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CLIENT'S COPY



November 27, 2024

Naomi's Village Inc 6008 Blue Spruce Lane McKinney, TX 75070

Naomi's Village Inc:

Enclosed are the original and one copy of the 2023 Exempt Organization return, as follows:

2023 Form 990

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

We prepared the return from information you furnished us without verification. Upon examination of the return by tax authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such possible examinations.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return.

Sincerely,

KHA Accountants, PLLC

WHA accountants, PLLC

Form **8868**

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Taxpayer identification number (TIN) Name of exempt organization, employer, or other filer, see instructions. Type or **Print** NAOMI'S VILLAGE INC 45-5242323 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 6008 BLUE SPRUCE LANE return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. 75070 MCKINNEY, TX Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return | Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 12 05 Form 8870 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of LOREEN KAYLOR 6008 BLUE SPRUCE LANE - MCKINNEY, TX 75070 Telephone No. 2147782995 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN)
 If this is for the whole group, check this . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15 , 20 24 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 23 or tax year beginning _____, 20 ____, and ending ___ If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

A F	or the	2023 calendar year, or tax year beginning	and	ending		
B c	heck if pplicable	C Name of organization			D Employer identific	cation number
	Addres	NAOMI'S VILLAGE INC				
	Name change				45-52423	23
	Initial	Number and street (or P.O. box if mail is not del	ivered to street address)			
	Final return/	6008 BLUE SPRUCE LANE	,	Room/suite	E Telephone number 21477829	
	termin- ated		ZIP or foreign postal code		G Gross receipts \$	2,729,675.
	Amend		.		H(a) Is this a group re	eturn
	Application	F Name and address of principal officer:				? Yes X No
	pendin	SAME AS C ABOVE			H(b) Are all subordinates in	
<u> </u>	ax-exe	empt status: X 501(c)(3) 501(c) ()	(insert no.) 4947(a)(1)	or 527		list. See instructions
	Vebsit				H(c) Group exemptio	n number
			sociation Other	L Year	of formation: 2012 N	M State of legal domicile: TX
Pa	ırt I	Summary				
•	1	Briefly describe the organization's mission or most	significant activities: TO R.	AISE O	PHANS TO ADU	JLTHOOD
ű	!	WITH MAXIMUM EDUCATIONAL,	LEADERSHIP AND	SPIRIT	UAL TRAININ	G IN ORDER
Activities & Governance	l		ntinued its operations or dispos	sed of more	than 25% of its net ass	
ove.		Number of voting members of the governing body			3	11
ر م		Number of independent voting members of the gov				11
es 6		Total number of individuals employed in calendar y				10
Ę		Total number of volunteers (estimate if necessary)				170
Vcti		Total unrelated business revenue from Part VIII, co				0.
_	b	Net unrelated business taxable income from Form	990-T, Part I, line 11	<u></u>		0.
					Prior Year	Current Year
<u>•</u>	8	Contributions and grants (Part VIII, line 1h)			2,111,397.	2,312,945.
enc	9	Program service revenue (Part VIII, line 2g)			31,650.	124,895.
Revenue	ı	Investment income (Part VIII, column (A), lines 3, 4,			17,296.	60,806.
_	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c	, 9c, 10c, and 11e)		0.	0.
		Total revenue - add lines 8 through 11 (must equal			2,160,343.	
	l	Grants and similar amounts paid (Part IX, column (1,642,299.	2,226,303.
	l	Benefits paid to or for members (Part IX, column (A			0.	0.
es	15	Salaries, other compensation, employee benefits (F			452,625.	440,671.
Expenses	16a l	Professional fundraising fees (Part IX, column (A), li	20 01		0.	0.
ă	b d	Total fundraising expenses (Part IX, column (D), line	•		100 040	000 401
ш	'' '	Other expenses (Part IX, column (A), lines 11a-11d,			198,842.	
		Total expenses. Add lines 13-17 (must equal Part เว			2,293,766.	2,939,465.
	19	Revenue less expenses. Subtract line 18 from line	12		-133,423.	-440,819.
SOF				Ве	ginning of Current Year	End of Year
sset	20				795,322.	338,341.
Net Assets or Fund Balances	21				11,192.	20,453.
Z ₋	rt II	Net assets or fund balances. Subtract line 21 from Signature Block	line 20		784,130.	317,888.
		Ities of perjury, I declare that I have examined this return,	including accompanying echodular	e and etatome	and to the heet of my	/ knowledge and helief it is
		t, and complete. Declaration of preparer (other than office			· · · · · · · · · · · · · · · · · · ·	Kilowieuge allu bellel, it is
ti uo,	001100	, and complete. Deciditation of preparer (other than office	i) is based on an information of wi	non proparor	nas any knowledge.	
Sigi	,	Signature of officer			Date	
Her		LOREEN KAYLOR, EXECUTIVE I	OTRECTOR			
Her		Type or print name and title	<u> </u>			
		Print/Type preparer's name	Preparer's signature		Date Check	PTIN
Paid			CYNTHIA GRIECO	1	1/27/24 if self-employ	
Prep	ı		PLLC			1-4277254
	Only	Firm's address 4880 LONG PRAIRIE)	THIN SEIN S	
	,	FLOWER MOUND, TX			Phone no. 97	2-221-2500
May	the IF	S discuss this return with the preparer shown about			1	X Yes No

Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO RESCUE KENYAN ORPHANS FROM POVERTY AND DISEASE, TO PROVIDE FOR THEM
	A SAFE, LOVING NUTURING HOME THAT IS CHRIST CENTERED IN ITS VALUES,
	COUNSELING, TEACHING AND DISCIPLINARY APPROACH.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$2, 226, 303. including grants of \$2, 226, 303.) (Revenue \$
	CHILDREN'S PROGRAMS: TO RESCUE KENYAN ORPHANS FROM POVERTY AND DISEASE.
	TO PROVIDE FOR THEM A SAFE, LOVING NURTURING HOME THAT IS CHRIST
	CENTERED IN ITS VALUES, COUNSELING, TEACHING AND DISCIPLINARY APPROACH.
	CENTERED IN 115 VALUES, COORSELLING, TEACHING AND DISCIPLINARI AFFROACH.
4b	(Code:) (Expenses \$ 339,627. including grants of \$) (Revenue \$ 129,895.
40	
	SERVING AT NAOMI'S VILLAGE IN MAAI MAHIU, KENYA. THE VOLUNTEER PROGRAM
	FUNDS PROVIDED FOR THE ROOM, BOARD AND TRAVEL OF THE MISSIONARIES WHO
	SUPPORTED NAOMI'S VILLAGE OUTREACH PROGRAMS AND UNDERTAKINGS. THE
	VOLUNTEERS PROGRAM LASTS FOR ONE TO TWO WEEKS AND THE INTERNSHIP
	PROGRAM LASTS SIX TO EIGHT WEEKS.
4c	(Octor) (Ferrore 6
40	(Code:) (Expenses \$
	Other program convices (Describe on Schodule O.)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses 2,565,930.
	Form 990 (2023

Form 990 (2023) NAOMI'S VILLAGE INC 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	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		Х
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, 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	<u> </u>		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
′		7		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	-		
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_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			٦,
	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			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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	<u> </u>		
ızu	, ,	12a	Х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
b		12b		V X
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Λ	
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		Х	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		_
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		v	
	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		7.7	
	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		<u> X</u>
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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	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			
_	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
		_		

Form 990 (2023) NAOMI'S VILLAGE INC Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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			l
	Schedule J	23		<u> </u>
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			37
	Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		\vdash
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
4	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		\vdash
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		\vdash
2 5a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			l
	"Yes," complete Schedule L, Part IV	28a		<u> X</u>
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			7.7
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
21	contributions? If "Yes," complete Schedule M	30 31		X
31 32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		<u> </u>
32	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		
-	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		<u> </u>
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		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			l
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	
Pai	Note: All Form 990 filers are required to complete Schedule O **T V Statements Regarding Other IRS Filings and Tax Compliance	38	X	Щ_
· u	Check if Schedule O contains a response or note to any line in this Part V			
	Shook it Schedule O contains a response of flote to any line in this Fait V		Yes	N _C
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		168	No
b	Enter the number reported in box 3 or Form 1090. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	1c		
332004	12-21-23	Form	990	(2023)

Form 990 (2023)

NAOMI'S VILLAGE INC

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	2a 10							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	X					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х				
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								
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	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 Advanced in the Financi	counts (FBAR).							
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?	5b		X				
С	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit							
	any contributions that were not tax deductible as charitable contributions?		6a		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons 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 ser	vices provided to the payor?	7a		X				
b			7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required			٠,,				
	to file Form 8282?		7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	7e						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?								
Ť	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
g			7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year?	•	8						
9	Sponsoring organizations maintaining donor advised funds.		0						
	a Did the sponsoring organization make any taxable distributions under section 4966?								
b									
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12	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.)	11b							
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						
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1							
	organization is licensed to issue qualified health plans	13b							
	Enter the amount of reserves on hand	13c							
			14a		X				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner		15		x				
	excess parachute payment(s) during the year?								
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		X				
47	If "Yes," complete Form 4720, Schedule O.	2. 342							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act		4-						
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17						
	If "Yes," complete Form 6069.								

