# EXTENDED TO NOVEMBER 15, 2023 Return of Organization Exempt From Income Tax

-504(-) 507 . . **.** . . OMB No. 1545-0047 2022

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			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Co	-					
Department of the Treasury			Do not enter social security numbers on this form as it Go to www.irs.gov/Form990 for instructions and the	-		Open to Public			
	al Revenue		ar year, or tax year beginning and en			Inspection			
				ung	D. Engelsung interstitie				
B C a	B Check if applicable: C Name of organization D Employer identifica								
	Address change	HAPP	YBOTTOMS						
	Name change	Doing b	usiness as		27-242354	0			
	Initial  return  Final			om/suite	E Telephone number	2067			
	⊥return/ termin-		W. 79TH STREET		(855)479-				
	ated Amendeo		own, state or province, country, and ZIP or foreign postal code AS CITY, MO 64114		G Gross receipts \$	1,983,022.			
	_lreturn ]Applica-		nd address of principal officer: SUSAN BELGER ANGULO		H(a) Is this a group ret for subordinates?				
	_ltion pending		• 79TH STREET, KANSAS CITY, MO 641	14	H(b) Are all subordinates inc				
<u> </u>	av.even		<b>X</b> 501(c)(3) $\Box$ 501(c) ( ) (insert no.) $\Box$ 4947(a)(1) or [	527		ist. See instructions			
	Vebsite		HAPPYBOTTOMS • ORG	021	H(c) Group exemption				
			X Corporation Trust Association Other	I Year (		State of legal domicile: MO			
		Summary				otato or logar dormono,			
	<b>1</b> B	rieflv describ	e the organization's mission or most significant activities: $ t MISSIC$	DN:					
Ce			TE DIAPER NEED IN THE KANSAS CITY CO		ITY.				
Activities & Governance	<b>2</b> C	heck this bo	x if the organization discontinued its operations or disposed	l of more	than 25% of its net asse	ets.			
ver	<b>3</b> N	umber of vot			3	13			
ğ	<b>4</b> N	umber of ind	nber of independent voting members of the governing body (Part VI, line 1b)						
Š		otal number	13						
/itie				2057					
cti	7a ⊺o	otal unrelated	of volunteers (estimate if necessary) d business revenue from Part VIII, column (C), line 12		7a	0.			
◄			business taxable income from Form 990-T, Part I, line 11			0.			
					Prior Year	Current Year			
đ	<b>8</b> C	ontributions	and grants (Part VIII, line 1h)		1,787,327.	1,909,315.			
nu	<b>9</b> P	rogram servi	ce revenue (Part VIII, line 2g)		63,301.	70,700.			
Revenue	<b>10</b> In	vestment ind	come (Part VIII, column (A), lines 3, 4, and 7d)		73.	1,630.			
æ	<b>11</b> O	ther revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-30,764.	-52,633.			
	<b>12</b> To	otal revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,819,937.	1,929,012.			
	<b>13</b> G	rants and sir	nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	<b>1</b> 4 B	enefits paid t	to or for members (Part IX, column (A), line 4)		0.	0.			
ŝ	<b>15</b> S	alaries, other	r compensation, employee benefits (Part IX, column (A), lines 5-10)		584,323.	611,527.			
xpenses	<b>16a</b> P	rofessional fu	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) <u>85,339</u>		0.	0.			
ed A	b To	otal fundraisi	ing expenses (Part IX, column (D), line 25) 85,339	).					
ш			es (Part IX, column (A), lines 11a-11d, 11f-24e)		1,177,423.	1,128,932.			
	<b>18</b> To	otal expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,761,746.	1,740,459.			
		evenue less	expenses. Subtract line 18 from line 12		58,191.	188,553.			
or Ces				Beg	ginning of Current Year	End of Year			
Net Assets or Fund Balances	<b>20</b> To	otal assets (F	Part X, line 16)		1,532,268.	2,111,980.			
t As d B	<b>21</b> To	otal liabilities	(Part X, line 26)		30,402.	481,163.			
Eun	<b>22</b> N		fund balances. Subtract line 21 from line 20		1,501,866.	1,630,817.			
		Signature							
Unde	er penalti	es of perjury,	I declare that I have examined this return, including accompanying schedules an	nd stateme	nts, and to the best of my	knowledge and belief, it is			
true,	correct,	and complete.	Declaration of preparer (other than officer) is based on all information of which	n preparer	has any knowledge.				
					1				

Sign	Signature of officer	Date								
Here	SUSAN BELGER ANGULO, EXECU									
	Type or print name and title									
	Print/Type preparer's name	Check PTIN								
Paid	JONATHAN P MCKINZIE	/23 self-employed P01326474								
Preparer	Firm's name EMERICK AND COMPA	NY PC		Firm's EIN 43-1855764						
Use Only	Firm's address 4520 MADISON AVE,	STE G								
	KANSAS CITY, MO 64111 Phone no. (816)									
May the II	May the IRS discuss this return with the preparer shown above? See instructions									
	000									

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

	1 990 (2022) HAPPYBOTTOMS	27-2423540	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		Х
1	Briefly describe the organization's mission:		
	HAPPYBOTTOMS' MISSION IS TO COLLABORATE WITH COMMUNITY EMPOWER, CONNECT AND IMPACT LOW INCOME FAMILIES BY ALLI		<b>.</b>
	NEED IN THE KANSAS CITY COMMUNITY. OUR VISION IS TO POS		
	THE MENTAL, PHYSICAL AND FINANCIAL STABILITY OF A FAMIL		
2	Did the organization undertake any significant program services during the year which were not listed on the		
2	prior Form 990 or 990-EZ?		XNo
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	s?Yes	XNo
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services,		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o	thers, the total expenses, ar	nd
	revenue, if any, for each program service reported.	70	077
4a	(Code:) (Expenses \$ 1,537,349. including grants of \$) (R HAPPYBOTTOMS IS KANSAS CITY'S ONLY DIAPER BANK. IN 2022 DISTRIBUTED 2,483,657 DIAPERS TO 12,793 CHILDREN THROUG	2, HAPPYBOTTOM	
	MORE THAN 53 SOCIAL SERVICE AGENCIES AND 5 HOSPITAL PAR		01
	PARTNER DISTRIBUTION MODEL HAS A RIPPLE EFFECT ON FAMIL		ING
	ACCESS TO WRAP AROUND SERVICES THAT WILL HELP LIFT THE		
	THROUGH HAPPYBOTTOMS' CORE AGENCY DISTRIBUTION PROGRAM	. FAMILIES ARE	
	PROVIDED 50 DIAPERS OR 30 TRAINING PANTS PER CHILD PER	-	
	GOVERNMENT PROGRAMS (SNAP, WIC, MEDICAID) DO NOT COVER		
	HAPPYBOTTOMS STEPS IN TO ALLEVIATE DIAPER NEED FOR CHII	-	
	FAMILIES LIVING WITH HOUSEHOLD INCOMES LESS THAN 150% (	OF FEDERAL	
	POVERTY LEVEL. HAPPYBOTTOMS' MONTHLY ONGOING PROGRAM DI	ISTRIBUTED	
4b	(Code:) (Expenses \$ including grants of \$) (R	evenue \$	
4c	(Code:) (Expenses \$ including grants of \$) (R	evenue \$	
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses 1,537,349.	1	
		Form <b>9</b>	<b>90</b> (2022
232002	2 12-13-22 SEE SCHEDULE O FOR CONTINUATION		
_	2		
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гош	990	(2022)

 Form 990 (2022)
 HAPPYBOTTOMS

 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		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			37
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			77
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
-	Schedule D, Part III	8		<u> </u>
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?			v
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	v	
44	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,	11a	х	
h	Part VI			
b		11b	х	
c	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total		- 11	
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			_
	complete Schedule G, Part III	19		X
	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		Ļ
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	0000	Х
232003	12-13-22	Form	990	(2022)

232003 12-13-22

Form	990	(2022)
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 Form 990 (2022)
 HAPPYBOTTOMS

 Part IV
 Checklist of Required Schedules (continued)

