Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2022

Open to Public Inspection

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

Do not enter social security numbers on this form as it may be made public.

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

Α	For the	2022 cal	endar year, or tax year beginning	7/1/2022	, and e	nding (5/30/2023	
В	Check if a	pplicable:	C Name of organization Nonprofit Enter	erprise at Work, Inc.		D Emplo	yer identifi	cation number
Ш	Address c	hange	Doing business as NEW Center					
			Number and street (or P.O. box if mail is no	delivered to street address)	Room/suite	38-2825	019	
Ш	Name cha	ange	1100 North Main Street		100	E Teleph	one numbe	r
	Initial retu	rn	City or town	State	ZIP code	704.000	0400	
\equiv			Ann Arbor	MI	48104	734-998	-0160	
Ш	Final return/	terminated/	Foreign country name Foreign	province/state/county	Foreign postal	code		
П	Amended	return	, ,		٠.	G Gross	receipts \$	3,818,621
二						_		
Ш	Application	n pending	F Name and address of principal officer:			H(a) Is this a group ret	urn for subordi	nates? Yes X No
			Yodit Mesfin Johnson 1100 N Main S	St, STE 100, Ann Arbor,	MI 48104	H(b) Are all subordi	nates includ	ed? Yes No
1	Tay-even	npt status:	X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527	If "No," attach	a list. See ir	structions
<u> </u>				(IIISETT 110.) 4947 (a)(1) OI 321			
J	Website:	ww\	v.new.org		1	H(c) Group exempt	on number	
K	Form of o	organization	: X Corporation Trust Associ	ation Other	L Yea	ar of formation: 19	88 M S	tate of legal domicile:
H.	Part I	Su	mmary					
	1	•		most significant activitie	o: NEW	lipopiros and as	uino mios	sion drivon
Ф	1	-	escribe the organization's mission or	•		inspires and eq	uips miss	sion-driven
2			organizations and communities to rea	ilize their visions of a ju	st and thriving	9		
Activities & Governance		society.				4		
Š	2	Check th	nis box if the organization dis	continued its operations	or disposed	of more than 25	% of its n	et assets.
တိ	3	Number	of voting members of the governing				1 - 1	9
ంర	4		of independent voting members of the				4	8
es							5	28
₹	5		mber of individuals employed in cale					
ŧ	6		mber of volunteers (estimate if neces				6	10
⋖			related business revenue from Part V				7a	0
	b	Net unre	elated business taxable income from	Form 990-T, Part I, line	<u> 11 </u>	<u></u>	7b	0
						Prior Year	r	Current Year
Φ	8	Contribu	itions and grants (Part VIII, line 1h) .			1,	694,062	2,551,084
Ž	9		service revenue (Part VIII, line 2g) .			1.	092,715	1,264,644
Revenue	10		ent income (Part VIII, column (A), line			.,	208	208
2	11		venue (Part VIII, column (A), lines 5,				3,215	2,685
						0.1		
	12		enue—add lines 8 through 11 (must equ				790,200	3,818,621
	13		and similar amounts paid (Part IX, col				211,625	290,736
	14		paid to or for members (Part IX, colu				0	0
S	15	Salaries,	other compensation, employee benefits	(Part IX, column (A), line	s 5–10) . .	1,	314,981	1,686,538
Expenses	16a	Professi	onal fundraising fees (Part IX, columi	n (A), line 11e)			0	0
be	b		ndraising expenses (Part IX, column (38,396			
Ж	17		penses (Part IX, column (A), lines 11				637,652	924,177
	18		penses. Add lines 13–17 (must equal	-			164,258	2,901,451
					c 23)			
	19	Revenue	e less expenses. Subtract line 18 from	n line 12	<u> </u>		625,942	917,170
So						Beginning of Curr		End of Year
sset	20		sets (Part X, line 16)				248,572	3,147,351
Ž,	21					•	434,129	415,738
Net Assets or	22	Net asse	ets or fund balances. Subtract line 21	from line 20		1,	814,443	2,731,613
	art II	Sig	nature Block					
Und	ler penaltie	es of perjury	y, I declare that I have examined this return, incl	uding accompanying schedules	and statements	, and to the best of m	y knowledge	•
and	belief, it is	s true, corre	ct, and complete. Declaration of preparer (other	than officer) is based on all inf	ormation of which	n preparer has any kr	owledge.	
٠.								
Si		Signati	ire of officer			Dat	e	-
Here		_	Mesfin Johnson		Droc	ident and CEO	•	
		rouit	MESIII JOHNSON		Pies	ident and CEO		
			The second of the second secon					_
		1	Type or print name and title	Duran and the first		D. f		DTIN
_		Print	Type or print name and title /Type preparer's name	Preparer's signature		Date	Check [PTIN
Pa		lam	/Type preparer's name				Check self-emple	if
Pr	eparer	Jam	/Type preparer's name nes H Bennett, CPA	James H Bennett, CPA	ı	2/26/2024	self-emplo	if pyed P00447547
Pr		Jam	/Type preparer's name nes H Bennett, CPA 's name Bennett & Associates CP	James H Bennett, CPA As PLLC			self-emplo	if P00447547 88128
Pr	eparer	Jam Firm	/Type preparer's name nes H Bennett, CPA	James H Bennett, CPA As PLLC		2/26/2024	self-emplo	if pyed P00447547