332005 12-21-23

Form **990** (2023)

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 11 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 11 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Х 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 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? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes " describe 12c on Schedule O how this was done Х Did the organization have a written whistleblower policy? 13 13 Х 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. **X** Own website Another's website Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, raddress and telephone in the property who are sesses the preparation's books and records

Form **990** (2023)

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

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

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

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

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than o	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) LOREEN KAYLOR	40.00	х						75 165	0.	
(2) ROBERT MENDONSA	2.00	Λ						75,165.	0.	0.
PRESIDENT	2.00	Х						70,000.	0.	0.
(3) JULIE H. MENDONSA	2.00									
SECRETARY		Х						50,000.	0.	0.
(4) RYAN ROSS CHAIRMAN	2.00	х						0.	0.	0.
(5) TODD LIDDELL	2.00	Λ						0.	0.	· ·
TREASURER	2.00	х						0.	0.	0.
(6) LEI WANG	2.00									
DIRECTOR		Х						0.	0.	0.
(7) SUZANNE MCCLUSKEY	2.00									
DIRECTOR		Х						0.	0.	0.
(8) ROB COOK	2.00								_	_
DIRECTOR		Х						0.	0.	0.
(9) ROSS TRAVIS	2.00	7.7								_
01RECTOR (10) BIANCE SMITH	2.00	Х						0.	0.	0.
DIRECTOR	2.00	Х						0.	0.	0.
(11) MICHAEL PICKENS	2.00							•		
DIRECTOR		х						0.	0.	0.

Form 990 (2023)

	990 (2023) NAOMI'S V	/ILLAGE	IN	C						45-52	423	323	Pa	age 8
Par	t VII Section A. Officers, Directors, Trus	tees, Key Emp	loy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
	(A) Name and title Average hours per week (list any				ss per	ition more son i	than o s both or/trus	an	(D) (E) Reportable Reportable compensation compensation from related			on amount of other		
		hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)		fronga orga and	pensa om the anizati d relate inizatio	e ion ed
1b	Subtotal								195,165.		0.			0.
	Total from continuation sheets to Part VII								195,165.		0.			0.
<u>_d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but no								•	000 of reportable	0.			0.
	compensation from the organization	or invinced to the	036	iiste	u au	ove) WII	016	scerved more than \$100,	ooo of reportable				0
													Yes	No
3	Did the organization list any former officer,	,	,	,	•	,	,	•		,				Х
4	line 1a? If "Yes," complete Schedule J for so For any individual listed on line 1a, is the su										····	3		Λ
	and related organizations greater than \$150										[4		Х
5	Did any person listed on line 1a receive or a	ccrue compen	sati	on fr	om	any	unre	elate	ed organization or individ	dual for services				
	rendered to the organization? If "Yes," com	plete Schedule	Jf	or su	ıch r	oers	on .					5		X
1	tion B. Independent Contractors Complete this table for your five highest con	mnensated ind	ene	nder	nt co	ntra	actor	rs th	nat received more than \$	100 000 of comp	ensati	on fro	m	
	the organization. Report compensation for t	•	•											
	(A)				_				(B)		0.	(C		_
	Name and business	address	NC	ONE	5				Description of s	ervices		omper	nsatio	11
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot lin	nited	d to t	thos		ted	above) who received mo	ore than				
	. ,										-	orm 9	990 (2	2023)

Form	1 990	(2	2023) NAOMI'S VILLA	AGE INC			45-5242	323 Page 9
Pa	rt VI	Ш	Statement of Revenue					
			Check if Schedule O contains a response	e or note to any lin				
					(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
					Total revenue	function revenue	business revenue	from tax under
								sections 512 - 514
ts ts	1 a	а	Federated campaigns1a					
Contributions, Gifts, Grants and Other Similar Amounts	k	b	Membership dues1b					
S, G	(С	Fundraising events1c					
ar /	(Related organizations 1d					
s, G mila	6	е	Government grants (contributions) 1e					
io	f	f	All other contributions, gifts, grants, and					
but				,312,945.				
o tri	ç	g	Noncash contributions included in lines 1a-1f					
Col	ŀ	h	Total. Add lines 1a-1f		2,312,945.			
				Business Code				
ø	2 8	а	MISSION AND INTERNSHIP	611710	124,895.	124,895.		
·vic	k	b						
Ser		С						
am eve		d						
Program Service Revenue		е						
Pro	f	f	All other program service revenue					
		g	Total. Add lines 2a-2f		124,895.			
	3	_	Investment income (including dividends, inter					
			other similar amounts)	•	2,958.			2,958.
	4		Income from investment of tax-exempt bond		,			•
	5		Royalties					
			(i) Real	(ii) Personal				
	6 a	а	Gross rents 6a					
	_		Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)	•				
			Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 288,877					
	k	b	Less: cost or other basis					
e			and sales expenses 7b 231,029					
evenue		С	Gain or (loss) 7c 57,848					
3ev			Net gain or (loss)		57,848.			57,848.
Other R			Gross income from fundraising events (not		•			•
oth			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18	а				
	ŀ	b	Less: direct expenses					
			Net income or (loss) from fundraising events					
			Gross income from gaming activities. See					
			Part IV, line 19	а				
	ŀ	b	Less: direct expenses 9					
			Gross sales of inventory, less returns					
			and allowances 10)a				
	k	b	Less: cost of goods sold 10					
			Net income or (loss) from sales of inventory	•				
			,,	Business Code				
Miscellaneous Revenue	11 a	а						
nec	k	b						
ella		С						
lisc Re			All other revenue					
Σ			Total. Add lines 11a-11d					

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2,498,646.

12 Total revenue. See instructions

	□ 990 (2023) NAOMI 'S VILI It IX Statement of Functional Expense			45-52	42323 Page 10
	on 501(c)(3) and 501(c)(4) organizations must comp		ar arganizations must son	anlata aalumn (A)	
Secti					
	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b. 9b. and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising
1	Grants and other assistance to domestic organizations		ехрепзез	general expenses	expenses
•	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				
Ū	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	2,226,303.	2,226,303.		
4	Benefits paid to or for members	, . ,	, , , , , , , ,		
5	Compensation of current officers, directors,				
_	trustees, and key employees	22,923.	13,911.	9,012.	
6	Compensation not included above to disqualified	,	,	,	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	387,180.	225,838.	161,342.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	30,568.	18,341.	12,227.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal	713.		713.	
С	Accounting	39,912.		39,912.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	10 515		10 000	0 510
	column (A), amount, list line 11g expenses on Sch 0.)	12,715.		10,203.	2,512. 35,267.
12	Advertising and promotion	35,267.	2 227	24 002	35,26/.
13	Office expenses	26,320.	2,227.	24,093.	
14	Information technology				
15	Royalties	3,430.		3,430.	
16	Occupancy	31,567.	3,534.	28,033.	
17	Travel	31,307.	3,334.	20,033.	
18	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,190.		1,190.	
23	Insurance	225.		225.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	65:	5 :		
а	VOLUNTEER PROGRAM EXPEN	63,574.	63,574.	41 000	
b	BANK FEES & CREDIT CARD	41,003.	11 000	41,003.	
С	EQUIPMENT	11,089.	11,089.	4 272	
d	PRINTING & POSTAGE	4,373.	1 112	4,373.	
	All other expenses	1,113.	1,113.	225 756	27 770
<u>25</u>	Total functional expenses. Add lines 1 through 24e	2,939,465.	2,565,930.	335,756.	37,779.
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 (1997) (1997) (1997)				

