990) (Rev. 12-2024)

Schedule F (Form 990) (Rev. 12:2024) Academy for Creating Enterprise 87-0641040 Page 4 Part IV Foreign Forms Was the organization a U.S. transferor of property to a foreign corporation during the tax year? μ " γ_{es} ." 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) 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 Did the organization have an ownership interest in a foreign corporation during the tax year? μ "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) 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 Yes X No Fund (see the Instructions for Form 8621) Did the organization have an ownership interest in a foreign partnership during the tax year? $\mu = y_{ex}$. 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)

the Instructions for Form 5713; don't file with Form 990)

Did the organization have any operations in or related to any boycotting countries during the tax year? # "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Schedule F (Form 990) (Rev. 12-2024)

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Schedule F Part I Line 2	
The Academy works with organizations established in other countries	
that it has helped to create. Funds provided to these organizations	
are based on budgeted needs approved by the Academy's board. The	
that it has helped to create. Funds provided to these organizations are based on budgeted needs approved by the Academy's board. The Academy regularly visits and evaluates these organization's operations.	
noduciny regularly visits and evaluates these organization s operations.	

SCHEDULE J (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

P	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
c	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) (Rev. 12-2024)

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS/ compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(I)-(D)	ın column (B)
		(ī) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Robert Heyn	0	157,153.	0.	0.	0.	2,162.	159,315.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
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Schedule J (Form 990) (Rev. 12-2024)

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Schedule J (Form 990) (Rev. 12:2024) Academy for Creating Enterprise	87-0641040	Page 3
Part III Supplemental Information		
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part II.	part for any additional information.	

Schedule J (Form 990) (Rev. 12-2024)

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1515-0017

2024

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

Inspection Employer identification number

	Academy for	87-	87-0641040					
Par	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(Method of a noncash contri		-	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Secunties - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Secunties - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts			47.500				
25	Other (Other)	X	0	47,528.	Estimated	Ialr	va.	Lue
26	Other ()							
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organic							
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29				_
							Yes	No
30a	During the year, did the organization receive by	•						
	must hold for at least 3 years from the date of							v
	exempt purposes for the entire holding period?					30a		X
	b if "Yes," describe the arrangement in Part II.							
	Does the organization have a gift acceptance p			•	ions?	31	\vdash	X
32a	Does the organization hire or use third parties		-					-
						32a		X
	If "Yes," describe in Part II.	min comme deside		describes and complete and	demand .			
33	If the organization didn't report an amount in c	oiumn (c) fo	r a type of property	ror which column (a) is chec	Ked,			
	describe in Part II.							

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

Schedule M (Form 990) 2024

Schedule N	(Form 990) 2024 Academy	for Creating	Enterprise	87-0641040 Page 2
Part II	Supplemental Information is reporting in Part I, column (b), th this part for any additional informa-	. Provide the information ie number of contribution	required by Part I, lines 30b, 32b, and 33, s, the number of items received, or a comi	
	·			

SCHEDULE O (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Academy for Creating Enterprise	Employer identification number 87-0641040
Form 990, Part I, Line 1, Description of Organization Miss	
create more abundant lives.	,10111
oreace more abandanc rives.	
Form 990, Part III, Line 4a, Program Service Accomplishmen	ta:
In 2024, chapter programs operated in the following country	
Philippines, Mexico, Brazil, Peru, Venezuela, Bolivia, Ecu	
Colombia, Ghana, Nigeria, Argentina, Paraguay, Uruguay, Ch	
Guatemala and Honduras.	
The following numbers represent statistics for the year 20	24:
- Start Now training sessions held - 652	
- Chapter membership - 26,751	
- New Income Generating Activities (new small businesses)	formed by
chapter members in 2024 - 10,165	
- The Annual Academy Awards in each Area (\$86,788 spent in	all areas)
celebrates the achievements of members throughout the year	
Form 990, Part VI, Section B, line 11b:	
A draft of the Form 990 is provided to each board member p	rior to filing.
Form 990, Part VI, Section B, Line 12c:	
Board members sign a conflict of interest statement when a	
board and are reminded to identify any conflicts during bo	ard meetings.
Form 990, Part VI, Section B, Line 15:	
Board performs market salary studies to determine compensa	
positions. Board performs market salary studies to determi	ne compensation
for all positions.	
Form 990, Part VI, Section C, Line 19:	
Governing documents are available upon request just as For	me 990
Governing documents are available upon request just as ron	ms 330.