22       Dit the organization report more than 55,000 of grants or other assistance to or for domestic individuals on Part X, four M, kine 27, "Yes," complete Schedule / A v S, about componation of the organization's current and former office, directors, trustes, key employee, and highest compensation of the organization 2000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule / M No." go to line 23e.       X         24a       Did the organization have at a excerned bond issue with an outblanding principal amount of more than \$100,000 as of the particulation invest any proceeds of tax exampt bonds beyond a temporary period exception?       24a         25       Did the organization invest any proceeds of tax exampt bonds beyond a temporary period exception?       24d         26       Section 501(26), 501(26), 401(26),				Yes	No
23         Did the organization arswer "Yes" to Far WI, Section A, line 3, 4, or 5, about compensation of the organization is current and former differs, direction, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.         23         X           24a         Did the organization have a tax exempt bond issue with an outstanding phicipal amount of more than \$100,000 as of the last dig of the year, frat was insued after December 31, 2002? If "Yes," answer lines 240 through 244 and complete Schedule K. If Yao, "go to line 256         24a         X           24b         Did the organization maintain an eacrow account of the than a networding eacrow at any time during the year?         24d         X           25a         Section 501(6)(5b, 501(6)(4), and 501(26) organization. Did the organization genization and the rangeqoft in an excess benefit transaction has not been reported on any of the organization. The angeqoft in an excess benefit transaction has not been reported on any of the organization genization angenization and the transaction has not been reported on any of the organization gives the xet or bords outstanding at any ture during the year?         24d         25b         X           25 Did the organization aver that it rengaged in an excess benefit transaction has not been reported on any of the organization genization approx by and a target of an excess benefit transaction has not been reported on any of the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributors? If "Yes," complete Schedule I, Part II         25b         X           26 Did the organization aproto is a buinses	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officiers, directors, trustees, key employees, and highest compensated employees?     # "Yes," complete       24a     Did the organization have a tax excempt bond issue with an oxid-tanding principal amount of more than \$100,000 as of the last day of the year, that was issued alter December 31, 2002? If "Yes," answer lines 2d bitrough 2d and complete     2da       24a     Did the organization invest any proceeds of tax excempt bonds beyond a temporary period exception?     2da       24b     Did the organization mixet any nonceeds of tax excempt bonds excert any time during the year?     2dd       25a     Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Dut the organization engage 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 is prior year, and that the transaction has not been reported on any of the organization is prior year, and that the transaction has not been reported on any of the organization is prior year, and that the transaction has not been reported on any of the organization is prior year, and that the transaction has not been reported on any of the organization is prior year, and that the transaction has not been reported or a prior to transaction to arrow or there of transition encodes parts that excerption to rounder, substantial contributor or a 35% controlled entry fractional matchina and the disputition or any organization is prior year, and that the transaction here on a prior to the assistant and the disputition prior of an assistant and the disputition or a spice been in the event or former offer. (inclocit, trustee, key employee, creator or founder, usbtantial contributor, or 35% controlled entry foundual desorted in line 28a or 28a? If "Yes," complete Schedule L, Part II. <tr< td=""><td></td><td></td><td>22</td><td></td><td>X</td></tr<>			22		X
Schedule /         2a         X           A Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the schedule K, H*No,* go to line 25a.         X           b Did the organization mantain an escow account other than a refunding escow at any time during the year to detease any tax-exempt bonds?         24b         X           c Did the organization mantain an escow account other than a refunding escow at any time during the year to detease any tax-exempt bonds?         24d         X           25 Section 501(26), 501(cl4), 401(cl4), 400 (cl4), 500 (cl4), 500 (cl4), 500 (cl4), 400 (cl4), 500 (cl4), 400 (cl4), 400 (cl4), 500 (cl4), 400	23				
24a Did the organization have a taxe exempt bond issue with an outstanding principal enount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K, If 'No,' to b the 25a.       24a       X         2 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24a       X         2 Did the organization invest any proceeds of tax-exempt bonds outstanding at any time during the year to defease any tax-exempt bonds?       24d       24d         2 Section \$01(c)(3), 501(c)(4), and \$501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disputility even?       25a       X         2 Bid the organization neares any on the organizations prior Forms 900 or 900-E27. If 'Yes,' complete Schedule L, Part I       25a       X         2 Bid the organization prove any amount on Part X, line 5 or 22, for receivables tomor payables to any current or former officer, director, trustes, key employee, creator or founder, substantial contributor, or 35% controlled entity or founder of theory of theory againstatence to any current or former officar, director, trustes, key employee, creator or founder, substantial contributor or anyolyce thereol or anny member of any of these persons? If 'Yes,' complete Schedule L, Part I       26a       X         2 Bid the organization proves again or othen assistance to any current or former officar, director, trustes, key employee, creator or founder, substantial contributor? If 'Yes,' complete Schedule L, Part I       26a       X         2 Bid the organization nevelse theory of these pers					v
Is at day of the year, that was issued after Desember 31, 2002? If "Yes," answer lives 24b through 24d and complete       24a       X         b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?       24b       24b         c Did the organization numerita in an encome account other than a refunding secone at any time during the year to detease any tax-esempt bonds?       24d       24b         d Did the organization anartatin an encome account other than a refunding secone at any time during the year to detease any tax-esempt bonds?       24d       24d         25 Section 507(c)(3). 507(c)(4). and 507(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I       25a       X         25 Did the organization export any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or gards controlled entry of any immember of any of these person? If "Yes," complete Schedule L, Part I       26b       X         27 Did the organization provide a grant or thanily statistic contributed or gard statistic controlled. Part IV       26b       X         28 Was the organization export than 250 c000 in non cash contribution? If "Yes," complete Schedule L, Part IV       28a       X         29 A A current or former officer, director, trustee, key employee, creator or founder, or substantial contribution? If "Yes," complete Schedule L, Part IV       28a       X	04-		23		
Schedule K. If Yeb, "go to fine 25a       24a       X         D Did the organization meantain an escrow account other than a refunding scrow at any time during the year to defease any tax exempt bonds?       24d       24d         C Did the organization matrix as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization argues in an excess benefit transaction with a disqualified person turing the year?       25a       X         25a       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations plor Forms 900 or 909(E2? If "Yes," complete Schedule L, Part I       25a       X         25b       Did the organization report any amount on Part X, line 5 or 22, for reevables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%       26       X         27       Did the organization report any amount on Part X, line 5 or 22, for reevables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%       26       X         27       Did the organization report as grant selection committee member, or to a 35% controlled et theor of namily member of any of these persons? If "Yes," complete Schedule L, Part I       27       X         28       Was the organization neave theored or family member of any of these persons? If "Yes," complete Schedule L, Part I       28a       X	24a				
b       Define organization minest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b         c       Did the organization maintain an excrow account other than a refunding excrow at any time during the year to defease any tax-exempt bonds?       24c         d       Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d         258       Section 501(c)(3), 501(c)(4), 406(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction wat a disqualified person during the year?       24d         250       b is the organization access benefit transaction with a disqualified person that prove any anot the magnet in an excess benefit transaction wat a disqualified person that prove any anot the regularization spitor forms 900 or 990-E27 if "Yes," complete Schedule L, Part I       25b         260       Did the organization acre that the rengaged in an excess benefit transaction with a disqualified person of spitor any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 30% controlled entity or any member of any or these person? If "Yes," complete Schedule L, Part II       26b       X         27       Did the organization acre or the indepice thereol, a grant selection committee member, or to a 35% controlled entity of one or more individual discretor instance any individual discretor instance any individual discretor instance and incretor instance and incretor instance and incretor instance and incretor instance instance any individual discretor instance and contrib			242		x
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?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?       25a         25a       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?       11% complete 50-601(c), 17% complete 50-601(c), 17	ь				
any tax-exempt bonds?       24d         d Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disputalified person during the year? If "Yes," complete Schedule L, Part I       25a         25b       Did the organization aware that it engage in an excess benefit transaction with a disputalified person in a prior year, and that the transaction run and excess benefit transaction with a disputality of the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or annily member of any of these persons? If "Yes," complete Schedule L, Part I       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity including an employee thereof or family member of any of these persons? If "Yes," complete Schedule L, Part II       28       X         28       Was the organization receive more fram 325, 000 in non-cash contributions of an 280 or 390.527 If "Yes," complete Schedule L, Part II       28       X         28       X       Did the organization receive more than 325, 000 in non-cash contributions? If "Yes," complete Schedule L, Part II       28       X         29       Did the organization receive orributions of arthistorial					
d Did the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year?       24d         26 Section 501(63), 501(64), and 501(62) organizations. Did the organization enages in a access benefit transaction with a disqualified person during the year? (if 'Yes,' complete Schedule L, Part I       25a         b is the organization access the ency total on any of the organizations prior Forms 800 or 990-E27 (I' 'Yes,' complete Schedule L, Part I       25a         27 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of including an enployee thereof, a grant selection committee member, or to a 35% controlled entity (including an enployee thereof) a grant selection committee member, or the selection Schedule L, Part I       26       X         28       Was the organization reporties 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 enployee) encoditons, and exceptions):       27       X         28       Was the organization report barks and the second of these persons? (''Yes,' complete Schedule L, Part IV):       28a       X         29       A arrant or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If ''Yes,' complete Schedule L, Part IV.       28a       X         20       Did the organization receive them assist, or dress endoring, in substantial contributors? If 'Yes,' complete Schedule			24c		
transaction with a disqualified person during the year? # "Yes," complete Schedule L, Part I       25a       X         b is the organization apport any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26a       X         27       D dt the organization peort any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         28       Was the organization party to a business transaction with one of the following parties (see the Schedule L, Part IV)       26a       X         28       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV       28a       X         28       D at the organization receive nort bindividual described in line 28a 'I "Yes," complete Schedule L, Part IV       28a       X         29       X       D d the organization receive nort bindividual described as separate from the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV       28a       X         30       D d the organization neceive ontrobitions of art, historical treasures, or other similar	d		24d		
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 spior Forms 900 or 980-E27 (ff "Yes," complete Schedule L, Part I       250         26       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or tamily member of any of these persons? If "Yes," complete Schedule L, Part II       28       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II       28       X         28       Was the organization receive contributions and exceptions):       a current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV       28       X         29       Did the organization receive contributions of ant, historical treasures, or other similar assets, or qualified memory in the set set of the organization receive contributions of ant, historical treasures, or other similar assets, or qualified consentation engines to shall a soft and the organization receive contributions of ant, historical treasures, or other similar assets? If "Yes," complete Schedule N, Part I       31       X         30       Did the organization neceive contributions of ant, histori	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2?       If 'Yes,' complete Schedule L, Part I       Z50       X         Dott the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of natily member of any of these persons? If 'Yes, ' complete Schedule L, Part II       Z6       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee three/or, agrant selection committee member, or to a 35% controlled entity (including an employee) terreor) of raining member of any individual described in instructions for applicable filing thresholds, conditions, and exceptions; a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV       Z8         28       Da the organization receive more than 255,000 in non-cash contributions? If 'Yes,' complete Schedule L, Part IV       Z8         29       Did the organization receive more than 255,000 in non-cash contributions? If 'Yes,' complete Schedule N, Part I       31         31       Did the organization receive more than 255,000 in non-cash contributions? If 'Yes,' complete Schedule N, Part I       31         32       Did the organization receive more than 255,000 in non-cash contributions? If 'Yes,' complete Schedule N, Part I       31         33       Did the organization oneolor		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
Schedule L, Part I       25b       X         28 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or folder, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? II "Yes," complete Schedule L, Part II       26       X         27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? II "Yes," complete Schedule L, Part IV, instructions for applicable fling thresholds, conditions, and exceptions):       27       X         28 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? II       28a       X         29 Did the organization nevelve contributions of art, historical treasures, or there similar assets, or qualified conservation contributions? II "Yes," complete Schedule L, Part IV.       28a       X         20 Did the organization receive contributions of art, historical treasures, or there similar assets, or qualified conservation contributions? II "Yes," complete Schedule M. Part II       30       X         31 Did the organization receive contributions of art, historical treasures, or there similar assets? II "Yes," complete Schedule M. Part II.       31       X         33 Did the organization neutry disregarded as separate from the organization meclewe contribuitons or art, historical dessexplanting.	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
26       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contribution, or 35% controlled entity of nating member of any of these persons? If 'Ysg, ' complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contribution or a 35% controlled entity (including an employee thrend) or family member of any of these persons? If 'Ysg, ' complete Schedule L, Part II.       26       X         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV.       28       28       X         28       Mas the organization receive contributions or more individual ascribed in line 28a? If 'Ysg, ' complete Schedule L, Part IV.       28       28       X         29       Did the organization receive more than 252,000 in non-cash contributions? If 'Ysg, ' complete Schedule L, Part IV.       28       X         20       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Ysg, ' complete Schedule M, Part I       20       X         30       Did the organization neceive and SSChedule M       30       X         31       Did the organization receive contributions of art, historical treasures, or other similar assets? I' 'Ysg, ' complete Schedule N, Part I		that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%       28       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>II'</i> 'Yes,' complete Schedule L, Part II       27       X         28       Was the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>II'</i> 'Yes,' complete Schedule L, Part IV       28       X         29       Did the organization provide control of one or more individuals and/or organization described in line 28a or 28br? <i>II'</i> 'Yes,' complete Schedule L, Part IV       28a       X         29       Did the organization receive control tons of an, intorical treasures, or other similar assets, or qualified conservation contributions? <i>II'</i> 'Yes,' complete Schedule M       29       X         20       Did the organization receive on that 325,000 in non-cash contributions? <i>II'</i> 'Yes,' complete Schedule M. Part I       30       X         31       X       Did the organization receive contributions of an, thistorical treasures, or other similar assets, or qualified conservation contributions? <i>II'</i> 'Yes,' complete Schedule M. Part I       31       X         32       Did the organization neceive any tansefer more than 25% of Its net assets? <i>II'</i>		,	25b		X