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Check here _____ if following SOP 98-2 (ASC 958-720)

Form 990 (2023) Part X Balance Sheet

Pa	rt X	Balance Sneet					
		Check if Schedule O contains a response or I	note to any	/ line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			657,211.	1	227,217.
	2	Savings and temporary cash investments			138,111.	2	105,173.
	3	Pledges and grants receivable, net			,	3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su		, ,			
		controlled entity or family member of any of the				5	
	6	Loans and other receivables from other disqu	•				
		under section 4958(f)(1)), and persons describ	-			6	
S	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			8		
As	9	B				9	
	l	Land, buildings, and equipment: cost or othe					
		basis. Complete Part VI of Schedule D		11,910.			
	b			5,959.	0.	10c	5,951.
	11	Investments - publicly traded securities			11	•	
	12	Investments - other securities. See Part IV, lin		12			
	13	Investments - program-related. See Part IV, lir		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must e		795,322.	16	338,341.	
	17	Accounts payable and accrued expenses			·	17	·
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Comple		ı		21	
S	22	Loans and other payables to any current or fo	ormer offic				
ij		trustee, key employee, creator or founder, su	bstantial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of the				22	
Ë	23	Secured mortgages and notes payable to unr	elated thir	d parties		23	
	24	Unsecured notes and loans payable to unrela	ted third p	oarties		24	
	25	Other liabilities (including federal income tax,	payables t	to related third			
		parties, and other liabilities not included on lin	nes 17-24).	. Complete Part X			
		of Schedule D			11,192.	25	20,453.
	26	Total liabilities. Add lines 17 through 25			11,192.	26	20,453.
		Organizations that follow FASB ASC 958, o	heck here	X			
ses		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27	Net assets without donor restrictions			430,524.	27	297,906.
Ва	28	Net assets with donor restrictions			353,606.	28	19,982.
pu		Organizations that do not follow FASB ASC	958, che	ck here			
Ę		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fun				29	
set	30	Paid-in or capital surplus, or land, building, or	equipmer	nt fund		30	
As	31	Retained earnings, endowment, accumulated				31	
Net	32	Total net assets or fund balances			784,130.	32	317,888.
	33	Total liabilities and net assets/fund balances		ı	795,322.	33	338,341.
							Form 990 (20)

NAOMI'S VILLAGE INC

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>				
1	Total revenue (must equal Part VIII, column (A), line 12)		2,49				
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,93	9,4	65 .		
3	Revenue less expenses. Subtract line 2 from line 1	3	-44	0,8	19.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	78	4,1	30.		
5	Net unrealized gains (losses) on investments	5	-4	8,8	18.		
6							
7	Investment expenses	7					
8	Prior period adjustments	8	2	3,3	96.		
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))						
Pa	rt XII Financial Statements and Reporting	•		7,8			
	Check if Schedule O contains a response or note to any line in this Part XII						
	•			Yes	No		
1	Accounting method used to prepare the Form 990: X Cash Cash Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.						
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.					
За	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?		За		Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b				
			Form	990	(2023)		

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

		NAOM	T 2 ATTTWG	D INC			4	3-3242323			
Pa	art I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.				
The	organ	zation is not a private found									
1		A church, convention of ch					I)(A)(i).				
2	一	A school described in sect i					<i>X X Y</i>				
3	H	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,									
7		city, and state:	ation operated in cor	ijanotion with a noopital	accombca	III SCCIIO	11 17 0(b)(1)(A)(iii). Entor	the nospital s name,			
_			or the benefit of a col	logo or university ewned	l or operate	od by a go	worpmontal unit describe	nd in			
5		An organization operated for		lege or university owned	or operati	eu by a go	iverninental unit describe	eu III			
_		section 170(b)(1)(A)(iv). (C									
6	Ш	A federal, state, or local gov	-								
7		An organization that norma	•	ntial part of its support fr	om a gove	ernmental	unit or from the general _l	oublic described in			
		section 170(b)(1)(A)(vi). (C	omplete Part II.)								
8	Ш	A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Part	t II.)						
9		An agricultural research org	anization described	in section 170(b)(1)(A)(i	ix) operate	ed in conju	ınction with a land-grant	college			
		or university or a non-land-g	rant college of agricu	ulture (see instructions).	Enter the I	name, city	, and state of the college	or			
		university:									
10	X	An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership fees, and	d gross receipts from			
		activities related to its exem	npt functions, subject	t to certain exceptions; a	and (2) no	more than	33 1/3% of its support f	rom gross investment			
		income and unrelated busin	•	•				-			
		See section 509(a)(2). (Cor		,			, 0	,			
11		An organization organized a	•	vely to test for public sat	fety See	section 50)9(a)(4).				
12	H	An organization organized a	•		•			nurnoses of one or			
		more publicly supported or	•	•	-		•				
		lines 12a through 12d that	-					SHOOK THE BOX OH			
_		¬	* *					air in a			
а		Type I. A supporting orga	•		•	_					
		the supported organization		• • • •	majority o	it the direc	tors or trustees of the st	apporting			
		organization. You must o	-								
k)	Type II. A supporting org	•					-			
		control or management o			ame perso	ns that co	ntrol or manage the supp	ported			
		organization(s). You mus									
C	;		grated. A supporting	g organization operated	in connect	ion with, a	and functionally integrate	ed with,			
	_	its supported organization	n(s) (see instructions)	. You must complete F	Part IV, Se	ctions A,	D, and E.				
C	ı	Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection w	rith its supported organiz	zation(s)			
		that is not functionally int	egrated. The organiz	ation generally must sati	isfy a distr	ibution rec	quirement and an attentiv	/eness			
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V.				
e	, L	Check this box if the orga	nization received a v	vritten determination from	m the IRS	that it is a	Type I, Type II, Type III				
		functionally integrated, or	Type III non-function	nally integrated supporting	ng organiz	ation.					
f	Ente	r the number of supported o	organizations								
ç		ride the following information	about the supporte	d organization(s).							
	() Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount of monetary	(vi) Amount of other			
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)			

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

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

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more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the			-	•		-		
	b		-					10% or
organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		· · · · · · · · · · · · · · · · · · ·						
AS BY A COUNTY OF THE PROPERTY		-		-	• •	•		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a		

332022 12-21-23

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2254617.	2413552.	2386340.	2143048.	2437844.	11635401.
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	2254617.	2413552.	2386340.	2143048.	2437844.	11635401.
7 <i>a</i>	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c	: Add lines 7a and 7b						0.
8	Public support. (Subtract line 7c from line 6.)						11635401.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	2254617.	2413552.	2386340.	2143048.	2437844.	11635401.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	89,505.	61,376.	65,656.	17,297.	60,803.	294,637.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	: Add lines 10a and 10b	89,505.	61,376.	65,656.	17,297.	60,803.	294,637.
	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.)	2344122.	2474928.	2451996.	2160345.	2498647.	11930038.
14	First 5 years. If the Form 990 is for the	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3) organizatio	on,
	check this box and stop here						
	ction C. Computation of Publi						
	Public support percentage for 2023 (li		•	olumn (f))		15	97.53 %
	Public support percentage from 2022					16	97.50 %
	ction D. Computation of Inves						2 47 %
	Investment income percentage for 20					17	2.47 %
	Investment income percentage from 2					18	2.50 %
19a	33 1/3% support tests - 2023. If the						v
b	more than 33 1/3%, check this box are 33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, chec						
20	Private foundation If the organization	n did not obook a l	ooy on line 14 10c	or 10h obook th	ic hay and acc inc	ruotiono	

Т..