Form 9	90 (2022)	Nonprofit Enterprise at Work, Inc.	38-2825019	Page 2
Pai	t III	Statement of Program Service Accomplishments		_
		Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly o	describe the organization's mission:		
	NEW in	spires and equips mission-driven people, organizations and communities to realize		
	their vis	ions of a just and thriving society.		
_	Diel 4h e			
2		organization undertake any significant program services during the year which were not listed on	□ v ₂ ,	V Na
	-	r Form 990 or 990-EZ?	· · · Yes	X No
3		organization cease conducting, or make significant changes in how it conducts, any program		
3		s?	Yes	X No
		' describe these changes on Schedule O.		<u> </u>
4		e the organization's program service accomplishments for each of its three largest program service	es, as measured by	
•		es. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and a		
		I expenses, and revenue, if any, for each program service reported.		,
4a	(Code:) (Expenses \$ 1,357,540 including grants of \$ 290,736) (Rever	nue \$ 827	',312)
	Manage	ed Services - The program offers managed IT and financial services, as well as office and		
		and management costs, while enabling greater reliability, daily data backup, remote access		
		ments, and many other benefits. Nonprofits have access to on-call IT support during regular		
		s and cash flow, and fiscal sponsorship. NEW also provides office space, shared resources, eting space for 501(c)(3) nonprofits at the NEW Center through tenants, affiliate		
		rships, and conference room rentals. See Schedule O for further details.		
	HICHIDO	isinps, and conference room remais. See conedule of for further details.		
4b	(Code:) (Expenses \$ 348,664 including grants of \$) (Rever	nue \$ 44	,000)
		g Communities - The program offers leadership development programming to organization		
	leaders	, key staff, and other individual stakeholders. Learning communities include Leadership		
		eadership development), Champions for Change (racial justice-focused leadership		
		ment), Centering Justice (monthly virtual dialogue series), Road to Resilience (financial		
		hip development), Beyond Board Basics (Board member development), and Leading & Learning		
		community on change management). In fiscal 2022-23, NEW served 403 individuals in		
		g Communities: Leadership DELL: 27 participants, Champions for Change: 26 participants,		
		anta Landina O Langina (10 anticipata		
	particip			
4c	(Code:) (Expenses \$ 279,195 including grants of \$) (Rever	nue \$ 396	5,017)
	•	ing - The program offers organizational development, IT, and Financial consulting services		
	to organ	nization leaders, Boards of Directors, and other key staff. Support includes beginning and		
		ed board governance training, strategic planning, customized facilitation and workshops,		
	diversity	y, equity & inclusion consultation, executive coaching, IT special projects support, and		
		ation on financial policies and procedures. In fiscal year 2022-23, NEW served 57		
		ations with consulting services: Organizational Development Consulting: 41 organizations,		
	IT Cons	sulting: 7 organizations, Financial Consulting: 9 organizations		

(Expenses \$ 307,715 including grants of \$ Total program service expenses 4e

Other program services (Describe on Schedule O.)

2,293,114

0)(Revenue \$

0)

orm 9	990 (2022) Nonprofit Enterprise at Work, Inc.	38-28250°	19	Pa	age 🕄
art	V Checklist of Required Schedules		1	1	
		Г		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions		2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	· · ·			
	candidates for public office? If "Yes," complete Schedule C, Part I		3		Χ
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)				
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II		4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,		_		v
6	assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III .</i> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		5		Х
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If				
	"Yes," complete Schedule D, Part I	?	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,				
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		7		Χ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>				
•	complete Schedule D, Part III		8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt				
	negotiation services? If "Yes," complete Schedule D, Part IV.		9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments				
	or in quasi endowments? If "Yes," complete Schedule D, Part V	[10		Χ
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		44.	V	
h	Schedule D, Part VI	· · ·	11a	Χ	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		11c		Χ
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets				
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	X	11e	Χ	
ī	the organization's Separate of Consolidated Infancial Statements for the tax year include a roothole 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? <i>If "Yes," complete scriedule D, r art x. :</i>	ete			$\stackrel{\wedge}{\vdash}$
	Schedule D, Parts XI and XII		12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Year	s,"			
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	-	12b		Χ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		13		X
	Did the organization maintain an office, employees, or agents outside of the United States?		14a		Х
IJ	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				l
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or				
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		15		Χ
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other				
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	· · ·	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		17		Х
. •	Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	Ī	-		
	If "Yes," complete Schedule G, Part III		19		Х
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		20a		Χ
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		24	_	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		21	Χ	Щ.