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III       27       X         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV. instructions for applicable finiting thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         28       b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than 255,000 in non-cash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive more than 255,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization receive more than 255,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 256% of the net assets? If "Yes," complete Schedule N, Part I	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, or family member of any of these persors? If "Yes," complete L, Part III.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV. instructions for applicable filing thresholds, conditions, and exceptions):       a Current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         2 A tarinity member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28a       X         2 Did the organization receive more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule N, Part IV.       28c       X         2 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       30       X         3 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       30       X         3 Did the organization ill (see Schedule M       30       X       31       X         3 Did the organization receive contributions of an entity diregarded as separate from the organization under Regulations sections 30.77.70.74 m/Yes," complete Schedule R, Part II       31       X         3 Did the organization receive any payment from or engage in any transaction					v
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? // "Yes," complete Schedule L, Part II.     Z     X       8     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, frustee, key employee, creator or founder, or substantial contributor? // *     28a     X       a A current or former officer, frustee, key employee, creator or founder, or substantial contributor? // *     28b     X       c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? // *     28b     X       29     Did the organization receive more than \$25,000 in non-cash contributions? // **es," complete Schedule L, Part IV     29     X       30     Did the organization receive more than \$25,000 in non-cash contributions? // **es," complete Schedule M     29     X       31     Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // **es," complete Schedule N, Part I     31     X       32     Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // **es," complete Schedule N, Part II.     33     X       33     Did the organization related to any tax-exempt or taxable entity? // **es," complete Schedule R, Part II.     34     X       34     Was the organization	07		26		_A
entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II       27       X         28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable ling thresholds, conditions, and exceptions):       a       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If       Yes, "complete Schedule L, Part IV       Zea       X         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       Zea       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If       Yes," complete Schedule L, Part IV       Zea       X         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         30       Did the organization receive and than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       31       X         31       Did the organization receive and than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II       30       X         32       Did the organization receive and the anoty associate and ease operations? If "Yes," complete Schedule N, Part II       31       X         33       Did the organization own 100% of an entity disregarded as separate from the assets? If 'Yes," compl	27				
28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):       28       X         28       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #       28a       X         28       X       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? #       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? # "Yes," complete Schedule L, Part IV       29       X         20       Did the organization receive contributions of at, historical treasures, or other similar assets, or qualified conservation contributions? # "Yes," complete Schedule M       30       X         31       Did the organization elevies contributions of at, historical treasures, or other similar assets? # "Yes," complete Schedule N, Part I       31       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections \$31.7701-3? # "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1       33       X         33       Did the organization receive any taxement or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1       34       X         34       Was the organization awa controlled entity within the meaning of section			27		x
instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? <i>If</i> "Yes," complete Schedule L, Part IV B A family member of any individual described in line 28a? <i>If</i> "Yes," complete Schedule L, Part IV B A family member of any individual described in line 28a? <i>If</i> "Yes," complete Schedule L, Part IV B Id the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," complete Schedule M D Id the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M D Id the organization seli, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II D Id the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," complete Schedule <i>R</i> , Part I W as the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," complete Schedule <i>R</i> , Part II, III, or IV, and Part V, Ine 1 C Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purpose? <i>If</i> "Yes," complete Schedule <i>R</i> , Part V Statements Regarding Other IRS Filings and Tax Compliance Check If Schedule O complete Schedule O in the applicable Check If Schedule O contains a response or note to any line in this Part V	28		21		- 25
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #       28a       X         b A family member of any individual described in line 28a? # "Yes," complete Schedule L, Part IV       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? #       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? # "Yes," complete Schedule M       29       X         20       Did the organization receive more than \$25,000 in non-cash contributions? # "Yes," complete Schedule M       29       X         31       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? # "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? # "Yes," complete Schedule N, Part I       31       X         33       Did the organization neared to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       33       X         34       Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a       Did the organization neave than 25% of the activities through an entity that is not a related organization       36       X         35b       Sistements Dif	20				
*Yes,* complete Schedule L, Part IV       28a       X         b A family member of any individual described in line 28a? /// *Yes,* complete Schedule L, Part IV       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? ///       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? /// *Yes,* complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // *Yes,* complete Schedule M       20       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? /// *Yes,* complete Schedule N, Part I       30       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? // *Yes,* complete Schedule R, Part I       31       X         33       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         34       Was the organization and a a partnership for federal income tax purposes? // *Yes,* complete Schedule R, Part V, line 2       35b       35b         35       Did the organizations. Did the organization make any transfers to an exempt non-charitable related organization?       37       X         36       Section 501(c)(3) organizations. Did th	а				
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If       "Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization nealed to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Ime 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization       37       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       37       X </td <td></td> <td></td> <td>28a</td> <td></td> <td>х</td>			28a		х
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If       28c       X         29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29 X         20 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       30 X         31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       31 X         32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31 X         33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33 X         34 Was the organization nelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34 X         35a Did the organization. ND dt he organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       35a X         36 E Section 501(C)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36 X         37 Did the organization complete Schedule Q and provide explanations on Schedule O for Part VI, lines 115 and 19?       37 X         38 Did the organization	b		28b		Х
29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization complete Schedule O to Part V, line 2       36       X         38       Did the organization complete Schedule O to Part V, line 2       36       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership fo					
30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       35a       X         35a       Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization complete Schedule Q and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule Q and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         37       Did the organization complete Schedule Q and provid		"Yes," complete Schedule L, Part IV	28c		Х
contributions? /f "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? /f "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? /f "Yes," complete Schedule N, Part I       32       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? /f "Yes," complete Schedule N, Part I       32       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? /f "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? /f "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       34       X         35a       Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       36       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         39       Did the organization complete Schedule O and provide explanations on Sch	29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701.3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       35a       X         36a       No the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         37       Did the organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       X       Net: All Form 990 filers are required to complete Schedule O       38       X         39       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 pu	30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         35       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       37       X         36       Did the organization complete Schedule R, Part V, line 2       36       X         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         39       Did the organization complete Schedule O       Schedule O contains a response or note to any line					
Schedule N, Part II       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       35a         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       36       X         37       Did the organization complete Schedule 0 and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       1a       11       11         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       11       11       10       12         b       Enter the number of Forms W-2G included	31		31		X
33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       36       X         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       X       Yes."       Note: All Form 990 filers are required to complete Schedule O       7       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       1a       11       1       1         18       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1b       0       1       1       1	32				77
sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i> 34 Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part II, III, or IV, and</i> Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b <i>If</i> "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)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> 37 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included 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?		,	32		X
34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Note: All Form 990 filers are required to complete Schedule O       38       X       X         Image: Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       Yes       No         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       11       11       1	33				v
Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       Jf "Yes," to main a controlled entity within the meaning of section 512(b)(13)?       Jf "Yes," complete Schedule R, Part V, line 2       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       Jf "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Note: All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       Yes       No         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       11       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to ve	24	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		
35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> 35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         39       Did the organization of Form 1096. Enter -0- if not applicable       1a       11       1         4       11       1b       0       0       1       1       1         4       Did the organization comply with backup withholding rules for reportable payment	34		24		x
b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         9       Note: All Form 990 filers are required to complete Schedule O       38       X         9       Part V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       11       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1a       1a       11       1b       0	352				
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Note: All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       1a       11       1         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       11       1       1         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1a       1b       0       1 </td <td></td> <td></td> <td>a</td> <td></td> <td></td>			a		
36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       36       X         38       Did the organization complete Schedule R, Part V, line 2       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Note: All Form 990 filers are required to complete Schedule O         Yes, " compliance         Check if Schedule O contains a response or note to any line in this Part V         Yes No         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       11       1       V         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1a       11       1       V       V         Check if b conganization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1a       11       10       1       1       1       1	~		35b		
If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         Check if Schedule O contains a response or note to any line in this Part V       Image: Schedule O       Yes         1a       11       1       Image: Schedule O       Image: Schedule O         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       11       Image: Schedule O         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       Image: Schedule G       Image: Schedule G       Image: Schedule G       Image: Schedule G         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       Image: Schedule Sched	36				
37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Note: All Form 990 filers are required to complete Schedule O       38       X       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O			36		х
38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Note: All Form 990 filers are required to complete Schedule O         Opert 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         Image: Statements Regarding Other IRS Filings and Tax Compliance         Otheck if Schedule O contains a response or note to any line in this Part V         Image: Statements Regarding Other IRS Filings and Tax Compliance         Otheck if Schedule O contains a response or note to any line in this Part V         Image: Statements Regarding Other IRS Filings and Tax Compliance         Otheck if Schedule O contains a response or note to any line in this Part V         Image: Statements Regarding Other IRS Filings and Tax Compliance         Image: Statements Regarding Other IRS Filings and Tax Compliance         Image: Statements Regarding Other IRS Filings         Image: Statements Regarding Other IRS	37				
38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Note: All Form 990 filers are required to complete Schedule O         9art 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         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       11       1       1         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0       0       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
Part V       Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V         Yes No         1a       11         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       11         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X	38				
Check if Schedule O contains a response or note to any line in this Part V         Yes       No         1a       11         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X		Note: All Form 990 filers are required to complete Schedule O	38	Х	
Ia       Ia <th< td=""><td>Par</td><td></td><td></td><td></td><td></td></th<>	Par				
1a       11         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1a       11         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X		Check If Schedule O contains a response or note to any line in this Part V			
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1c       X				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?					
(gambling) winnings to prize winners?					
	С		10	x	
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
20	Enter the number of employees reported on Form $W/2$ . Transmittel of $W$ are and Tax Statements		Yes	No
Za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	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.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	<b>Note:</b> 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 13b			
	Enter the amount of reserves on hand			v
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		x
	excess parachute payment(s) during the year?	15		<u>^</u>
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		x
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
17	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			
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Pa	rt VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and	d for a "No" ı	respor	nse
	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			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	13		
	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 1b	13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?		Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		X
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
0a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	m? <b>11a</b>	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
3	Did the organization have a written whistleblower policy?	13	Х	
4	Did the organization have a written document retention and destruction policy?		Х	
5	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		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		
ec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, and 990-T (section 501	(c)(3)s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.	.,.,		
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest polic	y, and finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	LORI HAYS - (855)479-2867			
	303 W. 79TH STREET, KANSAS CITY, MO 64114			
32006	i 12-13-22	Forn	<b>ו 990</b>	(2022
	6			•
07	711 152674 HAPPYBOT 2022.04000 HAPPYBOTTOMS		HA	PPY