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
За		
J.		
3b		
3c		
4a		
4b		
4c		
70		
5a		
5b		
5c		
6		
7		
8		
J		
9a		
9b		
9с		
10a		
10h		
10b	000\	

Par	TIV Supporting Organizations (continued)			
			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		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion 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			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	rs,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	ed		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	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,			
C1	supervised, or controlled the supporting organization.	2		
Seci	tion C. Type II Supporting Organizations			
			Yes	No
	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	4		
Sect	the supported organization(s). tion D. All Type III Supporting Organizations	1		
-	tion 217th Type in cupporting Craumations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	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		
	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		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc	tions).		
а	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 instruction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	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		
а	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	2b		
	these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below.	Z D		
	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</i> "Yes" or "No" provide details in Part VI.	3a		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
~	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

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	, , , , , , , , , , , , , , , , , , , ,			
1	Check here if the organization satisfied the Integral Part Test as a qualifying		· ·	Part VI). See instructions.
Sect	All other Type III non-functionally integrated supporting organizations must ion A - Adjusted Net Income	complete	(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		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
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-functionall	y integrate	ed Type III supporting orga	nization (see
	instructions)	. •	5	•

Schedule A (Form 990) 2023

Pai	t v Type III Non-Functionally integrated 509(a)(3) Supporting Orga	nizations _{(continu}	ıed)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.	SVIGO GOLDING III		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.	·· J -···		8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributior Pre-2023	ns	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7:				
a	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
-	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				

Schedule A (Form 990) 2023

Schedule B

(Form 990)

Schedule of Contributors

2000

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

2023

OMB No. 1545-0047

NAOMI'S VILLAGE INC 45-5242323 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

NAOMI'S VILLAGE INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	COVINGTON, KY 41015	\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	WILMINGTON, DE 19809	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	COLUMBUS, GA 31906	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	COLUMBUS, GA 31902	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	JENKINTOWN, PA 19046	\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

Name of organization

Employer identification number

NAOMI'S VILLAGE INC

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	MANSFIELD, OH 44904	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	MCKINNEY, TX 75070	\$\$\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	FORT WORTH, TX 76110	\$\$,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	SAN FRANCISCO, CA 94105	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$\$ \$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	ALLEN, TX 75013	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

NAOMI'S VILLAGE INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional additional copies of Part I if additional copi	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$5,150.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$5,187.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	CENTERVILLE, TX 75833	\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	SOUTH LEBANON, OH 45065	\$5,000 .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17_	MANSFIELD, OH 44904	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18_	FLOWER MOUND, TX 75022	\$5,000•_	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

NAOMI'S VILLAGE INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of Part I if additional transfer of the copies of the c	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	HINSDALE, IL 60521	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	STRASBURG, PA 17579	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21	PARADISE, PA 17562	\$10,842.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22	ANNAPOLIS, MD 21409	\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23	ALPHARETTA, GA 30009	\$12,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

Name of organization

Employer identification number

NAOMI'S VILLAGE INC

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
25	DALLAS, TX 75214	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
26	MOUNTAIN VIEW, CA 94040	\$\$ \$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
27	COLUMBUS, GA 31904	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
28	HINSDALE, IL 60521	\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
29	SAN FRANCISCO, CA 94105	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
30	DALLAS, TX 75254	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

Name of organization

Employer identification number

NAOMI'S VILLAGE INC

(a) No.	(b) Name, address, and ZIP + 4		
31	SPARTANBURG, SC 29304	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
32	ORLANDO, FL 32832	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33	LANTANA, TX 76226	\$6,550.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 3

Name of organization Employer identification number

NAOMI'S VILLAGE INC

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

Page 4

Name of organization **Employer identification number** NAOMI'S VILLAGE INC 45-5242323 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

NAOMI'S VILLAGE INC

Employer identification number 45-5242323

Pai	t I Organizations Maintaining Donor Advised	d Funds or Other S	imilar Funds or A	Accounts. Con	nplete if the	
	organization answered "Yes" on Form 990, Part IV, line	e 6.				
		(a) Donor advise	d funds	(b) Funds and ot	her accounts	
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in w	vriting that the assets he	ld in donor advised fu	unds		
	are the organization's property, subject to the organization's $\boldsymbol{\varepsilon}$	exclusive legal control?			Yes	No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that gra	ant funds can be used	d only		
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for an	y other purpose conf	erring		
	impermissible private benefit?				Yes	No
Pai			s" on Form 990, Part	IV, line 7.		
1	Purpose(s) of conservation easements held by the organization		-			
	Preservation of land for public use (for example, recreat	tion or education)	Preservation of a hi			
	Protection of natural habitat		Preservation of a ce	ertified historic stru	cture	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contrib	ution in the form of a			
	day of the tax year.				e End of the Ta	x rear
_						
b						
C	Number of conservation easements on a certified historic stru			. 2c		
d	Number of conservation easements included on line 2c acquir					
2	on a historic structure listed in the National Register				. tov	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or t	erminated by the orga	anization during the	e lax	
4	year Number of states where property subject to conservation eas	oment is located				
5	Does the organization have a written policy regarding the peri		ion, handling of			
3	violations, and enforcement of the conservation easements it	- · · · ·	•		Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		nd enforcing conserva		_	110
·		namamig or molations, at	.a		9	
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and en	forcing conservation	easements during t	he vear	
	3, 1 3,	3	3	3	, ,	
8	Does each conservation easement reported on line 2d above	satisfy the requirements	of section 170(h)(4)(E	3)(i)		
	and section 170(h)(4)(B)(ii)?				Yes	No
9	In Part XIII, describe how the organization reports conservation	on easements in its rever	nue and expense state	ement and		
	balance sheet, and include, if applicable, the text of the footne	ote to the organization's	financial statements	that describes the		
	organization's accounting for conservation easements.					
Pai	t III Organizations Maintaining Collections of	Art, Historical Tre	asures, or Other	Similar Assets	3.	
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 958	B, not to report in its reve	enue statement and b	alance sheet works	3	
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education	or research in furthe	rance of public		
	service, provide in Part XIII the text of the footnote to its finan-					
b	If the organization elected, as permitted under FASB ASC 958	8, to report in its revenue	e statement and balar	nce sheet works of		
	art, historical treasures, or other similar assets held for public $% \left(1\right) =\left(1\right) \left(1\right) $	exhibition, education, or	research in furtherar	nce of public servic	e,	
	provide the following amounts relating to these items.					
	(i) Revenue included on Form 990, Part VIII, line 1					
2	If the organization received or held works of art, historical trea		_	n, provide		
	the following amounts required to be reported under FASB AS	-				
a	Revenue included on Form 990, Part VIII, line 1					
<u>b</u>	Assets included in Form 990, Part X					
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule	D (Form 990) 2023