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

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return 2	28			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	s?	2b	Χ	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		Χ
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 According to the control of	unts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .		5a		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ion?	5b		Χ
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		Χ
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	s 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 g				.,
	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 a serviced to file Form 93003	3			v
	required to file Form 8282?	 . l	7c		Х
d			70		~
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7e 7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899		7g		^
g h	If the organization received a contribution of qualified intellectual property, and the organization file a		7 <u>9</u>		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		711		
•	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	а			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	b			
11	Section 501(c)(12) organizations. Enter:	•			
а	Gross income from members or shareholders	а			
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	I	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		42-		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
b	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which	1			
b	the organization is licensed to issue qualified health plans	h			
С	Enter the amount of reserves on hand				
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule</i>		14b		Ť
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				
-	excess parachute payment(s) during the year?		15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	ncome?	16		Х
10		1001116:	10		Ĥ
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 act	vities			
17	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	งเนตอ	17		
	If "Yes " complete Form 6069		<u>''</u>		
	n rea, wondere connibues.				

Part VI

Sect	ion 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			
	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 8			
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		Х
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	Ť		
, a	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
~	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
Ū	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	- 0.5		
Ū	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C)	
0000	1011 D. 1 Onoics (This decision D requests information about policies not required by the internal Neventies	,ouc.	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	- 1.5	,,	
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes,"		, ·	
•	describe on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official.	15a	Х	
b	Other officers or key employees of the organization	15b	,,	Χ
-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	10.0		,
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100		
b	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		
Sect	ion C. Disclosure	100		
<u> 3601</u> 17	List the states with which a copy of this Form 990 is required to be filed MI			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 5	01(c)		
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	J . (U)		
	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 pol	icv.		
	and financial 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			
-	Yodit Mesfin Johnson 734-998-0160			
	1100 North Main Street, App Arbor, MI 48104			

Page 7

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

<u> </u>	,			•		•		•	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er and	s pe	-	h an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Yodit Mesfin Johnson	40.00								
President and CEO	0.00	X		Χ			119,443	0	4,132
(2) Linda Tam CFOO	40.00			Х			79,250	0	2,780
(3) Carrie Hammerman CSPO	40.00 0.00			Х			76,960	0	3,001
(4) Kristopher Wiljanen Chair	2.00 0.00	Х		Х			0	0	0
(5) Kimberly Hurns Secretary until September 2022	1.00 0.00			Х			0	0	0
(6) Alok Sharma Trustee	1.00 0.00	4					0	0	0
(7) Lila Asante-Appiah Vice Chair	2.00 0.00	Х		Х			0	0	0
(8) Matt Hylant Trustee	1.00 0.00	1					0	0	0
(9) Claire Sheldon Treasurer	2.00 0.00	Х		Х			0	0	0
(10) Nicole Cole Trustee / Secretary	1.00 0.00	Х		Х			0	0	0
(11) Perry Ohren Trustee	1.00						0	0	0
(12) Emily Heintz Trustee	1.00						0	0	0
(13)									

	Section A. Officers, Directors, 1rd	istees, key Em	pioye	es,	and		gnes	U	ompensated En	ipioyees (c	Onum	iea)		
	(A) Name and title	(B) Average hours per week	(C) Positior (do not check mor box, unless persor officer and a direct product of the control of				is both	an ee)	(D) Reportable compensation from the	(E) Reportab compensat from relate	ion		(F) ated amo	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee)fficer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations 1099-MIS 1099-NE0	C/	orgai	rom the nization a organiza	
		dottod iirio)		ee			sated							
(15)										1				
(16)														
(17)														
(18)														
(19)														
(20)									0					
(21)				7										
(22)			*											
(23)						Ť								
(24)														
(25)		•. (
1b	Subtotal		1						275,653		0		9,	,913
c d	Total from continuation sheets to Part VII, Se Total (add lines 1b and 1c)								275,653		0		0	0 913,
2	Total number of individuals (including but not lir							vec			U		٥,	310
	reportable compensation from the organization											1	v l	1
3	Did the organization list any former officer, dire	ector, trustee, ke	v emi	olov	ee.	or h	iiahes	st co	ompensated		ſ		Yes	No
	employee on line 1a? If "Yes," complete Sched						-				. [3		Χ
4	For any individual listed on line 1a, is the sum of	•	-						•					
	the organization and related organizations grea	ter than \$150,00					plete	Sc	chedule J for suc	h		4		Х
5	Did any person listed on line 1a receive or accr						 ated	ora:	 anization or indiv	idual		4		^
	for services rendered to the organization? If "Ye	•			-			_				5		Χ
	tion B. Independent Contractors													
1	Complete this table for your five highest compe compensation from the organization. Report co											ax ye	ar.	
	(A) Name and business addr	ress							(B) Description of ser	vices	С	(C) ompen		
InTo	to Studio 6505 Woodward	d Ave Detroit, M	l 4820	02				Arc	chitectural desigr	n services			118	,000
														0
														0
														0
2	Total number of independent contractors (included more than \$100,000 of componentials from the	-	ted to	tho	se l	iste	d abo	ve)	who received					
	more than \$100,000 of compensation from the	organization					1							