HAPPYBOTTOMS

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Form 990 (	2022) HAPPYBOTTOMS	27-2423540	Page 7					
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highe	est 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							
<b>1a</b> 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.								

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 nor any related organization compensated any current officer, director, or trustee.

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	Position (do not check more than one					Reportable	Reportable	Estimated	
	hours per	box, unless person is both an officer and a director/trustee)			n an	compensation	compensation	amount of		
	week		cer an I	id a d	irecto	or/trus T	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	e			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	truste		e	bensi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tri	ional		ploye	t com		1099-NEC)		and related organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JILL GAIKOWSKI	40.00		_		-	1-0				
EXECUTIVE DIRECTOR				х				55,189.	0.	4,254.
(2) SUSAN BELGER ANGULO	20.00									
EXECUTIVE DIRECTOR				Х				33,667.	0.	0.
(3) ELIZABETH MAYER	20.00									
EXECUTIVE DIRECTOR				Х				33,667.	0.	0.
(4) LISA AVERY	1.00									
DIRECTOR		Х						0.	0.	0.
(5) JOHN DEHARDT	1.00									
DIRECTOR		Х						0.	0.	0.
(6) JON CARPENTER	1.00									
DIRECTOR		Х						0.	0.	0.
(7) MOLLY KERR	1.00									
DIRECTOR		Х						0.	0.	0.
(8) MARIAH JORDAN	1.00									
DIRECTOR		Х						0.	0.	0.
(9) PIA NITZSCHKE	1.00									
DIRECTOR		Х						0.	0.	0.
(10) KRISTAL RONNEBAUM	1.00									
DIRECTOR		Х						0.	0.	0.
(11) TOM WITTY	1.00									
DIRECTOR		Х						0.	0.	0.
(12) RICHARD DIXSON	1.00									
DIRECTOR		Х						0.	0.	0.
(13) SHARI NELSON	5.00									
BOARD CHAIR		Х		х				0.	0.	0.
(14) MARK UNGASHICK	5.00									
BOARD VICE CHAIR		х		Х				0.	0.	0.
(15) LON LOWENSTEIN	5.00									
BOARD TREASURER		х		Х				0.	0.	0.
(16) MARY BETH ROHLF	5.00									
BOARD SECRETARY		Х		X				0.	0.	0.
										<b>5 august 990</b> (0000)

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	990 (2022) HAPPYBOT									27-24	<u>1235</u>	540	Pa	ige <b>8</b>
Par			oloy	ees,			ghes	t C		· /				
	(A) Name and title	Average         Position         Reportable         Reportable           hours per         (do not check more than one box, unless person is both an other and of director (more than one)         compensation         compensation						<b>(E)</b> Reportable compensatio from related		Esti amo	(F) imate ount c other			
		hours for 🚆 organization (W-2/1							organization (W-2/1099-MIS 1099-NEC)		orga	m the nization relate	e on ed	
			Inc	Ins	0f	Ke	High	Fo						
											_			
										+				
	1b Subtotal 122,523. 0. 4,254													
	Total from continuation sheets to Part VI Total (add lines 1b and 1c)								0.		0.	4	,25	0. 54.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable	!			0
3	Did the organization list any <b>former</b> officer,			•	•			Ŭ	• • •		ſ		Yes	No
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su and related organizations greater than \$150	im of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from t	he organization		3		x x
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," com	accrue compen	sati	on fr	om	any	unre	elate	ed organization or individ	dual for services		5		X
Sec	tion B. Independent Contractors		2010	<i>JI 3</i> L		0013	011 .				<u></u>	•		
1														
	(A) (B) (C) Name and business address NONE Description of services Compensation							1						
2	Total number of independent contractors (i \$100,000 of compensation from the organi	•	ot lin	nitec	d to t	thos (		ted	above) who received mo	ore than				
	wroo,ooo or compensation nom the organi	Lation												

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		Check if Schedule O o	JUNE	ants a respons	5e (	note to any line	(A)	(B)	(C)	<u>(</u> D)
							Total revenue	Related or exempt function revenue		Revenue exclu from tax und sections 512 -
ţ	1 a	Federated campaigns		1a						
uno	b	Membership dues								
Am	с	Fundraising events		1c		<u>297,000.</u>				
ar	d	Related organizations		1d						
<u>i</u>	е	Government grants (contr	ibuti	ons) <b>1e</b>		91,388.				
r S	f	All other contributions, gifts,	-							
ţ,		similar amounts not included	abov			520,927.				
and Other Similar Amounts	-	Noncash contributions included in				546,981.				
a	h	Total. Add lines 1a-1f					1,909,315.			
						Business Code	42 504	42 504		
		PARTNER AGENC			_	624100	43,584.	43,584.		
Řevenue		MOBILE DIAPER			<u> </u>	624100	21,735.	21,735.		
ent	-	DIAPER DELIVE	RY	FEES	_	624100	5,381.	5,381.		
Rev.	d				_					
,	е				_					
		All other program service					70,700.			
+							70,700.			
	3	Investment income (incluc	-				1,630.			1,63
							1,050.			,05
	4	Income from investment of		-		F				
	5	Royalties	. <u></u>	(i) Real		(ii) Personal				
	6 0	Gross rents	6a	(i) Hear						
		Gross rents Less: rental expenses	6b							
		Rental income or (loss)	6c							
		Net rental income or (loss)								
		Gross amount from sales of	/	(i) Securities		(ii) Other				
		assets other than inventory	7a							
	b	Less: cost or other basis	14							
Ð	~		7b							
Kevenue	с	Gain or (loss)	7c							
Å.		Net gain or (loss)								
		Gross income from fundraisi								
		including \$ 297								
		contributions reported on	line	1c). See						
		Part IV, line 18			8a	0.				
	b	Less: direct expenses			8b	54,010.				
	с	Net income or (loss) from	fund	raising events	3		-54,010.			-54,01
	9 a	Gross income from gamin								
		Part IV, line 19			9a					
	b	Less: direct expenses		l	9b					
		Net income or (loss) from	-							
'	10 a	Gross sales of inventory, I								
		and allowances			10a					
		Less: cost of goods sold			l0b					
+	С	Net income or (loss) from	sales	s of inventory		Duration of the				
		ОПИЕР				Business Code	1 277	1 277		
ne.		OTHER			_	900099	1,377.	1,377.		
/en	b				-					
Revenue	C				-					
		All other revenue					1,377.			
	•	Total. Add lines 11a-11d					1,377.	72,077.		-52,38