	t III Organizations Maintaining Co	ollections of Ar		orical Tre	asures o	r Other	Similar		S (conti		age 🚄
	Using the organization's acquisition, accession								- (contil	iuea)	
3	. ,	n, and other record	s, check	any or the i	ollowing that	ı make siç	grillicant u	se or its			
_	collection items (check all that apply). d Loan or exchange program										
a	Public exhibition	C									
b	Scholarly research	e	•	Other							
C	Preservation for future generations	Harakiana anadan da ka		6				- i- D1	VIII		
4	Provide a description of the organization's co							e in Part	XIII.		
5	During the year, did the organization solicit or								.,		
Dar	t IV Escrow and Custodial Arrange								Yes		No
rai	TIV Escrow and Custodial Arrang reported an amount on Form 990, Part		te if the	organization	n answered "	Yes" on F	orm 990,	Part IV, II	ine 9, or		
			J: f								
та	Is the organization an agent, trustee, custodia		-						V		NI.
	on Form 990, Part X?								Yes		No
D	If "Yes," explain the arrangement in Part XIII a	and complete the fol	llowing t	able:					Amoun	+	
	De significa la descrip						4-		Amoun		
	Beginning balance										
	Additions during the year										
e	Distributions during the year										
, T	Ending balance								٦,,		<u></u>
	Did the organization include an amount on Fo						ty?		Yes		No
Par	If "Yes," explain the arrangement in Part XIII.						`				
ı aı	t V Endowment Funds Complete if	the organization ans (a) Current year		rior year	(c) Two yea). (d) Three ye	are back	(e) Fou	rvoore	hack
	, , ,	(a) Current year	(0) F	Tior year	(C) TWO yea	15 Dack	(u) Tillee ye	ais Dack	(e) Fou	years	Dack
1a	Beginning of year balance					-					
	Contributions					+					
	Net investment earnings, gains, and losses					+					
	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Г										
g	End of year balance										
2	Provide the estimated percentage of the curre	•	e (line 1	g, column (a) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment										
С		%									
	The percentages on lines 2a, 2b, and 2c should	•									
3а	Are there endowment funds not in the posses	ssion of the organiza	ation tha	t are held ar	nd administer	red for the	Э			1	
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)		
									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizate								3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment f	unds.							
Par	t VI Land, Buildings, and Equipme										
	Complete if the organization answered	I "Yes" on Form 990), Part I\	/, line 11a. S	ee Form 990	, Part X,	ine 10.				
	Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation			b	(d) Boo	k value	Э				
1a	Land										
	Buildings										
	Leasehold improvements										
	Equipment			1	1,910.		5,95	9.		5 , 9!	51.
	Other										
	. Add lines 1a through 1e. (Column (d) must ed		X. line 1	0c. column	(B))			📘		5,9!	51.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 NAOMI'S VIL	LAGE INC	45	5-5242323 Page 3
Part VII Investments - Other Securities Complete if the organization answered "Yes"	on Form 990 Part IV line 1	11h 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 en	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	id-of-year market value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8) (9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	11d. See Form 990, Part X, line 15.	
	Description	, ,	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, co Part X Other Liabilities	ol. (B))		
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	11e or 11f. See Form 990, Part X, line 2	5.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) CREDIT CARD PAYABLE			17,191.
(3) PAYROLL LIABILITIES			3,262.

(4)
(5)
(6)
(7)
(8)

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

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) 2023

20,453.

Pai	TXI Reconciliation of Revenue per Audited Financial Statement	ts With Revenue per Re	turn		
_	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		1	2,449,996.	
1			1	2,449,990.	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a -48,818.			
a	Net unrealized gains (losses) on investments		-		
b	Donated services and use of facilities	2b	-		
C	Recoveries of prior year grants	1.0	-		
d	Other (Describe in Part XIII.)		+	40 GEO	
e	Add lines 2a through 2d		2e	-48,650. 2,498,646.	
3	Subtract line 2e from line 1		3	2,430,040.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 4-1			
a	Investment expenses not included on Form 990, Part VIII, line 7b		-		
b	Other (Describe in Part XIII.)		1	0	
c	Add lines 4a and 4b		4c 5	2,498,646.	
Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)t XII Reconciliation of Expenses per Audited Financial Statemer	nts With Expenses per F	Returr	2,490,040. 1	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements		1	2,941,636.	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	1 1 0 1 0 0			
е	Add lines 2a through 2d		2e	2,172.	
3	Subtract line 2e from line 1		3	2,172. 2,939,464.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b		4c	0.	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)		5	2,939,464.	
	t XIII Supplemental Information			•	
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition		l; Part ≯	ζ, line 2; Part XI,	
PAF	RT XI, LINE 2D - OTHER ADJUSTMENTS:				
CBA	A/R			168.	
PAI	RT XII, LINE 2D - OTHER ADJUSTMENTS:				
<u>CB</u>	A A/P			2,172.	
FOE	RM 990 PAGE 3 PART IV LINE 11F				
MAI	IAGEMENT HAS CONCLUDED THAT ANY TAX POSITION	S THAT WOULD NO	T MI	EET THE	
MOE	RE-LIKELY-THAN-NOT CRITERION OF FINANCIAL AC	CCOUNTING STANDA	RDS	BOARD	
(FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC 740-10, ACCOUNTING					
FOE	R INCOME TAXES, WOULD BE IMMATERIAL TO THE E	FINANCIAL STATEM	ENTS	S TAKEN AS	
ΑV	HOLE. ACCORDINGLY, THE ACCOMPANYING FINANCI	IAL STATEMENTS D	O NO	OT INCLUDE	
	l 09-28-23			lule D (Form 990) 2023	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection

	<u>OMI'S VILLAGE</u>					45-524232	
Pa	rt I General Info	rmation on A	ctivities Out	side the United States. Compl	ete if the organ	ization answered "Y	'es" on
	Form 990, Part IV	/, line 14b.					
1	For grantmakers. Does	the organization	n maintain record	ds to substantiate the amount of its gra	ants and other a	assistance,	
	the grantees' eligibility for	or the grants or a	assistance, and t	he selection criteria used to award the	grants or assis	stance?	Yes X No
2	For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistance outs	ide the
	United States.						
3	Activities per Region. (T	he following Part	I, line 3 table ca	n be duplicated if additional space is r	needed.)		
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total
		offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures
		in the region	independent	gram services, investments, grants to		specific type	for and investments
			contractors in the region	recipients located in the region)	of service	(s) in the region	in the region
			u.i.e i egieii				
KEN	٧x	1		PROGRAM SERVICES	OPPHAN TIVE	NG & TEACHING	2,226,303.
CEIN.	<u> </u>			FROGRAM SERVICES	OKPHAN LIVI	NG & TEACHING	2,220,303.
					 		+
					-		
					1		
3 a	Subtotal	1	0				2,226,303.
b	Total from continuation						
	sheets to Part I	0	0				0.
c	Totals (add lines 3a						
_	and 3b)	1	0				2,226,303.

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

Schedule F (Form 990) 2023

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			ORPHANAGE - TO					
			OPERATE OUR					
			CHILDREN'S HOME UNDER					
		KENYA	THE KENYAN MINISTRY	1227677.	TRANSFERS	0.		FMV
			PROVIDE SCHOOL IN THE					
			GREAT RIFT VALLEY OF	055 406				
		KENYA	KENYA.	977,486.	TRANSFERS	0.		FMV
			VENDOR IN SUPPORT OF					
			KENYAN MISSION	13 499	TRANSFERS	0.		 FMV
				10,133.				

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

3	Enter total	number	of other	organizations	or entities

Schedule F (Form 990) 2023

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.											
Part III can be duplica	Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (h) Method of										
(a) Type of grant or assistand	ce (b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
	MISSIONARY WHO										
	WENT TO KENYA TO										
	PROVIDE HELP TO										
COST OF THE MISSIONARY TR	IP ORPHANS	5	7,641.	TRANSFERS	0.		FMV				

Page 4

|--|

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

Schedule F (Form 990) 2023

Part V | Supplemental Information

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

PART I, LINE 3:

THE ORGANIZATION USES THE CASH BASIS OF ACCOUNTING. THE CASH BASIS IS THE METHOD OF ACCOUNTING WHEREBY REVENUE IS RECOGNIZED WHEN CASH IS RECEIVED AND EXPENSE IS RECOGNIZED WHEN CASH IS PAID. THE ORGANIZATION TRANSFERS OPERATING FUNDS TO KENYA ON A MONTHLY BASIS SUBSEQUENT TO THE MONTHLY CLOSE PROCESS AND REVIEW. THE ORGANIZATION HAS A MONTHLY REVIEW OF THE OPERATING RESULTS AND FUNDS TO BE TRANSFERRED. THE ORGANIZATION HAS CONTROLS IN PLACE OVER WIRE TRANSFERS TO ENSURE PROPER AUTHORIZATION OF OUTGOING WIRES, DETERMINING THE ACCURACY OF THE WIRES, AND RETENTION OF DOCUMENTATION AND RECORDS.