Part VIII Statement of Revenue

		Check if Schedule O contains a respons	se or	note to any line in	this Part VIII			📙
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
S S	1a	Federated campaigns	1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	0				
g g	С	Fundraising events	1c	0				
fts,	d	Related organizations	1d	0				
Gil	е	Government grants (contributions)	1e	650,000			_	
ns,	f	All other contributions, gifts, grants, and		333,000				
itio		similar amounts not included above	1f	1,901,084		4.4		
ibu	g	Noncash contributions included in		1,001,001				
d C	9	lines 1a–1f	1g	\$ 0				
g E	h	Total. Add lines 1a–1f			2,551,084			
	- ''	Total. Add lines 1a-11		Business Code	2,001,004		·	
Program Service Revenue	2a	Organizational Consulting		900099	396,017	396,017		
	b	IT Managad Carriaga		900099	498,846	498,846		
	C	Building Managed Services		900099	172,568	172,568		
m (d	Financial Managed Services		900099	153,213	153,213		
Jrai Re		Training, Events and Workshops		900099	44,000	44,000		
o O	e	All other program service revenue		900099	44,000	44,000		
Δ.	q	Total. Add lines 2a–2f			1,264,644			
	3	Investment income (including dividends, in			1,204,044			
	3	other similar amounts)			208			208
	4	Income from investment of tax-exempt bon			0			200
	5				0			
	5	Royalties		(ii) Personal	U			
	6a	Gross rents 6a	-	()	*			
	_	Less: rental expenses 6b						
	b	Rental income or (loss) 6c	0	0				
	2	Net rental income or (loss)	U	U	0			
	d 7a	Gross amount from (i) Securi	ties	(ii) Other	U			
	1 a	sales of assets	1100	(ii) Outor				
		other than inventory 7a	0	0				
Φ	b	Less: cost or other basis	U	U				
nu	D	and sales expenses 7b	0	o				
Revenue	•	Gain or (loss) 7c	0	_				
	C d	Net gain or (loss)	U	l 0	0			
her	8a	Gross income from fundraising	<u> </u>	· · · · · ·	U			
Othe	oa	events (not including \$						
		of contributions reported on line 1c).						
		See Part IV, line 18	8a	0				
	b	Less: direct expenses	8b	0				
	C	Net income or (loss) from fundraising even			0			
	9a	Gross income from gaming activities.			J			
	Ju	See Part IV, line 19	9a	0				
	b	Less: direct expenses	9b	0				
	C	Net income or (loss) from gaming activities		· ·	0			
	10a	Gross sales of inventory, less			0			
	Iva	3.	10a	0				
	b		10a	_				
		=		_	0			
	С	Net income or (loss) from sales of inventor	y . .	Business Code	U			
Miscellaneous Revenue	11a			Dusilless Code	0			
scellaneo Revenue	b				0			
la Ver					0			
Re	C d	All other revenue			2,685	2,685		
Mis.	-	Total. Add lines 11a–11d			2,685	2,000		
_	<u>е</u> 12	Total revenue See instructions			2,000 3,818,621	1 267 329	0	208

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to	to any line in this Pa	art IX		X
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		·		·
	and domestic governments. See Part IV, line 21	290,736	290,736		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	298,402	85,067	200,642	12,693
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and		,		
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	1,178,491	1,011,910	163,927	2,654
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	13,944	13,944		
9	Other employee benefits	85,198	64,710	19,981	507
10	Payroll taxes	110,503	47,004	59,334	4,165
11	Fees for services (nonemployees):				
а	Management	0			
b	Legal	0			
С	Accounting	12,175		12,175	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.)	420,027	370,210	34,817	15,000
12	Advertising and promotion	2,638	715	1,476	447
13	Office expenses	83,202	47,472	35,715	15
14	Information technology	6,038	6,038		
15	Royalties	0			
16	Occupancy	101,917	101,917		
17	Travel	21,756	14,000	7,756	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	7,381	170		
20	Interest	16,503	19,588	-3,085	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	66,530	59,386		0
23	Insurance	9,985		9,985	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)		172 121		
а	Program supplies and subscriptions	156,382	153,121	586	2,675
b		0			
C		0			
d	All all an arm and a second	0	7.400	10.0==	0.10
e	All other expenses	19,643	7,126	12,277	240
25	Total functional expenses. Add lines 1 through 24e	2,901,451	2,293,114	569,941	38,396
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