HAPPYBOTTOMS

Form 990 (2022)

#### 10420711 152674 НАРРУВОТ

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HAPPYBOTTOMS Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons	(A) Total expenses	(B) Program service	(C) Management and	∟ ( <b>D)</b> Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	106 777	00 006	11 110	16 101
_	trustees, and key employees	126,777.	98,886.	11,410.	16,481
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	407 150	221 720	40 500	F4 00/
7	Other salaries and wages	427,158.	331,732.	40,520.	54,900
B	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	10 050	1/ 01	1 707	
9	Other employee benefits	19,058. 38,534.	14,815.	1,787. 3,613.	2,450
)	Payroll taxes	38,534.	29,955.	3,013.	4,960
1	Fees for services (nonemployees):				
а	Management				
b	Legal	0 750		0 7 5 0	
С	Accounting	9,750.		9,750.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	2 0 2 0		2 0 2 0	
f	Investment management fees	3,029.		3,029.	
g	Other. (If line 11g amount exceeds 10% of line 25,	6 710	015	E 002	
_	column (A), amount, list line 11g expenses on Sch 0.)	6,718. 9,543.	915. 3,079.	5,803.	
2	Advertising and promotion			6,464.	E 7.
3	Office expenses	14,671.	2,460.	11,637.	<u> </u>
4	Information technology	12,599.	4,771.	3,458.	4,3/(
5	Royalties	152 570	152 570		
6		153,570. 2,797.	153,570. 2,309.	419.	69
7	Travel	2,191.	2,309.	419.	01
3	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	C 000	A 14C	1 4 6 0	4.04
9	Conferences, conventions, and meetings	6,008.	4,146.	1,462.	400
0					
1	Payments to affiliates	17 050	17 053		
2	Depreciation, depletion, and amortization	17,853.	<u>17,853.</u> 6,010.	0.270	1 1 1 1
3		16,485.	0,UIU.	9,370.	1,10
ł	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 avanages on Schedule Q)				
а	amount, list line 24e expenses on Schedule 0.)	829,247.	829,247.		
a b	EQUIPMENT AND SUPPLIES	19,447.	19,447.		
	FEES	9,936.	875.	9,049.	1:
c C	FLEET MANAGEMENT	7,419.	7,419.	J, UIJ•	± /
d		9,860.	9,860.		
	All other expenses	1,740,459.	1,537,349.	117,771.	85,33
; ;	Total functional expenses. Add lines 1 through 24e	1,140,4JJ.	±,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	
6	<b>Joint costs</b> . Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

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Form 990 (2022)

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rai		Dalalice Sheet					
		Check if Schedule O contains a response or not	te to any line	in this Part X		<u></u>	
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			553,741.	1	646,353.
l	2	Savings and temporary cash investments			•	2	· · · ·
	3	Pledges and grants receivable, net			38,667.	3	50,399.
	4	Accounts receivable, net				4	
l	5	Loans and other receivables from any current of					
l		trustee, key employee, creator or founder, subs					
l		controlled entity or family member of any of the		5			
l	6	Loans and other receivables from other disquali					
		under section 4958(f)(1)), and persons described		6			
ŝ	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			358,350.	8	370,404.
As	9	Prepaid expenses and deferred charges			2,374.	9	1,856.
	10a	Land, buildings, and equipment: cost or other					
l		basis. Complete Part VI of Schedule D	10a	119,746.			
l	b	Less: accumulated depreciation	10b	76,128.	61,471.	10c	43,618.
l	11	Investments - publicly traded securities		11			
l	12	Investments - other securities. See Part IV, line		512,537.	12	450,750.	
l	13	Investments - program-related. See Part IV, line		13			
l	14	Intangible assets		14			
l	15	Other assets. See Part IV, line 11		·····	5,128.	15	548,600.
	16	Total assets. Add lines 1 through 15 (must equ			1,532,268.	16	2,111,980.
l	17	Accounts payable and accrued expenses	5,289.	17			
l	18	Grants payable	05 112	18			
	19	Deferred revenue		25,113.	19	22,501.	
l	20	Tax-exempt bond liabilities			20		
l	21	Escrow or custodial account liability. Complete			21		
ies	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subs					
Liat		controlled entity or family member of any of the	-			22	
_	23	Secured mortgages and notes payable to unrela				23	
l	24 25	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa parties, and other liabilities not included on lines					
l		of Schedule D	5 17-24). 0011		Ο.	25	458,662.
	26	Total liabilities. Add lines 17 through 25			30,402.	26	481,163.
	20	Organizations that follow FASB ASC 958, che		X	•••	20	
ses		and complete lines 27, 28, 32, and 33.		_			
anc	27				1,434,602.	27	1,507,399.
Bal	28	Net assets with donor restrictions			67,264.	28	<u>1,507,399.</u> 123,418.
pu		Organizations that do not follow FASB ASC 9					
Ľ.		and complete lines 29 through 33.					
s ol	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or ea	quipment fun	d		30	
· ^ `							
Ţ	31	Retained earnings, endowment, accumulated in	ncome, or oth	·····		31	
Net Assets or Fund Balances			ncome, or oth	·····	1,501,866. 1,532,268.	31 32 33	<u>1,630,817.</u> 2,111,980.

Form 990 (2022)

Form 990 (2022) Part X Balance Sheet

HAPPYBOTTOMS

10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	e 12						
1       Total revenue (must equal Part VIII, column (A), line 12)       1       1,929,01         2       Total expenses (must equal Part IX, column (A), line 25)       2       1,740,45         3       Revenue less expenses. Subtract line 2 from line 1       3       188,55         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       1,501,86         5       Net unrealized gains (losses) on investments       5       -59,60         6       6       7         7       8       8       9         9       Other changes in net assets or fund balances (explain on Schedule O)       9         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,       9							
2       Total expenses (must equal Part IX, column (A), line 25)         3       Revenue less expenses. Subtract line 2 from line 1         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))         5       Net unrealized gains (losses) on investments         6       5         7       6         7       6         9       Other changes in net assets or fund balances (explain on Schedule O)         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
2       Total expenses (must equal Part IX, column (A), line 25)         3       Revenue less expenses. Subtract line 2 from line 1         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))         5       Net unrealized gains (losses) on investments         6       5         7       6         7       6         9       Other changes in net assets or fund balances (explain on Schedule O)         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
3       Revenue less expenses. Subtract line 2 from line 1         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))         5       Net unrealized gains (losses) on investments         6       5         7       6         9       Other changes in net assets or fund balances (explain on Schedule O)         9       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
<ul> <li>4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</li> <li>5 Net unrealized gains (losses) on investments</li> <li>6 Donated services and use of facilities</li> <li>7 Investment expenses</li> <li>8 Prior period adjustments</li> <li>9 Other changes in net assets or fund balances (explain on Schedule O)</li> <li>9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,</li> </ul>							
5       Net unrealized gains (losses) on investments       5       -59,60         6       6       6         7       7       6         8       7       8         9       Other changes in net assets or fund balances (explain on Schedule O)       9         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,       9							
6       6         7       7         8       7         9       0ther changes in net assets or fund balances (explain on Schedule O)         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
7       Investment expenses       7         8       Prior period adjustments       8         9       Other changes in net assets or fund balances (explain on Schedule O)       9         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,       9	2.						
8       Prior period adjustments       8         9       Other changes in net assets or fund balances (explain on Schedule O)       9         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,       9							
9       Other changes in net assets or fund balances (explain on Schedule O)       9         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	0.						
	0 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
column (B))							
Part XII Financial Statements and Reporting							
Check if Schedule O contains a response or note to any line in this Part XII							
	No						
1 Accounting method used to prepare the Form 990: Cash X Accrual Other							
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.							
2a    Were the organization's financial statements compiled or reviewed by an independent accountant?    2a    X							
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?							
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 audit,							
review, or compilation of its financial statements and selection of an independent accountant?							
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.							
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the							
Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 3a	Х						
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit							
or audits, explain why on Schedule O and describe any steps taken to undergo such audits							

Form **990** (2022)

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(Form 990)