BOTH NAOMI'S VILLAGE HOPE SELF HELP GROUP AND CORNERSTONE PREPARATORY ASSOCIATION ARE OVERSEEN BY BOARDS IN KENYA. THEY HAVE STRONG FINANCIAL POLICIES AND SYSTEMS IN PLACE, RUN ON QUARTERLY BUDGETS, AND ARE SUPERVISED IN KENYA BY THE AMERICAN FOUNDERS AND BANK SIGNATORIES JULIE AND ROBERT MENDONSA. BOTH MINISTRIES ARE AUDITED BY AN INDEPENDENT AUDITOR IN KENYA ANNUALLY.

THERE IS CAREFUL TRACKING OF ALL EXPENDITURES IN KENYA AGAINST CATEGORIES OF DONOR CONTRIBUTIONS (WE MAINTAIN SEPARATE INCOME/EXPENSES FOR CONTRIBUTIONS MADE FOR CHILD SPONSORSHIP, CONSTRUCTION, BUS PURCHASES, COMMUNITY DEVELOPMENT PROJECTS, ETC.)

FUNDS TO TRANSFER ARE DETERMINED THROUGH MONTHLY WIRE REPORTS FOR NAOMI'S VILLAGE HOPE SHG AND CORNERSTONE PREPARATORY ASSOCIATION GENERATED BY THE TREASURER OF THE US BOARD OF TRUSTEES OF NAOMI'S VILLAGE, INC. THESE WIRE REPORTS ARE THEN REVIEWED WITH KEY NAOMI'S VILLAGE AND CORNERSTONE

Part V Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
KENYA MINISTRY LEADERS AND NAOMI'S VILLAGE, INC. US OFFICE LEADERS,
SEPARATELY VERIFYING EVERY CATEGORY'S FIGURES, ON WIRE CALLS WITH BOTH
KENYA MINISTRIES BEFORE THE WIRES ARE MADE MONTHLY.
ALL FUNDS ARE USED FOR THE PURPOSES SPELLED OUT IN OUR MISSION AND
PURPOSE STATEMENT.
PART II, COLUMN (D):
REGION: KENYA
(D) PURPOSE OF GRANT: ORPHANAGE - TO OPERATE OUR CHILDREN'S HOME UNDER
THE KENYAN MINISTRY OF GENDER, CHILDREN, AND SOCIAL DEVELOPMENT.

SCHEDULE O (Form 990)

Department of the Treasury

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.

2023
Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

NAOMI'S VILLAGE INC

Employer identification number 45-5242323

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THAT THEY BECOME EQUIPPED TO DO SIMILAR CHARITABLE WORK FOR THE POOR IN THEIR COMMUNITY. FORM 990, PART VI, SECTION A, LINE 2: ROBERT AND JULIE MENDONSA ARE RELATED PARTIES TO EACH OTHER. THEY ARE BOTH EMPLOYEES AND BOARD MEMBERS WHO RECEIVE COMPENSATION. FORM 990, PART VI, SECTION A, LINE 8B: THERE IS NO COMMITTEE. THE MEETINGS WERE DOCUMENTED BY THE GOVERING BODY. FORM 990, PART VI, SECTION B, LINE 11B: LINE 11A EXPLANATION - PRIOR TO FILING, FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS AND PRESIDENT FOR REVIEW FORM 990, PART VI, SECTION B, LINE 15A: THE PROCESS FOR DETERMINING COMPENSATION OF THE ORGANIZATIONS DIRECTOR INCLUDED A REVIEW AND APPROVAL BY THE BOARD OF DIRECTORS BASED ON COMPARABLE EXTERNAL AND INDEPENDENT COMPENSATION STUDIES. THE COMPENSATION WAS ALIGNED TO THE MEDIAN SALARY FOR AN ORGANIZATION OF COMPARABLE SIZE IN THE SERVICE CATEGORY. FORM 990, PART VI, SECTION C, LINE 18: AVLIABLE UPON REQUEST

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

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

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023	Page 2
Name of the organization NAOMI'S VILLAGE INC	Employer identification number 45-5242323
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, FINANCIA	AL STATEMENTS, AND
FORM 990 AVAILABLE TO THE PUBLIC UPON REQUEST	

2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	MACHINERY & EQUIPMENT														
1	COMPUTER	06/11/14	SL	5.00		16	3,191.				3,191.	3,191.		0.	3,191.
2	COMPUTER	10/22/14	SL	5.00		16	1,578.				1,578.	1,578.		0.	1,578.
3	APPLE COMPUTER	02/22/23	SL	5.00		16	7,141.				7,141.			1,190.	1,190.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						11,910.				11,910.	4,769.		1,190.	5,959.
	* GRAND TOTAL 990 PAGE 10 DEPR						11,910.				11,910.	4,769.		1,190.	5,959.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						4,769.			0.	4,769.	4,769.			4,769.
	ACQUISITIONS						7,141.			0.	7,141.	0.			1,190.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						11,910.			0.	11,910.	4,769.			5,959.
	ENDING ACCUM DEPR											5,959.			
	ENDING BOOK VALUE											5,951.			

328111 04-01-23

⁽D) - Asset disposed

^{*} ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128**

Part I U.S. Transferor Information (see instructions)			
Name of transferor		Identifying number (see instr	ructions)
NAOMI'S VILLAGE INC		45-5242323	
4 In the transferor a specified 100/ support feroign correction that is not a controlled for		, _v	NI.
 Is the transferee a specified 10%-owned foreign corporation that is not a controlled for If the transferor was a corporation, complete questions 2a through 2d. 	oreign corporation?	Yes X I	NO
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (unde	r acation 269(a)) by		
	` '' •	Yes X I	No
			No No
b Did the transferor remain in existence after the transfer?		21 165	NO
If not, list the controlling shareholder(s) and their identifying number(s).			
Controlling shareholder	lo	dentifying number	
c If the transferor was a member of an affiliated group filing a consolidated return, was If not, list the name and employer identification number (EIN) of the parent corporation		X Yes I	No
Name of parent corporation	EIN	of parent corporation	
d Have basis adjustments under section 367(a)(4) been made?		Yes X	No.
u Have basis adjustifients drider section 507 (a)(4) been made:		165 [21] 1	140
3 If the transferor was a partner in a partnership that was the actual transferor (but is no	ot treated as such under sec	tion 367),	
complete questions 3a through 3d.			
a List the name and EIN of the transferor's partnership.			
Name of partnership	- I	EIN of partnership	
b Did the partner pick up its pro rata share of gain on the transfer of partnership assets			
c Is the partner disposing of its entire interest in the partnership?		Yes X I	No
d Is the partner disposing of an interest in a limited partnership that is regularly traded	on an established		
securities market?	<u></u>	Yes X I	No
Part II Transferee Foreign Corporation Information (see instructions)			
4 Name of transferee (foreign corporation)	5a	Identifying number, if an	У
NAOMI'S VILLAGE HOPE SELF HELP GROUP			
6 Address (including country)	5b	Reference ID number	
2HCM+7JC			
MAAI MAHIU, NAKURU KENYA	1	-	
7 Country code of country of incorporation or organization			
8 Foreign law characterization (see instructions)			
9 Is the transferee foreign corporation a controlled foreign corporation?		Yes X I	No
324531 04-01-23 LHA For Paperwork Reduction Act Notice, see separate instructions.		Form 926 (Rev. 11-	2018

Part III Information			instructi	ons)	1 3 3	<u> </u>	Page Z
Section A - Cash	riogaranig riani	ordinate to the control of the contr	ii ioti doti	0110)			
Type of property	(a) Date of transfer	(b) Description of property		(c) arket value on e of transfer	(d) Cost or other basis	(e) Gain recog trans	nized on
Cash STMT 1							
10 Was cash the only pro If "Yes," skip the rema	inder of Part III and g					X Yes	No
Section B - Other Pro						1 (-)	
Type of property	(a) Date of transfer	(b) Description of property	Fair m date	(c) arket value on e of transfer	(d) Cost or other basis	Gain recog trans	nized on
Stock and securities							
Inventory							
Other property (not listed under another category)							
Property with							
built-in loss							
Totals							
recognition agreement 12 a Were any assets of a foreign corporation?	was filed? oreign branch (includi	s subject to section 367(a)	n disregard	ded entity) transfer	red to a	Yes Yes	No No
(including a branch that If "Yes," continue to lin	omestic corporation t at is a foreign disregal ne 12c. If "No," skip li	hat transferred substantiall rded entity) to a specified 1 nes 12c and 12d, and go to estic corporation a U.S. sh	0%-owned o line 13.	foreign corporation		Yes	No
transferee foreign corp	ooration? ne 12d. If "No," skip li	ne 12d, and go to line 13.		·		Yes	No
Did the transferor trans If "No," skip Section C	sfer property describe and questions 14a th		under sec	mon ∍ 1 ▶ 5		Yes	No
Section C - Intangible	Property Subje	ct to Section 367(d)			Т		
Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life	(d) Arm's length price on date of transfe	(e) Cost or other basis	Income income year of t	clusion for
D							
Property described in sec. 367(d)(4)							
555. 567 (d)(4)							
Totals					1	 Form 926 (Re	/ 11 ₋₂₀₁₉ \
						1 2 1 1 1 2 2 0 (1 1 C)	v. 112010)