Balance Sheet Part X

		Check if Schedule O contains a response or note to any line in this Part X.			<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	528,220	1	615,268
	2	Savings and temporary cash investments	520,481	2	520,689
	3	Pledges and grants receivable, net	667,917	3	1,546,824
	4	Accounts receivable, net	111,320	4	91,853
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0	5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	
Assets	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	
⋖	9	Prepaid expenses and deferred charges	14,066	9	159
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 1,350,784			
	b	Less: accumulated depreciation	406,568	10c	339,495
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	33,063
	16	Total assets. Add lines 1 through 15 (must equal line 33)	2,248,572	16	3,147,351
	17	Accounts payable and accrued expenses	86,707	17	88,484
	18	Grants payable	0	18	
	19	Deferred revenue	38,070	19	12,500
	20	Tax-exempt bond liabilities	0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
<u>ia</u> b		controlled entity or family member of any of these persons	0	22	
_	23	Secured mortgages and notes payable to unrelated third parties	309,352	23	281,691
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17–24). Complete			
		Part X of Schedule D	0	25	33,063
	26	Total liabilities. Add lines 17 through 25	434,129	26	415,738
es		Organizations that follow FASB ASC 958, check here X			
n E		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions	932,665	27	767,399
<u>ш</u>	28	Net assets with donor restrictions	881,778	28	1,964,214
Ĕ		Organizations that do not follow FASB ASC 958, check here			
F		and complete lines 29 through 33.			
0	29	Capital stock or trust principal, or current funds	0	29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds	0	31	
Net Assets or Fund Balances	32	Total net assets or fund balances	1,814,443	32	2,731,613
z	33	Total liabilities and net assets/fund balances	2,248,572	33	3,147,351

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

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?.

Form 990 (2022)

SCHEDULE A (Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

990 or Form 990-EZ.

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

Employer identification number Name of the organization 38-2825019 Nonprofit Enterprise at Work, Inc. Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes 12 of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. h Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, C its supported organization(s) (see instructions). You must complete Part IV, Sections A. D. and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III е functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations f Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) **Total**

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

Part II

	(Complete only if you check Part III. If the organization fa				-		der
Sac	ction A. Public Support	ilis to quality un	dei the tests h	sted below, pie	ase complete r	art III.)	
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and	(a) 2010	(6) 2010	(6) 2020	(d) 2021	(6) 2022	(i) Total
•	membership fees received. (Do not						
	include any "unusual grants.")						0
2	Tax revenues levied for the						
_	organization's benefit and either paid						
	to or expended on its behalf						0
3	The value of services or facilities				4		
	furnished by a governmental unit to the						
	organization without charge						0
4	Total. Add lines 1 through 3	0	0	0	0	0	0
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						0
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	0	, 0	0		0	0
8	Gross income from interest, dividends,						
•	payments received on securities loans,						
	rents, royalties, and income from		</td <td></td> <td></td> <td></td> <td></td>				
	similar sources						0
9	Net income from unrelated business						
	activities, whether or not the business is						
	regularly carried on	•					0
10	Other income. Do not include gain or	-					
10	loss from the sale of capital assets						
	(Explain in Part VI.)	4					0
11	Total support. Add lines 7 through 10						0
12	Gross receipts from related activities, etc. (s	oo instructions)				12	0
13	First 5 years. If the Form 990 is for the orga		and third fourth	or fifth tax year as	2 coction 501(c)(3)	14	
13	organization, check this box and stop here			-			
C							· · · · · · <u> </u>
	ction C. Computation of Public Su		•	/f \\		14	0.000/
14 15	Public support percentage for 2022 (line 6, or Public support percentage from 2021 Sched	1.1	-			15	0.00%
						l l	0.0070
16a	33 1/3% support test—2022. If the organization qualifies as						
b	33 1/3% support test—2021. If the organiz	ation did not check	a box on line 13	or 16a, and line 15	is 33 1/3% or more	, check this	
	box and stop here. The organization qualification	es as a publicly sup	ported organization	on			
17a	10%-facts-and-circumstances test—2022	2. If the organization	n did not check a l	oox on line 13, 16a	, or 16b, and line 1	4	.
	10% or more, and if the organization meets	the facts-and-circur	nstances test, che	eck this box and st	op here . Explain in		
	Part VI how the organization meets the facts	s-and-circumstance	s test. The organi	zation qualifies as a	a publicly supported	t	•
	organization						
b	10%-facts-and-circumstances test—202	•		·			
	15 is 10% or more, and if the organization m						
	in Part VI how the organization meets the fa		•	•			1
	organization						· · · · <u> </u>
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		