<u>Total</u>

## **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.

OMB No. 1545-0047
2022
Open to Public Inspection

Department of the Treasury         Attach to Form 990 or Form 990-EZ.         C           Internal Revenue Service         Go to www.irs.gov/Form990 for instructions and the latest information.         C							Open to Public Inspection			
Nam	ne of	the organizati		de le minielgen			latoot ini	ormation	Employer	identification number
				YBOTTOMS						7-2423540
Pa	rt I	Reason			(All organizations must c	omplete th	nis nart ) S	ee instruction		/ 2425540
	organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)									
1	H	A church, convention of churches, or association of churches described in <b>section 170(b)(1)(A)(i).</b> A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990).)								
2	님							••		
3	H	•	•		anization described in s			•		41 1 <sup>1</sup> 4 - 1 <sup>1</sup>
4		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:								
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section 170(b)(1)(A)(iv).</b> (Complete Part II.)								
•								<i>·</i> · ·		
6			· -	-	nental unit described in					
7	X				ntial part of its support fi	rom a gove	ernmental	unit or from t	ne general j	Dudiic described in
•				omplete Part II.)						
8	H				(1)(A)(vi). (Complete Par		ad in aanii	nation with a	land aront	
9					in section 170(b)(1)(A)(					
			or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or
10		university:	an that narma	llu rocciuco (1) moro	than 22 1/20/ of its sum	art from a	optribution	o momborok	in face on	d areas ressints from
10		-		• • • •	than 33 1/3% of its supp				-	-
					t to certain exceptions; a					
					(less section 511 tax) fro	in pusities	ses acqui	red by the or	Janization a	inter Julie 30, 1975.
11	See section 509(a)(2). (Complete Part III.)									
12	An organization organized and operated exclusively to test for public safety. See <b>section 509(a)(4).</b>									
12	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on									
а	<ul> <li>a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving</li> </ul>									
u	L			-	gularly appoint or elect a	• • •	-			
			-	complete Part IV, Se	• • • •	majority c				ipporting
b		<b>_</b>			l or controlled in connect	tion with it	s sunnorte	d organizatio	n(s) by hay	vina
5	L			-	anization vested in the sa			-		•
			-	t complete Part IV,					ge the supp	
с		<b>_</b>			g organization operated	in connect	tion with	and functiona	llv integrate	ed with
•			-		). You must complete I					
d			-		porting organization oper				rted organiz	ration(s)
			-		zation generally must sat				-	
					nplete Part IV, Sections					
е		_			written determination fro				II, Type III	
			•		nally integrated supporti			JI 7 JI	, ,,	
f	Ente	er the number								
g	Pro	vide the follow	ing informatior	n about the supporte						
		(i) Name of supp	orted	(ii) EIN	(iii) Type of organization	(iv) Is the organized (iv) is the organized (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv)	anization listed ing document?	(v) Amount o	f monetary	(vi) Amount of other
		organizatior	ו		(described on lines 1-10 above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)

#### Schedule A (Form 990) 2022

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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	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	936,550.	1542216.	2036176.	1787327.	1909315.	8211584.	
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	936,550.	1542216.	2036176.	1787327.	1909315.	8211584.	
5	<b>v</b>							
•	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)						386,835.	
6							7824749.	
	Public support. Subtract line 5 from line 4.						/024/49.	
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 0010	(-) 2020	(4) 2021	(=) 0000		
		(a) 2018 936, 550.	(b)2019 1542216.	(c) 2020 2036176.	(d) 2021 1787327.	(e)2022 1909315.	(f) Total 8211584.	
	Amounts from line 4	930,330.	1942210.	2030170.	1101521.	1909515.	0211304.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,	2 400	2 0 0 2	1 2 2 4		1 ( ) 0	0 246	
_	and income from similar sources	2,406.	3,903.	1,334.	73.	1,630.	9,346.	
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						8220930.	
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	331,386.	
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax y	/ear as a section 5	01(c)(3)		
	organization, check this box and stop							
Sec	ction C. Computation of Publi	ic Support Per	centage					
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	<u>95.18 %</u>	
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	<b>99.8</b> 5 %	
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	n line 13, and line <sup>-</sup>	14 is 33 1/3% or m	ore, check this bo>	and	
	stop here. The organization qualifies	as a publicly supp	orted organization				X	
b	33 1/3% support test - 2021. If the	organization did no	t check a box on li	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box	
	and stop here. The organization qual	lifies as a publicly s	upported organiza	ition				
17a	10% -facts-and-circumstances test	- <b>2022.</b> If the org	anization did not c					
	and if the organization meets the fact							
	meets the facts-and-circumstances te			-	ranization			
b	10% -facts-and-circumstances test	-		• • • •	-			
	more, and if the organization meets th	-						
	organization meets the facts-and-circl							
18	Private foundation. If the organization		•		••••			
				,,, c. 116	,		(Eorm 990) 2022	

Schedule A (Form 990) 2022

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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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services 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				-		
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disgualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		1		-		
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6				-		
10 <i>a</i>	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organ	ization,
_	check this box and stop here		-				
	ction C. Computation of Publi						
	Public support percentage for 2022 (	, (),	<b>,</b>	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves					<u> </u>	
	17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))						
	Investment income percentage from					18	%
19a	<b>33 1/3% support tests - 2022.</b> If the						ne 17 is not
	more than 33 1/3%, check this box a						
b	<b>33 1/3% support tests - 2021.</b> If the	-					
00	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	m did not check a	box on line 14, 19	a, or 19b, check t	his box and see in		
23202	23 12-09-22					Sched	lule A (Form 990) 2022

1

Yes No

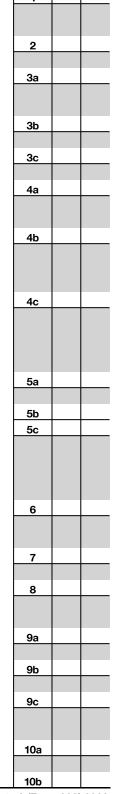
#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

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Schedule A (Form 990) 2022

	(Form 990)		HAPPYBOTTOMS
Part IV	Suppor	ting O	rganizations (continued)

Yes No

# 11 Has the organization accepted a gift or contribution from any of the following persons? Yes No 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 11a b A family member of a person described on line 11a above? 11b 11b 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide 11c 11c Section 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? <i>If</i> " <i>No</i> ," <i>describe in</i> <b>Part VI</b> <i>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</i>			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Ser	tion C. Type II Supporting Organizations		·	

1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	
	or management of the supporting organization was vested in the same persons that controlled or managed	
	the supported organization(s)	1

Section D.	All Type III	Supporting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

#### Section 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	vear (see instructions	5).
•	Check the box hext to the method that the organization used to satisfy the integral r art rest during the	year (ooo moa doalon	1

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с [		The organization supported a governmental entity.	Describe in <b>Part VI</b> how you supported a governmental entity (see instruction <u>s).</u>	
-----	--	---	--	--

- 2 Activities Test. Answer lines 2a and 2b below.
- **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.
- 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.
- 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.** 

**b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* 

Schedule A (Form 990) 2022

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Sche	edule A (Form 990) 2022 HAPPYBOTTOMS			27-2423540 Page 6			
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportir	ng Orgar	nizations				
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.						
	All other Type III non-functionally integrated supporting organizations mus	t complete	e Sections A through E.				
Sect	ion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)				
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
a	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
C	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 0.035.	6					
_7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
_4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functiona	Illy integrat	ed Type III supporting or	ganization (see			

instructions).

Schedule A (Form 990) 2022

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Schedule A (Form 990) 2022

Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	inizations <sub>(contine</sub>	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe		1		
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	S	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - prior	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	•		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	ns	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
_j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years			_	
b	Applied to 2022 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
<u>a</u>	Excess from 2018				
b	Excess from 2019				
C	Excess from 2020				
d	Excess from 2021				
e	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022	HAPPYBOTTOMS			27-2423540 Pag
Part VI	Supplemental Info Part IV, Section A, lines line 1; Part IV, Section D	1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9 , lines 2 and 3; Part IV, Sec	9a, 9b, 9c, 11a, 11b, and ction E, lines 1c, 2a, 2b, 3	art II, line 10; Part II, line 17a c 11c; Part IV, Section B, lines Ba, and 3b; Part V, line 1; Part mplete this part for any additio	or 17b; Part III, line 12; 1 and 2; Part IV, Section C, V, Section B, line 1e; Part V,
	(See instructions.)				
000 10 00 -					Sobodulo A (Form 000)
028 12-09-2	2		20		Schedule A (Form 990) 2
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### **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.

OMB No. 1545-0047 2022 blic

	ment of the Treasury Revenue Service		ttach to Form 990. ) for instructions and the latest informa	tion.	Open to Public Inspection	
	e of the organizati			Employer	identification number $7-2423540$	
Par	t I Organiza	ations Maintaining Donor Advised	Funds or Other Similar Funds			
		n answered "Yes" on Form 990, Part IV, line				
			(a) Donor advised funds	(b) Funds and	d other accounts	
1	Total number at er	nd of year				
2		f contributions to (during year)				
3		f grants from (during year)				
4		t end of year				
5		on inform all donors and donor advisors in w	vriting that the assets held in donor advise	ed funds		
-	-	on's property, subject to the organization's e	-		Yes No	
6		on inform all grantees, donors, and donor a				
	•	ooses and not for the benefit of the donor or				
	impermissible priv		· · · · ·	•	Yes No	
Par		ation Easements. Complete if the org	anization answered "Yes" on Form 990, F	Part IV, line 7.		
1		servation easements held by the organizatio				
	Preservation	n of land for public use (for example, recreat	ion or education) Preservation of	a historically impor	tant land area	
	Protection o	of natural habitat	Preservation of	a certified historic	structure	
	Preservation	n of open space				
2	Complete lines 2a	through 2d if the organization held a qualifi	ed conservation contribution in the form o	of a conservation ea	asement on the last	
	day of the tax year	r.		Held	at the End of the Tax Year	
а	Total number of co	onservation easements		2a		
с	Number of conser	vation easements on a certified historic stru	cture included in (a)	2c		
d	Number of conser	vation easements included in (c) acquired a	fter July 25,2006, and not on a			
	historic structure I	isted in the National Register		2d		
3	Number of conser	vation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during	g the tax	
	year					
4		where property subject to conservation eas				
5	-	tion have a written policy regarding the peri				
		orcement of the conservation easements it				
6	Staff and voluntee	r hours devoted to monitoring, inspecting, h	handling of violations, and enforcing cons	ervation easements	s during the year	
7	Amount of overage		ling of violations, and enforcing concernat	ion cocomonto duri	ing the year	
7	Amount of expens	es incurred in monitoring, inspecting, handl	ing of violations, and emorcing conservat	ion easements duri	ing the year	
8	Does each conser	 vation easement reported on line 2(d) above	e satisfy the requirements of section 170/	n)(4)(B)(i)		
Ŭ		)(4)(B)(ii)?			Yes No	
9		be how the organization reports conservation				
-	,	d include, if applicable, the text of the footne			the	
		ounting for conservation easements.				
Par		ations Maintaining Collections of	Art, Historical Treasures, or Ot	her Similar Ass	sets.	
	Complete it	f the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization	elected, as permitted under FASB ASC 958	3, not to report in its revenue statement a	nd balance sheet w	orks	
	of art, historical tre	easures, or other similar assets held for pub	lic exhibition, education, or research in fu	rtherance of public		
	service, provide in	Part XIII the text of the footnote to its finan	cial statements that describes these item	S.		
b	If the organization	elected, as permitted under FASB ASC 958	3, to report in its revenue statement and b	alance sheet works	s of	
	art, historical treas	sures, or other similar assets held for public	exhibition, education, or research in furth	erance of public se	rvice,	
	provide the following amounts relating to these items:					
	(i) Revenue inclu	ded on Form 990, Part VIII, line 1		\$		
2	If the organization	received or held works of art, historical trea				
	the following amou	unts required to be reported under FASB AS	SC 958 relating to these items:			
а	Revenue included	on Form 990, Part VIII, line 1		\$		
	Assets included in			\$		

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Schedule D	(Form	9901	2022
Schedule D	FOLIII	990)	2022

Sche	dule D (Form 990) 2022 HAPPYBO						27-24	2354	) Pa	age <b>2</b>
Par	t III Organizations Maintaining C	ollections of Art	, Historical T	reasures, or	Other	Similar	Assets	(contin	nued)	
3	Using the organization's acquisition, accessi	on, and other records	s, check any of th	e following that r	nake sig	nificant u	se of its			
	collection items (check all that apply):									
а	Public exhibition	d	Loan or e	xchange progran	n					
b	Scholarly research	е	Other							
с	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further	the organization	's exem	pt purpos	e in Part	XIII.		
5	During the year, did the organization solicit of	r receive donations o	f art, historical tre	easures, or other	similar a	assets		_		_
_	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arran		te if the organizat	tion answered "Y	'es" on F	orm 990-	, Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa									
<b>1</b> a	Is the organization an agent, trustee, custod							-		-
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:							
								Amoun	t	
	Beginning balance					1c				
	Additions during the year									
	Distributions during the year									
	Ending balance							7.,		
	Did the organization include an amount on F					y?	L	Yes		_ No
Par	If "Yes," explain the arrangement in Part XIII. <b>t V</b> Endowment Funds. Complete					<u></u>	<u></u>	<u></u>		
1 41		(a) Current year	(b) Prior year	(c) Two years		d) Three y	ears hack	(e) Fou	vears	hack
10	Paginning of year balance	512,537.			Duck (			(0) 1 001	yours	buok
	Beginning of year balance	512,557.								
	Contributions	-58,758.								
	Net investment earnings, gains, and losses									
	Grants or scholarships									
e	Other expenditures for facilities									
f	and programs	3,029.								
	Administrative expenses End of year balance	450,750.								
g 2	End of year balance Provide the estimated percentage of the curr	,	line 1a column	(a)) held as:						
ے a	Board designated or quasi-endowment	1 0 0	%							
h	Permanent endowment	%								
c		<u> </u>								
Ŭ	The percentages on lines 2a, 2b, and 2c sho	· -								
3a	Are there endowment funds not in the posse	-	tion that are held	and administere	d for the	•				
	organization by:							1	Yes	No
	(i) Unrelated organizations							3a(i)		Х
	(ii) Related organizations							3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related organiza							3b		
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm	ient.								
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a	. See Form 990, I	Part X, li	ne 10.				
	Description of property	(a) Cost or ot basis (investm	• •	ost or other is (other)	• •	cumulate reciation	d	( <b>d)</b> Boo	k valu	e
1a	Land									
b	Buildings									
с	Leasehold improvements									
	Equipment		1	19,746.		76,12	28.	4	3,6:	18.
	Other									
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part >	K. column (B), line	10c.)					3,63	
							Cabadula		- 000	0000

Schedule D (Form 990) 2022

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art vil investments - Other Securities.	
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Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) BOARD DESIGNATED		
(B) INVESTMENT	450,750.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	450,750.	

#### 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-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

#### 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) RIGHT OF USE ASSET	458,662.
(2) SOFTWARE DEVELOPMENT IN PROCESS	89,938.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	
Part X Other Liabilities.	
Openaleta if the experimetion enclosed IV/cell on Forms 000, Dert IV/ line 11e on 11f. Con Forms 000, Dert V, line	- 05

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	OPERATING LEASE LIABILITY	458,662.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	458,662.

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

Schedule D (Form 990) 2022

232053 09-01-22

Sche	dule D (Form 990) 2022 HAPPYBOTTOMS				2423540 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	nents With F	Revenue per Ret	urn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.			
1	Total revenue, gains, and other support per audited financial statements			1	1,928,907.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-59,602.		
b	Donated services and use of facilities	2b	8,516.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)		54,010.		
е	Add lines 2a through 2d			2e	<u>2,924.</u> 1,925,983.
3	Subtract line 2e from line 1			3	1,925,983.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	3,029.		
b	Other (Describe in Part XIII.)	4b			
С				4c	3,029.
	Total revenue Add lines 2 and 4 articles and 1 articles and 1 articles and 1 articles are and 1 articles are and 1 articles are are are articles are are articles are			5	1,929,012.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			-	
Pa	rt XII Reconciliation of Expenses per Audited Financial Stater	ments With	Expenses per R	-	
Pa	<b>rt XII</b> Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12	nents With 2a.	Expenses per R	-	n.
5 Pa	rt XII Reconciliation of Expenses per Audited Financial Stater	nents With 2a.	Expenses per R	-	
	TXII         Reconciliation of Expenses per Audited Financial Stater           Complete if the organization answered "Yes" on Form 990, Part IV, line 12           Total expenses and losses per audited financial statements           Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With <sup>2a.</sup>	Expenses per R	eturi	n.
1	Reconciliation of Expenses per Audited Financial Stater           Complete if the organization answered "Yes" on Form 990, Part IV, line 12           Total expenses and losses per audited financial statements	nents With <sup>2a.</sup>	Expenses per R	eturi	n.
1 2	TXII         Reconciliation of Expenses per Audited Financial Stater           Complete if the organization answered "Yes" on Form 990, Part IV, line 12           Total expenses and losses per audited financial statements           Amounts included on line 1 but not on Form 990, Part IX, line 25:	<b>nents With</b> 2a 2a	Expenses per R	eturi	n.
1 2 a	<b>Reconciliation of Expenses per Audited Financial Stater</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	2a.         2a            2a            2a            2b	Expenses per R	eturi	n.
1 2 a b	<b>t XII Reconciliation of Expenses per Audited Financial Stater</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses	2a.         2a            2a            2b            2c	Expenses per R	eturi	n. <u>1,799,956.</u>
1 2 a b c	<b>t XII Reconciliation of Expenses per Audited Financial Stater</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses	2a.         2a            2a            2b            2c            2d	Expenses per R 8,516. 54,010.	eturi	n. <u>1,799,956.</u> 62,526.
1 2 a b c	<b>t XII Reconciliation of Expenses per Audited Financial Stater</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d	2a.         2a            2a            2b            2c            2d	Expenses per R 8,516. 54,010.	1	n. <u>1,799,956.</u>
1 2 b c d e	<b>t XII Reconciliation of Expenses per Audited Financial Stater</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a.         2a            2a            2b            2c            2d	Expenses per R 8,516. 54,010.	1 2e	n. <u>1,799,956.</u> 62,526.
1 2 b c d 3	<b>t XII Reconciliation of Expenses per Audited Financial Stater</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1	2a.           2a.           2b           2b           2c           2d	Expenses per R 8,516. 54,010.	1 2e	n. <u>1,799,956.</u> 62,526.
1 2 3 4 2 3 4	<b>Reconciliation of Expenses per Audited Financial Stater</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a.         2a           2b         2b           2c         2c           2d         2d	Expenses per R 8,516. 54,010.	1 2e	n. <u>1,799,956.</u> <u>62,526.</u> 1,737,430.
1 2 3 4 2 3 4	<b>t XII Reconciliation of Expenses per Audited Financial Stater</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a.         2a           2b         2b           2c         2c           2d         2d	Expenses per R 8,516. 54,010. 3,029.	1 2e	n. <u>1,799,956.</u> <u>62,526.</u> <u>1,737,430.</u> 3,029.
1 2 d e 3 4 a b c 5	<b>t XII Reconciliation of Expenses per Audited Financial Stater</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a.           2a.           2b           2b           2c           2d           2d	Expenses per R 8,516. 54,010. 3,029.	2e 3	n. <u>1,799,956.</u> <u>62,526.</u> 1,737,430.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART XI, LINE 2D - OTHER ADJUSTMENTS:

#### SPECIAL EVENT EXPENSES

PART XII, LINE 2D - OTHER ADJUSTMENTS:

#### SPECIAL EVENT EXPENSES

232054 09-01-22

Schedule D (Form 990) 2022

54,010.

54,010.

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047
(Form 990)	Complete if the	or if the	2022					
	C	rganization entered more than \$1 Attach to Form 990 c						Open to Public
Department of the Treasury Internal Revenue Service	Go te	o www.irs.gov/Form990 for instruc				ı.	_	Inspection
Name of the organization								lentification number
	HAPPYBO						27-242	
	complete this part	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, li	ne 17	7. Form 990-E	Z filers are not
<ul> <li>Indicate whether the</li> <li>a Mail solicitat</li> <li>b Internet and</li> <li>c Phone solicitat</li> <li>d In-person so</li> <li>2 a Did the organization</li> <li>key employees list</li> </ul>	e organization rais ions email solicitations tations licitations on have a written o ed in Form 990, Pa highest paid indiv	ed funds through any of the followin e Solicita f Solicita g Special r oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover iising e ling of onal fu	overnment grants nment grants events ficers, directors, trust undraising services?		Ye	
(i) Name and addres or entity (func		<b>(ii)</b> Activity	(iii) fundr have ci or con contribu	ustody trol of	(iv) Gross receipts from activity	tò (c	Amount paid or retained by fundraiser ted in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization
			Yes	No				
Total				1				
	ch the organizatio	n is registered or licensed to solicit o	ontrib	utions	or has been notified	it is e	exempt from r	egistration

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

Schedule G (Form 990) 2022

232081 10-27-22

HAPPYBOTTOMS

27-2423540 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro				s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
					NONE	(add col. (a) through
			AUCTION			col. (c))
Ð			(event type)	(event type)	(total number)	
enu			0.50.054			0.50.054
Revenue	1	Gross receipts	278,051.			278,051.
						0.00.001
	2	Less: Contributions	278,051.			278,051.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
		New york of the				
S	5	Noncash prizes				
Direct Expenses		Dent/facility acets				
be	6	Rent/facility costs				
Ě	_	For double services				
Sec	<b>'</b>	Food and beverages				
ā						
	8	Entertainment	54,010.			54,010.
	9 10	Other direct expenses Direct expense summary. Add lines 4 through		•		54,010.
		Net income summary. Subtract line 10 from li				-54,010.
Pa	irt I			990 Part IV line 19 or		51,010.
		\$15,000 on Form 990-EZ, line 6a.				
		. , , ,	( )	(b) Pull tabs/instant		(d) Total gaming (add
Jue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue						
щ	1	Gross revenue				
~	2	Cash prizes				
Jsec						
Expenses	3	Noncash prizes				
Ě						
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			<b>Yes</b> %	<b>Yes</b> %	<b>Yes</b> %	
	6	Volunteer labor	No	No	<b>No</b>	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
		ter the state(s) in which the organization condu				
		the organization licensed to conduct gaming ac				Yes No
b	) If "	No," explain:				
			• • · · ·			
		ere any of the organization's gaming licenses re			/ear?	Yes No
b	) If "	Yes," explain:				

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Schedule G (Form 990) 2022

Sche	edule G (Form 990) 2022	HAPPYBOTTOMS 2	7-24	2354	0 Page 3
11	Does the organization conduct ga	ming activities with nonmembers?	[	Yes	No
12	Is the organization a grantor, bene	ficiary or trustee of a trust, or a member of a partnership or other entity formed			
			[	Yes	No
	Indicate the percentage of gaming				
		· · · · · ·	1	3a	%
				3b	%
		e person who prepares the organization's gaming/special events books and records:			
	Name				
	Address				
15a	Does the organization have a cont	tract with a third party from whom the organization receives gaming revenue?	E	Yes	s 🗌 No
b	If "Yes," enter the amount of game	ing revenue received by the organization \$ and the amour	nt		
	of gaming revenue retained by the	e third party   \$			
с	If "Yes," enter name and address	of the third party:			
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation	\$			
	Description of services provided				
	Director/officer				
		Employee Independent contractor			
17	Mandatory distributions:				
	•	state law to make charitable distributions from the gaming proceeds to			
u			Г	Yes	No
b		required under state law to be distributed to other exempt organizations or spent in th			
~	organization's own exempt activiti				
Pa		mation. Provide the explanations required by Part I, line 2b, columns (iii) and (v); an	d Part II	I, lines 9	, 9b, 10b,
		applicable. Also provide any additional information. See instructions.			
0007	0.40.07.00		obc d ! .	<u>с (г</u> -т	m 000\ 0000
23208	3 10-27-22	2 Q S	inequie	G (FOR	m 990) 2022

		(continued)		
				Schedule G (Form 990)
232084 04-01-	-22		29	

#### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.							
Attach to Form 990.							
Go to www.irs.gov/Form990 for instructions and the latest information.							

2 ΖU **Open to Public** Inspection

r

Employer identification number

27 - 2423540

Name of the organization

#### HAPPYBOTTOMS

Pa	rt I   Types of Property						
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		unts
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	Securities - Closely held stock						
11	Securities - Partnership, LLC, or trust interests						
12	Securities - 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						
25	Other (DIAPERS / DISCO)	Х	637,497		FAIR MARKET		
26	Other ( <u>WIPES</u> )	Х	479,889	9,598.	FAIR MARKET	VALU	E
27	Other ()						
28	Other ( )						
29	Number of Forms 8283 received by the organization during the tax year for contributions						
	for which the organization completed Form 828	3, Part V, D	onee Acknowledg	ement 29		— — —	
						Ye	s No
30a	During the year, did the organization receive by						
	must hold for at least 3 years from the date of th			-			v
	exempt purposes for the entire holding period?					30a	<u> </u>
	If "Yes," describe the arrangement in Part II.	aliou that	auiroo the review	f on a nonotondard contails.	iono?		x
31	Does the organization have a gift acceptance po	-	-	•	.0115 (	31	
	Does the organization hire or use third parties o contributions?		-			32a	x
b	If "Yes," describe in Part II.						

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

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Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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SCHEDULE O (Form 990) Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



HAPPYBOTTOMS

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

NEED THROUGH DIAPER ASSISTANCE, EDUCATION AND CONNECTION TO SERVICES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

2,084,467 DIAPERS THROUGH 53 AGENCY PARTNERSHIPS AT 66 SITES.

HAPPYBOTTOMS' BUNDLES OF JOY PROGRAM PROVIDES A ONE-TIME DISTRIBUTION

OF 75 DIAPERS TO FAMILIES OF NEWBORNS DELIVERED AT ONE OF 7 PARTNER

HOSPITAL SITES. THESE FAMILIES ALSO RECEIVE DIAPERING TIPS AND

INFORMATION ON HOW TO ACCESS ONGOING SERVICES THROUGH A HAPPYBOTTOMS'

PARTNER AGENCY. A TOTAL OF 254,925 DIAPERS WERE DISTRIBUTED THROUGH THE

BUNDLES OF JOY PROGRAM IN 2022.

HAPPYBOTTOMS DISTRIBUTED 129,165 DIAPERS THROUGH 14 MASS DISTRIBUTION EVENTS. THESE EVENTS RAISE AWARENESS ABOUT HAPPYBOTTOMS' PROGRAMS IN AREAS OF UNMET NEED, AND PROVIDE FAMILIES WITH HAPPY PACKS. HAPPY PACKS ARE PACKS OF 5 DIAPERS THAT INCLUDE INFORMATION ABOUT HOW FAMILIES CAN CONNECT TO A PARTNER AGENCY AND RECEIVE DIAPERS EACH MONTH.

POTTY TRAINING ULTIMATELY ELIMINATES DIAPER EXPENSE AND CLOSES OUT THE CYCLE OF DIAPER NEED. HAPPYBOTTOMS' POTTY TRAINING EDUCATION PROGRAM HELPS FAMILIES NAVIGATE THIS CRITICAL STAGE WITH THEIR CHILDREN. PARTICIPANTS RECEIVE A VIDEO CURRICULUM AND POTTY TRAINING KIT, INCLUDING A POTTY SEAT, STEPSTOOL, INFORMATIONAL BOOKLET, BOARD BOOK, AND STICKER CHART. Name of the organization

HAPPYBOTTOMS

Employer identification number 27-2423540

FORM 990, PART VI, SECTION B, LINE 11B:

A COPY OF FORM 990 IS SENT TO THE GOVERNING BOARD OF HAPPYBOTTOMS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE POLICY IS MONITORED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 15:

APPROVED BY THE EXECUTIVE COMMITTEE AS PART OF THE ANNUAL BUDGET APPROVAL.

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS

ARE AVAILABLE UPON REQUEST.

Schedule O (Form 990) 2022

232212 10-28-22