14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?	Yes	No
С	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		
	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) \$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
Sup	pplemental Part III Information Required To Be Reported (see instructions)		
	·		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	(a) Before % (b) After %		
17	Type of nonrecognition transaction (see instructions)		
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а	Gain recognition under section 904(f)(3)	Yes	X No
b		Yes	X No
С	Recapture under section 1503(d)	Yes	X No
d	Exchange gain under section 987	Yes	X No
19	Did this transfer result from a change in entity classification?	Yes	X No
20 a	Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions)	Yes	X No
	If "Yes," complete lines 20b and 20c.		
b	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)		
c			
٠	property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?	Yes	No
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation	103	140
- '	covered by section 367(e)(1)? See instructions	Yes	X No

Form **926** (Rev. 11-2018)

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128**

number (see instruction
242323
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number, if any
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) number
es X No
926 (Rev. 11-201

Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life	(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer
roperty described						
n sec. 367(d)(4)						
- otals						

Form 926 (Rev. 11-2018)

14a Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years? ▶ At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? ▶ At the time of the transfer choose to apply the 20-year inclusion period provided under Regulations section 1.367(a) (16)(3)(ii) for any intangible property? ★ No d If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(a) (1c)(3)(ii) ★ \$ 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? ★ No Supplemental Part III Information Required To Be Reported (see instructions) Part IV Additional Information Required To Be Reported (see instructions) Part IV Additional Information Required To Be Reported (see instructions) Part IV Additional Information Required To Be Reported (see instructions) Part IV Additional Information Required To Be Reported (see instructions) Part IV Additional Information Required To Be Reported (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions)				
b At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? C Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(0)-1(c)(3)(ii) for any intangible property? Ves No d If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties, as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(0)-1(c)(3)(ii) ▶ \$ 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? Yes No Supplemental Part III Information Required To Be Reported (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding	14 a			
c Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(c)1-(c)3(ii) for any intangible property?			Yes	No
1.367(d)-1(c)(3)(ii) for any intangible property? d If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property, so, properties, as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) ▶ \$ 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? Yes No Supplemental Part III Information Required To Be Reported (see instructions) Part IV Additional Information Required To Be Reported (see instructions) Enter the transferor's interest in the transfere of Property (see instructions) 16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	k	b At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?	Yes	No
d if the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) ▶ \$ 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? Yes No Supplemental Part III Information Required To Be Reported (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Part IV Additional Information Regarding Transfer of Property on a dark the transfer of the transfer end of the Information Regarding Transfer of Property Information Regarding Transfer end of the Information Regarding Transfer	C			
to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.487(d)-I(c)(3)(ii)			Yes	No
Regulations section 1.367(d)-1(c)(3)(ii) ▶\$ 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? Yes No Supplemental Part III Information Required To Be Reported (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) 16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % 17 Type of nonrecognition transaction (see instructions) ▶ 18 Indicate whether any transfer reported in Part III is subject to any of the following. a Gain recognition under section 904(f)(3)	C	d If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		
15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? Supplemental Part III Information Required To Be Reported (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) 16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) ▶ 18 Indicate whether any transfer reported in Part III is subject to any of the following. a Gain recognition under section 904(f)(3) Yes X No C Recapture under section 904(f)(3) Yes X No C Recapture under section 987 yes X No D D Did this transfer result from a change in entity classification? 20 a Did a domestic corporation make a distribution of property covered by section 367(e)/2(7) (see instructions) P S C Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)/2(b)(2)? Yes No		to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? Yes No Supplemental Part III Information Required To Be Reported (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) 16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before 96 (b) After 96 17 Type of nonrecognition transaction (see instructions) ► 18 Indicate whether any transfer reported in Part III is subject to any of the following. a Gain recognition under section 904(f)(5)(f) Yes X No b Gain recognition under section 904(f)(5)(f) Yes X No c Recapture under section 987 yes X No d Exchange gain under section 987 yes X No 20 a Did a domestic corporation make a distribution of property covered by section 367(e)/2(f) (see instructions) If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) F Source Property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No		Regulations section 1.367(d)-1(c)(3)(ii) ▶ \$		
Part IV Additional Information Regarding Transfer of Property (see instructions) Contact Part IV Additional Information Regarding Transfer of Property (see instructions) Contact Part IV Additional Information Regarding Transfer of Property (see instructions) Contact Part IV Additional Information Regarding Transfer of Property (see instructions)	15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
Part IV Additional Information Regarding Transfer of Property (see instructions) 16		time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Su	pplemental Part III Information Required To Be Reported (see instructions)		
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before				
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before				
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before				
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before				
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before				
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	_			
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before				
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	_			
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before				
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before				
16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	De	ort IV Additional Information Degarding Transfer of Property (see instructions)		
(a) Before% (b) After% 17 Type of nonrecognition transaction (see instructions) ▶ 18 Indicate whether any transfer reported in Part III is subject to any of the following. a Gain recognition under section 904(f)(3) Yes X No b Gain recognition under section 904(f)(5)(F) Yes X No c Recapture under section 1503(d) Yes X No d Exchange gain under section 987 Yes X No 19 Did this transfer result from a change in entity classification? Yes X No 20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) Yes X No If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No	Г			
(a) Before% (b) After% 17 Type of nonrecognition transaction (see instructions) ▶ 18 Indicate whether any transfer reported in Part III is subject to any of the following. a Gain recognition under section 904(f)(3) Yes X No b Gain recognition under section 904(f)(5)(F) Yes X No c Recapture under section 1503(d) Yes X No d Exchange gain under section 987 Yes X No 19 Did this transfer result from a change in entity classification? Yes X No 20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) Yes X No If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No	16	Additional morniation regarding framerical of Froperty (see instructions)		
Type of nonrecognition transaction (see instructions) ▶ 18 Indicate whether any transfer reported in Part III is subject to any of the following. a Gain recognition under section 904(f)(3) Yes X No b Gain recognition under section 904(f)(5)(F) Yes X No c Recapture under section 1503(d) Yes X No d Exchange gain under section 987 Yes X No 19 Did this transfer result from a change in entity classification? Yes X No 20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) Yes X No If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ▶ c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No	10			
Indicate whether any transfer reported in Part III is subject to any of the following. a Gain recognition under section 904(f)(3) b Gain recognition under section 904(f)(5)(F) c Recapture under section 1503(d) d Exchange gain under section 987 Poid this transfer result from a change in entity classification? Yes X No 19 Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No		Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
a Gain recognition under section 904(f)(3) b Gain recognition under section 904(f)(5)(F) c Recapture under section 1503(d) d Exchange gain under section 987 Poid this transfer result from a change in entity classification? Yes X No 19 Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No		Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After %		
b Gain recognition under section 904(f)(5)(F) c Recapture under section 1503(d) d Exchange gain under section 987 Did this transfer result from a change in entity classification? 20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes X No No		Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions)		
c Recapture under section 1503(d) d Exchange gain under section 987 19 Did this transfer result from a change in entity classification? 20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No	18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) Indicate whether any transfer reported in Part III is subject to any of the following.		.
d Exchange gain under section 987 19 Did this transfer result from a change in entity classification? 20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) 3	18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before		
19 Did this transfer result from a change in entity classification? 20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No	18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before		X No
20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No	18 a b	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	X No
If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No	18 8 8	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes	X No X No X No
b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No	18 8 8	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes	X No X No X No
c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No	18 k	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes	X No X No X No X No
c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Yes No	18 k	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes	X No X No X No X No
property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?	18 k c 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes	X No X No X No X No
	18 6 6 6 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes	X No X No X No X No
	18 6 6 6 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No X No X No
covered by section 367(e)(1)? See instructions	18 6 6 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No X No X No