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) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	433,111	973,715	1,288,933	1,694,062	2,551,084	6,940,905
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	1,020,973	955,048	1,010,358	1,095,930	1,267,329	5,349,638
3	Gross receipts from activities that are not an						_
	unrelated trade or business under section 513 . $$.						0
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	1,454,084	1,928,763	2,299,291	2,789,992	3,818,413	12,290,543
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons	3,920	1,740	380	1,763	4,468	12,271
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	184,839	129,271	72,196	34,780	5,798	426,884
С	Add lines 7a and 7b	188,759	131,011	72,576	36,543	10,266	439,155
8	Public support (Subtract line 7c from						
	line 6.)						11,851,388
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	1,454,084	1,928,763	2,299,291	2,789,992	3,818,413	12,290,543
10a	Gross income from interest, dividends,	•					
	payments received on securities loans, rents,						
	royalties, and income from similar sources	11	23	142	208	208	592
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975		•				0
С	Add lines 10a and 10b	11	23	142	208	208	592
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on .						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	1,454,095	1,928,786	2,299,433		3,818,621	12,291,135
14	First 5 years. If the Form 990 is for the orga			•	(/(/		
	organization, check this box and stop here						
Sec	ction C. Computation of Public Su						
15	Public support percentage for 2022 (line 8, c	15	96.42%				
16	Public support percentage from 2021 Sched					16	93.55%
Sec	ction D. Computation of Investmer					<u> </u>	
17	Investment income percentage for 2022 (line	e 10c, column (f), d	ivided by line 13, c	olumn (f))		17	0.00%
18	Investment income percentage from 2021 Se					18	0.00%
19a	33 1/3% support tests—2022. If the organi						
_	not more than 33 1/3%, check this box and s	-			-		<u>X</u>
b	33 1/3% support tests—2021. If the organi						
	line 18 is not more than 33 1/3%, check this	_	=				=
20	Private foundation. If the organization did it	not check a box on	line 14, 19a, or 19	b, check this box a	and see instructions	8	

Supporting Organizations Part IV

(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

- 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.
- 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?
- 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.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	NO
	1		
	2		
	3a		
	3b		
	0.10		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	90		
	9c		
	10a		
	4.5		
	10b		
duile	A (Fo	rm 991	1 2022

Page **5**

Nonprofit Enterprise at Work, Inc.

Part	Supporting Organizations (continued)		1	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
C	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide</i>	110		
•	detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers.			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	1		
2	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		
Secti	on C. Type II Supporting Organizations		1	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations		Vaa	N ₀
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	NO
•	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			
04!	supported organizations played in this regard.	3		<u> </u>
	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	iction	S).	
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 Part VI how you supported a governmental entity (see	instruct	ions).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>	20		
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? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
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.	3b		

1 Check here if the organization satisfied the Integral Part Test as a qualifyin instructions. All other Type III non-functionally integrated supporting organization.	g tru:	st on Nov. 20, 1970 <i>(explain l</i>	•
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4	0	0
5 Depreciation and depletion	5	A	
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	0	0
Section 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	0	0
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	0	0
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 0.035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		0
2 Enter 0.85 of line 1.	2		0
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
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		0
7 Check here if the current year is the organization's first as a non-functional instructions).	ly inte	egrated Type III supporting o	organization (see

Part '	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Section	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported	1	
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organiza	ations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required—			
6	Other distributions (describe in Part VI). See instructions.		6_	
7	Total annual distributions. Add lines 1 through 6.		7	0
8	Distributions to attentive supported organizations to which the	ne organization is respor		
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2022 from Section C, line 6		9	0
10	Line 8 amount divided by line 9 amount		10	0.000
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			0
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required—explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2022			
a	From 2017			
<u> </u>	From 2018			
<u> </u>	From 2019			
<u>d</u>	From 2020			
e	From 2021			
f	Total of lines 3a through 3e	0	^	
<u>g</u>	Applied to underdistributions of prior years		0	^
<u>n</u>	Applied to 2022 distributable amount			0
	Carryover from 2017 not applied (see instructions)	0		
4	Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from	0		
4	Section D, line 7: \$ 0			
a	Applied to underdistributions of prior years		0	
b	Applied to 2022 distributable amount			0
С	Remainder. Subtract lines 4a and 4b from line 4.	0		
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.		0	
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain			
	in Part VI. See instructions.			0
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.	0		
8	Breakdown of line 7.			
<u>a</u>	Excess from 2018			
<u> </u>	Excess from 2019			
<u>c</u>	Excess from 2020			
d	Excess from 2021			
<u>e</u>	Excess from 2022 0			

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

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Nonprofit Enterprise at Work, Inc. Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds 1 Total number at end of year 2 Aggregate value of contributions to (during year) . . . Aggregate value of grants from (during year) 3 Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after July 25, 2006, and not Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and 9 balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: **b** Assets included in Form 990, Part X.

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

Part	Organizations Maintaining Collect	tions of Art, Histor	rical Treasures, or	Other Similar Asset	s (continued)						
3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its											
	collection items (check all that apply):		•								
а	Public exhibition	d	Loan or exchange pr	ogram							
b	Scholarly research	e	Other								
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain he	ow they further the org	anization's exempt purpo	ose in Part						
	XIII.	·	, ,								
5	During the year, did the organization solicit or	r receive donations of a	art, historical treasures	or other similar							
	assets to be sold to raise funds rather than to	be maintained as part	t of the organization's o	ollection?	Yes No						
Part	Part IV Escrow and Custodial Arrangements.										
	Complete if the organization answe		990, Part IV, line 9, o	or reported an amoun	it on Form						
	990, Part X, line 21.										
1a	Is the organization an agent, trustee, custodia	an or other intermediar	y for contributions or of	ther assets not							
	included on Form 990, Part X?				Yes No						
b	If "Yes," explain the arrangement in Part XIII	and complete the follow	wing table:								
	B				Amount						
C	Beginning balance		and the second s	1c	0						
d e	Additions during the year			1d 1e							
f	Ending balance			1f	0						
_	Did the organization include an amount on Fo				Yes X No						
2a	_		•								
b	If "Yes," explain the arrangement in Part XIII.	Check here if the expi	anation has been provi	ded on Part Alli	· · · · <u> </u>						
Part	V Endowment Funds. Complete if the organization answe	rad "Vaa" on Form (000 Part IV line 10								
			or year (c) Two years	back (d) Three years back	(e) Four years back						
1a	Beginning of year balance	0	0 (c) I wo years	, , ,	0 0						
b	Contributions	Ŭ			0 0						
C	Net investment earnings, gains,										
	and losses	. ()									
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance	0	0		0 0						
2	Provide the estimated percentage of the curre Board designated or quasi-endowment	ent year end balance (I %	line 1g, column (a)) nei	d as:							
a b	Permanent endowment										
C	Term endowment %										
•	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.									
3a	Are there endowment funds not in the posses		n that are held and adı	ministered for the							
	organization by:				Yes No						
	(i) Unrelated organizations				3a(i)						
	()				3a(ii)						
b	If "Yes" on line 3a(ii), are the related organization	· ·			3b						
4	Describe in Part XIII the intended uses of the	organization's endowr	nent funds.								
Part			000 Dart IV II.a. 44.	. C F 000 D	4 V . II 40						
	Complete if the organization answe										
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value						
1a	Land	0	53,000		53,000						
b	Buildings	0	1,135,782	858,796	276,986						
C	Leasehold improvements	0	0	0	0						
d	Equipment	0	162,002	152,493	9,509						
е	Other	0	0	0	0						

339,495

Part VII Investments—Other Securities.	"Voo" on Form 000	Dort IV line 11h See Form 000 Dort V line 12
·		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	0	
(2) Closely held equity interests	0	
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F) (G)		
<u>(O)</u>		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.).	0	
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. (Column (b) must equal Form 990, Part X, col. (B) line 13.).	0	
Part IX Other Assets.	V 000	Deat IV line 444 Con France 000 Deat V line 45
· · · · · · · · · · · · · · · · · · ·		Part IV, line 11d. See Form 990, Part X, line 15.
(a) Descr	iption	(b) Book value
(1)		
(2)		
(3)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) li	ine 15.)	0
Part X Other Liabilities.	,	•
	"Yes" on Form 990,	Part IV, line 11e or 11f. See Form 990, Part X,
line 25.		
1. (a) Descrip	tion of liability	(b) Book value
(1) Federal income taxes		0
(2) Operating lease liability		33,063
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) I	· · · · · · · · · · · · · · · · · · ·	,
2. Liability for uncertain tax positions. In Part XIII, provide the te		
organization's liability for uncertain tax positions under FASB AS	SC 740. Check here if the	e text of the footnote has been provided in Part XIII .

Par	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	leturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		040.004
1	Total revenue, gains, and other support per audited financial statements	1 3	3,819,621
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments		
a			
b		<u> </u>	
C C			
d		- 20	1 000
е 3	Subtract line 2e from line 1	2e 3	1,000 3,818,621
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1	0,010,021
a b			
C		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		3,818,621
	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		0,010,021
rai	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	Neturn.	
1	Total expenses and losses per audited financial statements	1 1 2	2,902,451
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		, ,
a		0	
b		<u> </u>	
C			
d	Other (Describe in Part XIII.)		
e		2e	1,000
3	Subtract line 2e from line 1		2,901,451
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		,,-
а			
b			
С		4c	0
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form</i> 990, <i>Part I, line</i> 18.)	5 2	2,901,451
Par	t XIII Supplemental Information.		
	ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation.	X, line

Schedule D (Fo		Nonprofit Enterprise at Work, Inc.	38-2825019	Page 5
Part XIII	Supplem	ental Information (continued)		
			U)	
		4 / 3		
		*		
		V		
		·····		
		Y		

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Department of the Treasury
Internal Revenue Service

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

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization							Employer identification number		
Nonprofit Enterprise at Work, Inc.							8-2825019		
Part I General Information	on on Grants	and Assistance							
1 Does the organization mainta	ain records to su	bstantiate the amou	unt of the grants or assi	istance, the grantees'	eligibility for the grants o	r assistance, and			
the selection criteria used to	award the grant	s or assistance? .					. X Yes No		
2 Describe in Part IV the organ	ization's proced	ures for monitoring	the use of grant funds	in the United States.					
Part II Grants and Other	Assistance to	Domestic Orga	nizations and Dom	estic Government	s. Complete if the org	janization answere	ed "Yes" on Form		
990, Part IV, line 21	990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.								
1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant		
or government	, ,	(if applicable)	grant	cash assistance	(book, FMV, appraisal, other)	noncash assistance	or assistance		
(1) Black Men Read							Fiscal Sponsorship		
1830 Norfolk Ave Ypsilanti, MI 48198	85-2972266		14,529	• •	\smile				
(2) Mentor2Youth							Fiscal Sponsorship		
PO Box 980270 Ypsilanti, MI 48198	38-3855138	501(c)(3)	8,370						
(3) Michigan Unitarian Universalist Soc							Fiscal Sponsorship		
4220 Arlington Dr Royal Oak, MI 4807	46-2871970	501(c)(3)	25,000						
(4) Washtenaw Care-Based Safety							Fiscal Sponsorship		
101 E Huron Ann Arbor, MI 48104			213,252	•					
(5) Willis Patterson Our Own Thing Ch							Fiscal Sponsorship		
1410 S Zeeb Rd Ann Arbor, MI 48103	38-3080501	501(c)(3)	14,064						
(6)									
(7)									
(7)		4.5) `						
(8)									
(9)									
	10								
(10)									
(11)									
(12)									
\\ <u>`~</u>)									
2 Enter total number of section	501(c)(3) and c	ı lovernment organiz:	ations listed in the line	1 table			4		
3 Enter total number of other o		_					 1		

Schedule I (Form 990) 2022

Page **2**

	ants and Other Assistance to Det			organization answ	ered "Yes" on Form 990	, Part IV, line 22.
) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
4						
5						
6					2	
7						
Part IV Su	oplemental Information. Provide	the information r	equired in Part I, lin	e 2; Part III, column	(b); and any other addi	tional information.
Part I Line 2 NE	V provides 'Model A' (Comprehensive)	and 'Model C' (Pre	e-approved Grant Relat	ionship) Fiscal Sponso	orship for entities or	
projects which a	ign with NEW's mission. Fiscal Sponse	orship is generally ι	utilized for a specific pro	oject, and all sponsors	hips have a	
defined timeline	and budget. It allows an entity to evalu	ate support for thei	r program before proce	eding further. Fiscal s	ponsorships	
are approved by	NEW's Finance Committee. A Fiscal S	Sponsorship Agreen	ment is signed with the	sponsored entity befo	re any funds are	
received or disb	ursed. Donations are received by NEW	and deposited to a	ı separate NEW Fiscal	Sponsor Checking Ac	count. All donations and	
expenses are re	corded on NEW's books as the Fiscal	Sponsor. To reques	t funds, the sponsored	entity submits a Disbu	ursement Request with	
supporting docu	mentation. Funds are disbursed as dire	ected and in accord	ance with the project b	udget. A 'Donation and	d Disbursement	
Report' is provid	ed to the sponsored entity regularly.					
	•					

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.

Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number Nonprofit Enterprise at Work, Inc 38-2825019 Form 990, Part III, Line 4d: Program Service Expenses: 307,715, Grants and allocations: 0, Revenue: 0 NEW is undertaking a special non-ongoing project: the NEW Center Transformation The NEW Center Transformation intends to transform our physical space (the NEW Center) to embody our mission, vision and values. The new NEW Center will provide a community space and programming that serves to welcome and deepen connections between mission-driven people. NEW is currently developing the scope and timeline for the project and conducting a feasibility study. Form 990, Part III, Line 4a continued: In fiscal year 2022-23, NEW served 170 organizations with managed services: IT Managed Services: 60 organizations, Financial Managed Services: 56 organizations - comprised of 43 monthly bookkeeping clients and 13 fiscal sponsorship clients, Building Managed Services: 54 organizations - comprised of 17 tenants, 14 affiliates, and 23 conference room rentals Form 990, Part VI, Section B, Line 11b: The full board reviews the Form 990 prior to filing. Form 990, Part VI, Section B, Line 12c: Each director is asked annually to disclose conflicts and affirm their ongoing adherence to the conflict of interest policy. Form 990, Part VI, Section B, Line 15a: The board reviews the compensation of the CEO annually. Form 990, Part VI, Section C, Line 19: The organization's governing documents, conflict of interest policy, and financial statements are available to the public upon request. Form 990, Part IX, Line 11g: Fees and stipends paid to external facilitators/speakers \$90,850; Building improvements, including scoping work related to future construction project \$291,930; HR services \$10,500; Board Governance services \$3,563; Marketing/Communications services \$15,184; Strategic Planning services \$8,000

OMB No. 1545-0047

Open to Public

Inspection

Schedule O (Form 990) 2022	Page	2
Name of the organization	Employer identification number	
Nonprofit Enterprise at Work, Inc.	38-2825019	
<u>&</u>		