Form 926 (Rev. 11-2018)

NAOMI'S VILLAGE INC 45-5242323

ORM 926	PART III - INFORMATION REGARDING TRANSFER OF PROPERTY	STATEMENT 1
	CASH	
(A)	(C)	
DATE OF	FAIR MARKET VALUE	
TRANSFER	ON DATE OF TRANSFER	
1/15/2023	9,848.	
1/15/2023	271.	
1/15/2023	60.	
1/15/2023	41,153.	
1/15/2023	94.	
1/15/2023	2,835.	
1/15/2023	112.	
2/15/2023	34.	
2/15/2023	75,008.	
2/15/2023 2/15/2023	285. 35,767.	
2/15/2023	41,715.	
2/15/2023	3,525.	
3/15/2023	34,212.	
3/15/2023	174.	
3/15/2023	96.	
4/15/2023	38,394.	
4/15/2023	13,170.	
4/15/2023	9,673.	
4/15/2023	290.	
5/15/2023	8,045.	
5/15/2023	1,831.	
5/15/2023	39,745.	
5/15/2023	429.	
5/15/2023	145.	
5/15/2023	68.	
6/15/2023	100,000.	
6/15/2023	9,200.	
6/15/2023	42. 43.	
6/15/2023 6/15/2023	418.	
6/15/2023	145.	
6/15/2023	9,589.	
6/15/2023	34,800.	
6/20/2023	76.	
6/20/2023	17.	
6/20/2023	1,941.	
6/20/2023	20,049.	
6/20/2023	28,623.	
7/31/2023	46,516.	
7/31/2023	640.	
7/31/2023	1,306.	
7/31/2023	166.	
7/31/2023	23,860.	
7/31/2023	1,266.	
7/31/2023	243.	
7/31/2023	8,944.	
8/31/2023 8/31/2023	37,389. 38,916.	

NAOMI'S VILLAGE INC		45-5242323
08/31/2023	211.	
08/31/2023	101.	
00/21/2022	C 01C	

MIONI D VIDDIGD INC	
08/31/2023	211.
08/31/2023	101.
08/31/2023	6,946.
08/31/2023	1,524.
09/30/2023	38,141.
09/30/2023	39,514.
10/25/2023	5,750.
10/25/2023	3,200.
10/25/2023	35,000.
10/31/2023	1,275.
10/31/2023	44,328.
10/31/2023	158.
10/31/2023	42,673.
10/31/2023	24,983.
10/31/2023	63.
10/31/2023	43.
10/31/2023	9,260.
10/31/2023	33.
11/30/2023	537.
11/30/2023	6,210.
12/31/2023	51,924.
12/31/2023	83.
12/31/2023	41,230.
12/31/2023	8,855.
12/31/2023	4,762.
12/31/2023	2,007.
12/31/2023	5,212.
12/31/2023	46,773.
12/31/2023	59,214.
12/31/2023	3,337.
12/31/2023	20,050.
12/31/2023	3,108.
	1,227,673.

NAOMI'S VILLAGE INC 45-5242323

FORM 926	PART III - INFORMATION REGARDING	STATEMENT 2
OKH 920	TRANSFER OF PROPERTY	SIAIEMENI Z
	CASH	
(A)	(C)	
DATE OF	FAIR MARKET VALUE	
TRANSFER	ON DATE OF TRANSFER	
01/15/2023	43,831.	
01/15/2023	111.	
01/15/2023	169.	
)1/15/2023)1/15/2023	44. 64.	
01/15/2023	1,860.	
01/15/2023	476.	
02/15/2023	312.	
2/15/2023	40,232.	
02/15/2023	63.	
02/15/2023	43.	
02/15/2023	70,573.	
)2/15/2023)2/15/2023	41,514. 165.	
02/13/2023	20,100.	
03/15/2023	205.	
3/15/2023	17,649.	
3/15/2023	7,457.	
03/15/2023	63.	
03/15/2023	43.	
03/15/2023	165.	
)4/15/2023)4/15/2023	41,943. 573.	
04/15/2023	165.	
04/15/2023	43.	
04/15/2023	63.	
04/15/2023	107.	
05/15/2023	38,739.	
05/15/2023	165.	
)5/15/2023)5/15/2023	385.	
05/15/2023 05/15/2023	63. 937.	
05/15/2023	380.	
5/15/2023	136.	
06/15/2023	43.	
06/15/2023	43,587.	
06/15/2023	341.	
06/15/2023	3,817.	
06/15/2023	107. 63.	
06/15/2023 06/20/2023	168.	
06/20/2023	36,122.	
06/20/2023	63.	
06/20/2023	43.	
06/20/2023	165.	
07/31/2023	82.	
7/31/2023	43.	
7/31/2023 7/31/2023	63. 20,750.	

NAOMI'S VILLAGE INC		45-5242323
07/31/2023	47 858	

	_
07/31/2023	47,858.
07/31/2023	376.
08/31/2023	211.
08/31/2023	82.
08/31/2023	43.
08/31/2023	63.
08/31/2023	11,205.
08/31/2023	188.
08/31/2023	43,127.
09/30/2023	54,150.
10/25/2023	98,000.
10/25/2023	5,750.
11/27/2023	7,500.
11/30/2023	282.
11/30/2023	830.
11/30/2023	41,416.
11/30/2023	208.
11/30/2023	63 .
11/30/2023	43.
11/30/2023	5,191.
11/30/2023	33,217.
11/30/2023	6,640.
12/31/2023	20,750.
12/31/2023	124,500.
12/31/2023	41,500.
	977,488.

2023 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - NAOMI'S VILLAGE INC

Asset No.	Description	Da Acqu	ite iired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	MACHINERY & EQUIPMENT												
1	COMPUTER	061	114	SL	5.00	16	3,191.			3,191.	3,191.		0.
2	COMPUTER	102	214	SL	5.00	16	1,578.			1,578.	1,578.		0.
	APPLE COMPUTER * 990 PAGE 10 TOTAL	022	223	SL	5.00	16	7,141.			7,141.			1,190.
	MACHINERY & EQUIPME * GRAND TOTAL 990						11,910.		0.	11,910.	4,769.		1,190.
	PAGE 10 DEPR						11,910.		0.	11,910.	4,769.		1,190.
	CURRENT YEAR												
	ACTIVITY												
	BEGINNING BALANCE						4,769.		0.	4,769.	4,769.		
	ACQUISITIONS						7,141.		0.	7,141.	0.		
	DISPOSITIONS						0.		0.	0.	0.		
	ENDING BALANCE						11,910.		0.	11,910.	4,769.		

- NEXT YEAR FEDERAL - NAOMI'S VILLAGE INC

Asset No.	Description		Date quire	d	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	MACHINERY & EQUIPMENT	٥،	111	4	~-	- 00	2 101		2 101	2 101	•
	COMPUTER COMPUTER	106	111 221	4	SL	5.00 5.00	3,191.		3,191.	3,191.	0.
	APPLE COMPUTER	10.3	2 2 1 2 2 2	- 4) 구	БЬ Ст.	5.00	1,578. 7,141.		7,141.	1,578. 1,190.	1,428.
3	* 990 PAGE 10 TOTAL MACHINERY &	0 4	<u> </u>	ادد	оп	3.00	/,141•		/,141•	Ι, Ι 9 0 •	1,420.
	EQUIPMENT						11,910.		11,910.	5,959.	1,428.
	* GRAND TOTAL 990 PAGE 10 DEPR						11,910.		11,910.	5,959.	1,428.

⁽D) - Asset disposed

^{*} ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone