

2025

Accommodations Tax Funds Request Application

Organization Name: The Outside Foundation

Project/Event Name: Environmental Sustainability

Executive Summary

[An ATAX Effectiveness Measurement form has been attached to this application.](#)

The Outside Foundation (TOF) is seeking \$72,000 in ATAX grant funding to expand our local environmental sustainability impact projects. We seek this funding to support our projects directed at preserving and protecting our local environment. We plan to enhance our educational outreach to tourists and visitors seeking to participate in any one of the numerous ecotourism projects we offer: (1) waterway, beach, and park clean ups, and annual #EARTHDAYHHI event, (2) an annual water festival, (3) our oyster shell recycling and bed restoration project, and (4) our multi-day Lowcountry Boil Paddle Battle Event and Pinckney Island Wildlife Refuge Litter and Marine Debris sweep.

HHI prides itself in being a “world-class resort” with conservation written into it’s DNA. This nature-first mindset and emphasis on ecologically responsible development has drawn visitors and tourists to our beaches from all over the US and world for over 60 years. “Eco-tourism” is now one of the fastest growing sectors in the travel industry. In 2014 the non-profit The Outside Foundation was created to continue, and expand, opportunities for children and their families to experience and enjoy nature, and to develop a sense of lasting environmental stewardship. TOF’s work directly enhances the visitor’s experience on this island by ensuring that our local waterways, beaches, and parks remain clean and free of litter, and by providing opportunities to engage in activities which directly protect and preserve our local environment. Our beach, park, and waterway clean ups, and #EARTHDAYHHI event, provide accessible and ideal opportunities for locals, tourists, and visitors of all ages to join in and make a difference in keeping our environment clean and protecting local wildlife. Our annual water festival was created to celebrate the deep respect locals and visitors alike have for the natural beauty of HHI and the common desire for sustainability of our pristine waterways and beaches. This year’s water festival welcomed 20 local non-profits and organizations whose work and missions are focused on environmental education and protection.

Our “Community-based Oyster Shell Recycling and Bed Restoration” project was created in 2018 to capture valuable shucked oyster shell, divert this shell away from our local landfill, and to use this shell to create “living shorelines” along HHI waterways. This first-ever project saw the establishment of a shell quarantine site and participation from 15 local restaurants. In 6 years we have collected over 150 tons of shell, have 27 local restaurants participating, engaged over 1481 volunteers to fill 8300 bags with shell, and partnered with the SCDNR to use nearly all of these bags to construct 27 oyster reefs along the shorelines of HHI. In 2018 we began to capture shell at the annual HHI Oyster Festivals. For the past 7 festivals we have captured 18.85 tons of shucked shell for recycling, every bit of which would have ended up in the landfill. Now, this shell helps build new oyster reef habitat and stabilize our local shorelines.

On April 22, 2024 we invited all local students, residents, tourists and visitors to participate in the third annual #EARTHDAYHHI. 354 volunteers participated in the litter sweep which covered all 12 miles of local beach and other natural spaces, collecting 1347 pounds of trash from 27 locations on HHI.

In just 10 years TOF has made quite an impact. The programs we provide leadership to include: “Kids in Kayaks” - a kayak-based program for local middle schools (over 7800 local 7th graders have participated in this program), and the “Learn to Paddle” (kayaking and paddle boarding) programs (over 450 Boys & Girls Club members). During the 2023-24 school year The Outside Foundation offered every Beaufort County Public School 7th grader, including for the first time ever, students in the Beaufort area, an opportunity to participate. We hosted 1329 students from 12 middle schools for the program last year.

Over the past 10 years we have hosted 112 beach, park, and waterway clean ups, with 2928 volunteers participating and more than 12.2 tons of trash and marine debris cleaned up. Our 2024 Annual “Keep the Broad Creek Clean” Water Festival brought together 20 environmentally-focused organizations and non-profits for an afternoon of hands-on and interactive nature displays, recycling information, and a walking and kayaking litter sweep of the park and Broad Creek shoreline. In keeping with our values this festival, as well as all events hosted by The Outside Foundation, are single-use plastic water bottle free.

From September 6th through the 8th this year we will invite visitors and locals to participate in the 6th Annual “OluKai Lowcountry Boil Paddle Battle” event. Over the three day event we expect to welcome over 500 tourists and visitors to our island. On the final day we will partner with three other local environmentally-focused nonprofits to remove marine debris and trash from Pinckney Island Wildlife Refuge, Haigh Landing, and the surrounding shorelines. In 2023, 165 volunteers helped remove 1730 pounds of trash from the wildlife refuge and its shorelines.

Nature-loving visitors come back, year after year. Some choose to eventually live here. It is these very strong connections - to the pristine beaches, dolphin-filled waterways, clean water, and abundance of local seafood - that are the most threatened by increased development and tourism on the island. In order to sustain, and grow, the number of visitors to the island each year, as well as protect the environment they expect upon arrival, more emphasis must continue to be placed on environmental sustainability. The Town of HHI’s 2020-2040 “Our Plan” states that the environment and sustainability are the foundational values of our Island community, reminding all of us that Ecotourism could be, and should be, the future of HHI tourism. TOF’s environmental sustainability impact programs are directed at protecting and preserving our local environment and uniquely aligned to deliver the Town of HHI’s “healthy, sustainable environment” vision.

It is our goal to enhance the visitor experience to HHI by ensuring that our local waterways, beaches, and parks are free of litter. We also desire to be the means by which tourists, traveling to HHI for vacation with knowledge of the Island’s history of ecologically sensitive development, would be able to actively engage in ecotourism activities. These activities, in turn, benefit our local economy, serve to enhance protections of our wildlife, and improve the overall quality of life for locals. As our numbers of tourists has increased substantially over the past ten years so has the amount trash and plastics on our beaches and along the banks of our waterways. The key to reversing this trend, we believe, is to enhance the visitor experience by creating a sense of “ownership.” People are less likely to litter on the beach if they understand how that litter adversely affects the wildlife that live there. As grassroots, community-based non-profit, The Outside Foundation is uniquely positioned to educate, involve, and empower locals and visitors, as well as our next generation of island environmental stewards, in programs which directly impact our Island’s environmental health in so many positive ways.

2025 Accommodations Tax Funds Request Application

Date Received: 08/31/2024

Time Received: 10:44 AM

By: Online Submittal

Applications will not be accepted if submitted after 4 pm on September 6, 2024

A. SUMMARY OF GRANT REQUEST:

ORGANIZATION NAME: The Outside Foundation

Project/Event Name: Environmental Sustainability

Contact Name: Dr. Jean Fruh Title: Executive Director

Address: 50 Shelter Cove Lane Suite H, Hilton Head Island, SC 29928

Email Address:
jean@outsidefoundation.org

Contact Phone: 304-642-1820

Event Date: January 1, 2025

Event Location: Hilton Head Island beaches,
waterways and parks

Total Budget: \$626,000.00

Grant Requested: \$72,000.00

Provide a brief summary on the intended use of the grant and how the money would be used. (100 words or less)

The Outside Foundation's (TOF) programs directly impact the quality of a visitor's experience by ensuring clean waterways for kayaking, fishing, and boat-based ecotours. This grant would be used to support our efforts to sustain our local environment for the enjoyment of all who visit and who might choose to live here. With a mission to preserve and protect the local environment, TOF sponsors clean ups, an annual water festival, Paddle Battle event, and an oyster shell recycling program which provide participants of all ages with direct ways in which they can learn about, engage in, and help sustain our environment.

How does the organization/event either drive tourism to Hilton Head Island or enhance the visitor experience on Hilton Head Island? How is this impact being measured? (100 words or less)

TOF provides opportunities for people to become environmental stewards. Cleanups provide ideal opportunities for visitors to keep our environment clean and protect local wildlife. Our annual water festival was created to celebrate the deep respect locals and visitors alike have for the natural beauty of HHI and the common desire for sustainability of clean waterways. Our shell

recycling program partners with 27 local restaurants to ensure sustainability of our oyster population. The Paddle Battle is a multiday event attracting competitors/visitors from the Southeast. Our impact is measured in the number of visitors who engage in any of these programs.

A. Total Number of Physical Tourists Served: 88622

A Tourist is considered a non-resident, traveling more than 50 miles to the Town of Hilton Head Island.

B. Total Number of Physical Visitors Served: 1757

A Visitor is considered a non-resident, who travels 50 miles or less to visit the Town of Hilton Head Island.

C. Total Number of Physical Residents Served: 2186

A Resident is considered any person who claims their property address within the limits of the Town of Hilton Head Island as their primary residence.

D. Total Number of Physical Patrons Served (A+B+C=D): 92565

How was the Number of Visitors/Tourists Documented? (250 words or less)

2023-24 HHI Oyster Festivals ticket sales; attendance at annual water festival; sign-ins at beach, waterway, and park clean ups (including the 2024 #EARTHDAYHHI, Sea Turtle 5K, and Juneteenth 5K events); Naych and B'uhds event; sign-ins at shell bagging and oyster reef building events; attendance at the 2024 Page Island Oyster Roast and 2023 Olukai Lowcountry Boil Paddle Battle events. The number of golfers who played the Harbortown Golf Links in 2023, the number of participants in kayak, paddle board, and boat based tours departing Shelter Cove Marina on the Broad Creek. These totals do not include the number of competitors, visitors, and tourists who are scheduled to attend the 3 days of the 2024 OluKai Lowcountry Boil Paddle Battle (as of 8/26 160 participants are registered), and Pinckney Island Wildlife Refuge litter sweep scheduled for September 6-8.

B. DESCRIPTION OF OPERATIONS:

1. For state reporting purposes, give a brief description of the organization. (250 words or less)

The Outside Foundation (TOF) was formed in 2014 with a mission to get kids outside and to preserve and protect our local environment. Consistent with the guiding principles of its founding company, Outside Hilton Head, TOF seeks to provide to visitors and locals outdoor experiences that will have a positive impact by creating awareness, expanding knowledge, and developing responsible understanding of nature and the local environment. With the goal to foster the development of environmental stewardship TOF's focus is threefold: education, involvement, and empowerment. Our programs focus on our

two most valuable resources: our children and our local environment. Our programs include: "Kids in Kayaks" with 7th graders, "Learn to Paddle" kayaking and paddle boarding and with the Boys & Girls Clubs, beach, park, and waterway cleanups, #EARTHDAYHHI, an annual water festival, and a "Community-based Oyster Shell Recycling and Bed Restoration" project. In just 10 short years we have provided environmental immersion experiences for over 7889 local youth and engaged over 2410 volunteers to remove 12.3 tons of trash from our local parks, beaches and waterways. In just six years our oyster shell recycling programs has partnered with 27 local restaurants, the HHI Oyster and Seafood Festivals, to capture 150+ tons of shucked shell. 1481 volunteers have filled over 8300 bags with shucked shell and, to date, and helped build 27 reef along the shorelines of HHI. Every one of our programs helps sustain the remarkable natural beauty that so many tourists and visitors travel to HHI to enjoy.

2. Describe in detail how the requested grant funding would be used? (250 words or less)

The Outside Foundation is requesting **\$72,000** in The Town of HHI ATAX funds to be used for:

Category 1: Destination Advertising/Promotion (\$8500 total)

General Marketing (\$8500) including \$1500 for volunteer database management; \$3500 for website enhancements; \$3500 for marketing, social media, and staffing needs

Category 2: Tourism Related Events (\$36,000 total)

Beach/Park/Kayak Based Cleanups and #EARTHDAYHHI (\$8000) \$1000 Print Advertising \$3000 Digital Magazine Advertising \$2000 Social Media Advertising \$2000 TOF Marketing/Social Media Manager Compensation

Annual "Keep the Broad Creek Clean" Water Festival (\$8000) \$1000 Print Advertising \$3000 Digital Magazine Advertising \$2500 Social Media Advertising \$1500 TOF Marketing/Social Media Manager Compensation

2026 Paddle Battle event (\$20,000) \$8000 out-of-market print ad buys including paddling and destination magazines; \$5000 - social media marketing; \$5000 event signage and local marketing materials; \$2000 event website and graphic design

Category 6: Waterfront Erosion/Control/Repair: Funds would be used to support and grow our community-based oyster shell recycling and bed restoration project allowing the program to increase the amount of shell that can be captured from local restaurants and oyster roasts. **(\$27,500 total)**

Continuing contract to provide online volunteer and email

management (\$1500) directed at improved recruiting and communicating with regular and new volunteers for oyster shell recycling and reef building engagement and education.

"Community-based Oyster Shell Recycling and Bed Restoration" project (\$10000) \$1000 Print Advertising; \$3500 Digital Magazine Advertising; \$3000 Social Media Advertising; \$2500 Marketing/Social Media Manager Compensation

"Community-base

3. What impact would partial funding have on the activities, if full funding were not received? What would the organization change to account for partial funding? (100 words or less)

It is our goal to be the means by which visitors can actively engage in activities which promote environmental sustainability. One of the greatest challenges TOF faces as a small non-profit is the ability to reach a large audience. Reduced funding limits our ability to get our message out.

Kayaking, fishing, and boat-based eco tours are very popular activities for visitors as our water is clean and teeming with wildlife. Partial funding would greatly reduce the impact our oyster shell recycling program has on shoreline stabilization, sustaining the population of local oysters, and keeping our water clean.

4. What is expected economic impact and benefit to the Island's tourism? (100 words or less)

According to survey research by the HHI Chamber of Commerce, nature-based tours, bicycling, kayaking, paddleboarding, fishing, boat-based ecotours, and access to world-class beaches are some of the most popular reasons visitors and tourists choose HHI and keep returning year after year. In order to sustain a healthy environment for these activities more support must be provided to those activities which directly impact environmental sustainability. 27 local seafood restaurants, including those within the SERG and CRAB groups, have partnered with us for shell recycling through a mutual understanding of oyster reef as the keystone of the local seafood industry.

5. In order to comply with the State's Tourism Expenditure Review Committee annual reporting requirements, **please classify your current grant request into the following authorized categories:**

1 - Destination Advertising/Promotion

Advertising and promotion of tourism so as to develop and increase tourist attendance through the generation of publicity.

12 %

2 - Tourism-Related Events <i>Promotion of the arts and cultural events.</i>	50 %
3 - Tourism-Related Facilities <i>Construction, maintenance and operation of facilities for civic and cultural activities including construction and maintenance of access and other nearby roads and utilities for the facilities.</i>	0 %
4 - Tourism-Related Public Services <i>The criminal justice system, law enforcement, fire protection, solid waste collection and health facilities when required to serve tourists and tourist facilities. This is based on the estimated percentage of costs directly attributed to tourist. Also includes public facilities such as restrooms, dressing rooms, parks and parking lots.</i>	0 %
5 - Tourist Public Transportation <i>Tourist shuttle transportation.</i>	0 %
6 - Waterfront Erosion/Control/Repair <i>Control and repair of waterfront erosion.</i>	38 %
7 - Operation of Visitor Information Centers <i>Operating visitor information centers.</i>	0 %
Total:	100 %

6. If not covered elsewhere in the application, please describe (a) how the organization will collaborate with other organizations to enhance tourism efforts, and (b) provide a venue or service not otherwise available to visitors to the Town of Hilton Head Island. (250 words or less)

Much of the success of The Outside Foundation, as a young and small grassroots non-profit, can be directly attributed to the numerous partnerships formed over the past 10 years as well as the enormous number of volunteers, including tourists, part-time visitors and residents, and locals.

Our "Kids in Kayaks" programming is made possible through partnerships with the local schools, both public and private, the Low Country Master Naturalist Association, Coastal Expeditions Kayak Co, HHI Kayak Co (Outside Brands), HHI Audubon, Beaufort County Conservation District, Carolina Clear Stormwater Consortium, and our local "Boys and Girls Club".

For our beach, park, and waterway clean ups we partner with Beaufort County Public Works, Town of Bluffton, Town of HHI, Outside Brands, and "Turtle Tracker" groups, as well as numerous small businesses whose employees want to give back. Our 2nd Saturday of every month "plogging" events are an example - we partner with Palmetto Running Company, to host beach and park clean ups, inviting volunteers to jog or walk and pick up trash. This past April our 2024 #EARTHDAYHHI event gathered 354 island residents, school students, teachers, and visitors to clean up the 12 miles of beachfront and other natural areas. We recieved a tremendous amount of support from our local Chamber of Commerce, Town of HHI, Beachfront Hotels, Turtle Tracker Groups, and community volunteers.

Our annual water festival happens with the particiaption of over 20 local organizations, all

focused on protecting our local environment and education visitors and locals about our wildlife.

7. Additional comments. (250 words or less)

To the best of our knowledge no other groups here on HHI are regularly organizing and conducting as many beach, park, and kayak-based waterway clean ups as we do, involving over 2410 volunteers in a span of 10 years to remove 12.2 tons of trash from the local environment. Our annual water festival is the only event of it's kind here on HHI and in 2024 attracted over 300 participants. This past April for #EARTHDAYHHI we organized an island-wide litter sweep with 354 volunteers participating. Our "Oyster Shell Recycling and Bed Restoration" project has diverted over 150 tons of shell from the local landfill, every bit of the shell staying right here on HHI to build reef. At the 2023-24 HHI Oyster and Seafood Festivals we captured 7.6 tons of shell. Our program has received attention from the PEW Trust as a "model" community-based program. We engage locals and visitors, over 1497 to date, in both bagging and reef building events. We have already constructed 27 reef along the HHI shorelines. This past July we added 500 more shell bags, as well as 3000 Spatina plugs, along the 18th fairway of Harbour Town Golf Course adding to the 5-reef series. The oyster shell recycling project creates "living shorelines" through investment in nature-based infrastructure - our very own recycled oyster shells. As such, these reef will greatly decrease the amount of rock needed to be purchased to stabilize the shorelines. This in turn saves tax payers money.

C. FUNDING:

1. Please describe how the organization is currently funded. (100 words or less)

The Outside Foundation receives funding from local, Outdoor Industry, HHI and Bluffton Community grants, Environmentally-focused Organizations, and Government Grants. We host two major fundraisers each year, The Page Island Oyster Roast and the Olukai Paddle Battle event, each in support of our "Kids in Kayaks" and "Learn to Paddle" scholarship funds, and our "Community-based Oyster Shell Recycling and Bed Restoration" Program. We receive individual and corporate donations, and raise money through cash donation boxes and hat, refillable bottle, tee shirt sales.

2. Please also estimate, as a percentage, the source of the organization's total annual funding.

<u>10</u>	Government Sources	<u>65</u>	Private Contributions, Donations and Grants
	Corporate Support, Sponsors		Membership, Dues, Subscriptions
<u>25</u>	Ticket Sales, or Sales and Services		Other

3. Has the organization requested other ATAX or any other funding from other public sources or organizations?

Yes X No

If so, please list top 3 sources and amounts.

South Carolina Department of Parks, Recreation, and Tourism - 3rd year of 3 year grant	\$125,000.00
Beaufort County Public Works Grant - litter sweeps	\$1,500.00

D. FINANCIAL INFORMATION:

Fiscal Year Disclosure: Start Month: **January 2023** End Month: **December 2023**

Financial Statement Requirements:

1. The upcoming fiscal year's **operating budget** for the organization.

Budget Provided: **Yes**

2. The previous two fiscal years and current year-to-date **profit and loss reports** for the organization.

Current fiscal year Profit Loss Report Provided: **Yes**

Previous fiscal year Profit Loss Reports Provided:

- 2021- Previous FY 1
- 2023- Previous FY 1
- 2022- Previous FY 2

3. The previous two fiscal years and current year-to-date **balance sheets**.

Current fiscal year Balance Sheet Provided: **Yes**

Previous fiscal year Balance Sheets Provided:

- 2022 - Previous FY 2

2023 - Previous FY 1

2021 - Previous FY 1

4. The previous two years and current year **IRS Form 990 or 990T**.

Current year IRS Form 990 or 990T Provided: **Yes**

Previous IRS Form 990 or 990T Years Provided:

2021 - Previous FY 1

2022 - Previous FY 2

E. FINANCIAL GUARANTEES AND PROCEDURES:

1. Provide a copy of the **official minutes** wherein the organization approves the submission of this application.

An official set of minutes have been attached to this application.

2. Indicate whether your organization follows Town procurement guidelines or has its own procurement guidelines which are utilized and followed in the expenditure of ATAX grant funds.

- Follow Town procurement guidelines
- Utilize and follow organization's own procurement guidelines
- Our organization does not have or follow procurement guidelines

F. MEASURING EFFECTIVENESS:

If you received 2023 or 2024 HHI ATAX funds

1. List any ATAX award amounts received in 2023 and/or 2024.

2021	\$10,367.00	Environmental Sustainability
2021	\$20,000.00	Paddle Battle Event - Out-of-Cycle Award
2022	\$34,400.00	Environmental Sustainability
2023	\$59,480.00	Environmental Sustainability
2024	\$72,000.00	Environmental Sustainability

2. How were the ATAX funds used? To what extent were the objectives achieved? The ATAX Effectiveness Measurement spreadsheet available in the application portal will show the numerics. Use the space below for verbal comments. (200 words or less)

Of the \$72,000 approved we were able to spend \$45,058.28 (thru Q2):

Online volunteer management software/Website Overhaul - overall reach for Facebook (+213.9%) and Instagram (105.5%) increased; website traffic increased from 6015 to 8982 sessions **Total = \$5694.84**

Beach, Park, Waterway Clean Ups, #EARTHDAYHHI - 10 events, 518 volunteers (86 tourists, 98 visitors, 334 local) removed 1.2 tons of litter. **Dest Advert/Promo/Marketing: Total = \$6783.00**

Annual "Keep the Broad Creek Clean" Water Festival and Litter Sweep - Shelter Cove Marina/Broad Creek litter sweep 20 volunteers removed 240 pounds trash. 397 Water Festival attendees (157 tourists, 98 visitors, 142 local) **Dest Advert/Promo/Marketing: Total = \$7224.63**

Oyster Shell Recycling Project - Page Island Oyster Roast Event - March 3, 2024 356 attendees (94 tourists, 144 visitors, 118 local) 1500# shell recycled. **Dest Avert/Promo/Marketing Total = \$15,290.59**

2024 Paddle Battle Event- September 8-10. Spending so far: **Dest Avert/Promo/Marketing Total = \$7065.22** (2023 Paddle Battle 268 attendees, 168 tourists, 34 visitors, 66 local)

"Community-based Oyster Shell Recycling and Bed Restoration" Project Total = \$3000

3. What impact did this have on the success of the organization/event and how did it benefit the community? (200 words or less)

Every program The Outside Foundation sponsors has a direct impact on the overall health of our surrounding environment and, as such, enhances the visitor's experience. Our beach, park, and waterway cleanups, and #EARTHDAYHHI event, provide accessible opportunities for locals and visitors of all ages to engage in tangible experiences to protect and preserve our local environment. According to survey research by the HHI Chamber of Commerce several of the top reasons visitors and tourists choose Hilton Head Island as a vacation destination is to enjoy the pristine beaches, clean waters, and outdoor activities. Our oyster shell recycling program extends the SC Department of Natural Resources work into our community and has the potential to significantly impact sustainability of our local oyster population, stabilization of our shorelines, and clean water to be enjoyed by all. Our oyster shell program is supported by two of the largest restaurant groups on the island:

SERG and CRAB. Our annual water festival attracts locals and visitors and is the first of its kind on HHI. The festival is supported by over 20 environmentally focused non-profits and organizations, each providing hands-on educational exhibits for attendees of all ages to enjoy and learn from.

4. How does the organization measure the effectiveness of both the overall activity and of individual programs? (200 words or less)

For all of our beach, park, and waterway cleanups, and #EARTHDAYHHI event, we register volunteers, event hours, and record how much and what type of trash is collected. We weigh all our trash and use the Litter-Free Digital Journal app in partnership with the South Carolina Aquarium.

For our annual "Keep the Broad Creek Clean" water festival we register each attendee and record zip codes. At our festival oyster reef builds we record volunteer names and zip codes, as well as hours and number of bags used in the reef construction.

For our Oyster Shell Recycling and Bed Restoration Program, we partner with i2 Recycle for shell pickup at restaurants. The shell is weighed upon pickup and weights are recorded for each restaurant. TOF receives a summary report. Currently, 27 seafood restaurants are enrolled for weekly pickups, We also capture shell at 5-10 local oyster roasts each year. From 2018-2023 in partnership with Island Rec, we have captured 29.95 tons of shucked shell from the HHI Oyster Festivals (estimated 4000 attendees in 2023).

For our "Paddle Battle" three day event we will have registration information on all racers, volunteer registrations, and a sign-in sheet for all spectators and additional event participants.

G. EXECUTIVE SUMMARY

Provide an executive summary using the "ATAX Effectiveness Measurement" form provided via the link on the left, or by utilizing the text area provided below to report uses of the organization's prior ATAX grant, if applicable. If creating your own format, please refer to the "ATAX Effectiveness Measurement" form and use the criteria as a guideline in developing your executive summary below. (1300 words or less)

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Nature-loving visitors come back, year after year. Some choose to eventually live here. It is these very strong connections - to the pristine beaches, dolphin-filled waterways, clean water, and abundance of local seafood - that are the most threatened by increased development and tourism on the island. In order to sustain, and grow, the number of visitors to the island each year, as well as protect the environment they expect upon arrival, more emphasis must continue to be placed on environmental sustainability. The Town of HHI's 2020-2040 "Our Plan" states that the environment and sustainability are the foundational values of our Island community, reminding all of us that Ecotourism could be, and should be, the future of HHI tourism. TOF's environmental sustainability impact programs are directed at protecting and preserving our local environment and uniquely aligned to deliver the Town of HHI's "healthy, sustainable environment" vision.

It is our goal to enhance the visitor experience to HHI by ensuring that our local waterways, beaches, and parks are free of litter. We also desire to be the means by which tourists, traveling to HHI for vacation with knowledge of the Island's history of ecologically sensitive development, would be able to actively engage in ecotourism activities. These activities, in turn, benefit our local economy, serve to enhance protections of our wildlife, and improve the overall quality of life for locals. As our numbers of tourists has increased substantially over the past ten years so has the amount trash and plastics on our beaches and along the banks of our waterways. The key to reversing this trend, we believe, is to enhance the visitor experience by creating a sense of "ownership." People are less likely to litter on the beach if they understand how that litter adversely affects the wildlife that live there. As grassroots, community-based non-profit, The Outside Foundation is uniquely positioned to educate, involve, and empower locals and visitors, as well as our next generation of island environmental stewards, in programs which directly impact our Island's environmental health in so many positive ways.

Signature: Jean Fruh

Title/Position: Executive Director

Mailing Address: 50 Shelter Cove Lane, Hilton Head Island, SC 29928

Email Address: jean@outsidefoundation.org

Office Phone Number: 304-642-1820

Home Phone Number: 304-642-1820

ATAX EFFECTIVENESS MEASUREMENT

Please refer to the SAMPLE ATAX Effectiveness Measurement Form for examples. When completing this form, please expand, contract, or add to the sections as needed (but contain the form to a total of approximately 2 pages). You may choose to use your own format instead of this form, and if doing so, please use the criteria below as a guideline. Regardless of format, each applicant should choose how they measure degree of success. Applicants need to explain why this is an effective measurement technique that reflects results and how that relates to the objective.

TOPIC	THE PLAN	BUDGET	ACTUAL SPENT	RESULTS <i>When possible, provide planned results vs. actual results, and/or current year vs. prior year results.</i>
Online volunteer and email management for improved recruiting and communicating with regular and new volunteers for all Foundation programming	Acquired powerful QR code generator (Bitly), impact graphics, enhanced calendar of events, volunteer engagement emails, and impact promotions	\$ 5,000.00	\$ 1,545.88	To date for 2024, our overall reach for Facebook has experienced a 213.9% increase, for Instagram a 105.5% increase; Facebook - 445.8K accounts reached, Instagram 75K Total Facebook and Instagram followers = 4858, an increase of 21.3%; our Ext Link click through increased 8%; Facebook post reach has increased by 213.9%, for Instagram 100%; Instagram 90 day post reach is 21.7K and the 90 day post reach/reel engagement increase is 45.7%
Website Overhaul - to vastly improve the scope, engagement level, and comprehensiveness of our website as a toll for community outreach	Foresight Communications began in January with update of logo (10 year celebration) and reconstruction of website, including updating all content, visual layout, organization of programs, direct volunteer registration links, enhancement tools for fundraising	\$ 5,000.00	\$ 4,148.96	In 2024 our website had 8982 site sessions (up from 6015 last year), 6543 tourist sessions (up from 2338 last year, 8234 unique visitors (up from 4668 in 2023), and 5983 tourist unique visits (up from 2063 in 2023, providing indication that our website is generating significantly more interest.
Total		\$ 10,000.00	\$ 5,694.84	

Beach, park, and waterway cleanups	Through the use of promotional material as well as print and digital media, promote volunteer participation in various litter sweeps Advertising and promotion to target volunteers and festival attendees, locals, visitors, and tourists - to educate about the importance of keeping our local waterways and natural spaces clean to protect local wildlife and enhance the beauty of our Island	\$ 8,000.00	\$ 6,783.00	To date we have hosted 10 litter sweeps with 518 volunteers participating, and 2381 pounds (1.2 tons) of trash removed. These clean ups include beaches, parks, boat landings, and waterways. Our new litter sweep events this year include: Juneteenth 5K as part of the weeklong celebration of events; a Burke's Beach litter sweep with volunteers from WSAV; a Sandalwood Community/HH Gardens Community litter sweep; and a celebration of Jimmy Buffet Day with 50 Margaritaville Community volunteers sweeping the Burke's Beach and parking lot area on 8/30
#EARTHDAYHHI	A community call-to-action through partnerships to engage as many volunteers of all ages as possible for an island-wide litter sweep			This past April our 2024 #EARTHDAYHHI event gathered 354 island residents, school students, teachers, and visitors to clean up the 12 miles of beachfront and other natural areas. We recieved a tremendous amount of support from our local Chamber of Commerce, Town of HHI, Beachfront Hotels, Turtle Tracker Groups, and community volunteers. A total of 1346 pounds of trash were collected and 27 areas, including beaches and parks, were cleaned.
Total		\$ 8,000.00	\$ 6,783.00	

Annual "Keep the Broad Creek Cream" Water Festival	Advertising and promotion to target volunteers and festival attendees, locals, visitors, and tourists - to educate about the importance of keeping our local waterways and natural spaces clean to protect local wildlife and enhance the beauty of our Island	\$ 6,000.00	\$ 7,224.63	Our 2024 water festival attracted over 300 attendees of all ages and was designated a "single-use plastic water bottle free" event. All attendees received a foldable, reusable water bottle. We initiated our first Kids Eco-Tattoo art contest and had 4 winners (as judged by local artists). Tattoos were distributed during the festival. 20 environmentally-focused non-profits and organizations set up educational and interactive nature displays. We held a walking and kayak-based clean up of the Broad Creek. 20 volunteers helped remove 240 pounds of trash and marine debris from the Broad Creek and its shorelines.
Total		\$ 6,000.00	\$ 7,224.63	

2024 OluKai Lowcountry Boil Paddle Battle Event and Pinckney Island Wildlife Refuge Litter Sweep	Advertising and promotion to target waterspouts athletes and top paddle boarding, kayaking, and Surf Ski paddlers from the SE Coast, Mid-Atlantic region, and locally during the "shoulder season" of September on HHI This year's race will be the 2024 National Championship for Paddle Boarding and as such we expect recess and their families from all over the US.	\$ 20,000.00	\$ 7,065.22	Scheduled for September 6-8 2024 this year's race event will be especially significant as USA SUP has designated our race as the National Championship. To date over 100 paddlers, including some from as far away as California, have registered to compete. Our goal this year is to host 150-200 paddlers who will compete in 4 different races on Saturday, and then additional competitions on Friday and Sunday. On Sunday The Outside Foundation will host a litter sweep of Pinckney Island Wildlife Refuge and Haigh Landing. Last year 165 volunteers helped remove 1730 pounds of trash. 160 race registrants as of 8/26/2024
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ATAX EFFECTIVENESS MEASUREMENT

	On Sunday the 8th we will partner with US Fish & Wildlife, Palmetto Pride, Palmetto Running Company, Keen on Klean and the Lowcountry Trash Heroes to host a litter sweep.			
Total		\$ 20,000.00	\$ 7,065.22	

Oyster Shell Recycling and Reef Building Project/Page Island Oyster Roast - March 3, 2024	Advertising and promotion to raise awareness and educate locals, visitors, and tourists about the need to capture and recycle shucked oyster shell for use in building new reefs (living shorelines) along the HHI shorelines	\$ 10,000.00	\$ 15,290.59	The involvement of community members, and tourists, in our oyster shell recycling, bagging, and reef building events has grown steadily - from just under 200 volunteers in 2022, to 310 volunteers in 2023, to 441 volunteers so far in 2024. Our community outreach events, like the HHI and Page Island Oyster Roasts are key to directly recruiting and educating future volunteers.
Recycled shell collected from 27 local restaurants and various festivals	To divert shucked oyster shells from being sent to our local landfill and thereby increase the capture amount for use in constructing new reef (living shorelines) to protect the vulnerable shorelines of HHI	\$ 18,000.00	\$ 3,000.00	To date we have diverted 15 tons of shucked shell from the landfill plus an additional 1.5 tons collected from the Beaufort Oyster Fest and 1.5 tons collected from the HHI Seafood Festival. Our participating restaurant number has increased from 21 to 27. In 2024 we have worked alongside the SCDNR to construct 7 new oyster reefs along the HHI shorelines. Fall is a busy season for both roasts and bagging events and, as such, we will use more of our funding then
Total		\$ 28,000.00	\$ 18,290.59	

Total Budget to Actual	\$ 72,000.00	\$ 45,058.28
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The Outside Foundation
Board of Directors Meeting - Minutes
August 29, 2024 5:30 pm

OB Conference Room/ZOOM

Attendees:

Mr. Ron Miele, Chair

Mr. Mike Overton, Vice-Chair (Zoom)

Mr. Brian Kinard, Treasurer

Ms. Melissa Krauss

Mr. Mike Cerrati

Mr. John Taylor (ZOOM)

Mr. Michael Cerrati, Secretary

Mr. Ted Neely (Zoom)

Dr. Jean Fruh, Executive Director

Guest:

Ms. Mary Heitman (Dev Director)

1. **Call to order** - Board Chair R Miele called the meeting to order 5:32pm and welcomed members of the TOF BOD.

2. **Resolution: Approval of the minutes** from April 25, 2024 meeting (B. Kinard, M Cerrati, second) - approved without corrections.

3. **Resolution: Approval of the 2025 ATAX application and ask** Executive Director J Fruh provided Board members with an overview of the 2025 application and a detailed breakdown of the \$72,000 requested. Board members were encouraged to attend the presentation - J Fruh will send the date and time as soon as she receives that (either October 17 or 24). Motion to approve (R. Miele, M Krauss second) Approved.

4. **Reports from Committees:**

Governance Committee - M Cerrati, Chair

M Cerrati, Chair of the Governance Committee, provided BOD members with an update on the committee's progress toward review and updating of current TOF policies as outlined in the 2024 Strategic Plan calendar. To date the committee has reviewed/updated the following policies: ByLaws, Whistleblower, Conflict of Interest, and Non-Discrimination. New ByLaws have already been approved by the full Board and the remaining three policies will undergo their final committee review and be presented to the full board for approval at the Q4 BOD Meeting (Oct 16). Following approval, a copy of each policy will be placed in the new BOD member on-boarding folder. The final on-boarding folder will then be presented to the Governance Committee for final approval.

R Miele noted a few typos in the Whistleblower policy and suggested having just M Cerrati, Secretary as the signee (instead of every member of the BOD).

At the recommendation of Legal Counsel Suzy Cole, the Governance Committee is minimizing the number of policies established to only those that are absolutely necessary. If needed by the ED for grant applications etc. the Governance Committee will consider adding additional policies - eg Social Responsibility Policy.

Finance Committee - B. Kinard, Chair

Chair B Kinard reviewed the Q2 and TYD Balance sheet and P&L statement. J Taylor confirmed that TOF's transition to Quickbooks has been going smoothly and that work continues on a few details concerning categories and subcategories within Quickbooks to make sure that Island Financial bookers and TOF have the same definitions of various expenses categories and that events/programs/fundraisers can be broken down within expense categories.

ED J Fruh and B Kinard presented the proposed 2025 Budget to the Board for discussion. M Cerrati stated that the Governance Committee would be reviewing ED J Fruh's salary for the upcoming year and completing her performance evaluation within the next three weeks.

Resolution: approval of the projected 2025 Budget (M Cerrati, R Miele second) approved

Development Director, M Heitman, provided a fundraising update. She began with an overview of the 2024-25 revenue stream and stated that following our

next fundraiser, the OluKai Paddle Battle event, our revenue should be on track to achieve our 2024 goals as stated in the Strategic Planning document. Also discussed was the October Donor “Thank You” party - planning is well underway and this event will also be used to launch TOF’s 2025 Sponsorship Packet.

Newsletters and emails containing a direct link to donate to the “100 for 100” Paddle Club Challenge have been effective and will continue. The next email will offer a chance to win an inflatable SUP Board for joining the Challenge. The drawing will be held during the Paddle Battle weekend.

M Heitman stated that she is now in the process of forming the short list of community members who have been suggested by BOD Members as candidates to serve on an Advisory Council. The goal of the Advisory Council is to identify community members who would have the time, talent, community connections, and interest, to assist TOF ED with various initiatives - fundraising, event organization, volunteer recruitment, etc. Several potential members have already been contacted and M Heitman states that the members will be invited to the Donor “Thank You” party in October.

M Heitman added that she is in the early stages of a 10 year anniversary Gala celebration fundraiser for TOF. Such an event takes 5-6 months to fully organize and execute, and such she feels pushing the event into what is actually the 11th year of TOF is best. Board members spoke in agreement with this timetable noting that having some Advisory Council members on board to assist would be a bonus.

M Heitman mentioned launching a “Giving Tuesday” event in late Fall as a year-end donor engagement opportunity. Details to follow.

J Fruh mentioned that TOF’s first ever Ohana nature cruise from the docks of Palmetto Bluff was a success and that a Fall cruise should be planned. M Overton added that both Fall and Spring season cruises would be scheduled. Residents of the Palmetto Bluff community would be invited to purchase tickets as a donation and would enjoy a two hour cruise through the back waters of the May River and have an opportunity to learn more about the work of the Foundation.

5. **Old Business - J Fruh**

Fall Strategic Planning Retreat - Chair R Miele suggested numerous possible dates for this full day retreat. Board members agreed that October 16th 9:30-4:00 would work for all. J Taylor suggested that instead of having the Q4 meeting, currently scheduled for the 24th as yet another meeting, it would be a good idea to include the Board meeting at the end of the retreat. Sandy West was suggested

as a facilitator. R Miele will work with M Overton, Vice-Chair, and J Fruh ED to propose an agenda and goals for the day. Several locations were suggested and various Board members will follow-up to confirm the final location. J Fruh will invite all the contractors who perform work for the Foundation.

6. **New Business - R Miele**

Advisory Council - R Miele stated that several community members he would like to interview for the Advisory Council are currently out of town and he has targeted September to continue his search. Several Board members agreed that reaching out to various friends and co-workers has been challenging over the summer vacation period.

Paddle Battle Event Race Director and TOF Board Member J Batson provided fellow Board members with an update on the upcoming OluKai Lowcountry Boil Paddle Battle race event. The event begins on Sept 5th with arrival of racers and their families. This year's race is actually the USA SUP National Championship and , as such, has drawn racer registrations from all over the US. So far, 170 racers have registered (a record) - there are 4 main races and several additional sprint and technical races Friday through Sunday at the HHI Rowing and Sailing Center and Sea Pines Resort. Friday afternoon, Outside Brands will host a Pint Night packet pick-up event and fundraiser for TOF at the main store in Shelter Plaza, 4-8pm. On Saturday spectators will have an opportunity to cruise along the race course while enjoying brunch on the Ohana boat or join a watch party/brunch at Benny's where a Jumbotron will have a live feed of the race. ~\$24,000 has been raised so far. The fundraising goal for the event is \$40,000 after expenses.

J Fruh added that on Sunday morning from 8-10am TOF will host a litter sweep of Pinckney Island Wildlife Refuge and Haigh Landing. Around 200 volunteers are expected. Last year 165 volunteers removed 1730# of trash.

7. **Executive Director's Report**

Account Balances:

Coastal States Bank - checking	\$130,366.14
Community Foundation of the LC	\$56,192.12

Programs YTD

- **"Kids in Kayaks" 2024-25**

- Beginning on September 25 at St Helena Island w/Lady's Island MS through November 6th we have 23 dates scheduled and more are expected in November
- Spring 2025 9 dates are scheduled in March and April, all at St Helena for Beaufort area MS
- Expectation for enrollment 1400+

2023-24 school year we hosted 1329 students and provided \$9285 in scholarship support. For 2024-25 all program costs = \$30 per student; projected total program cost will be \$40,800 with ~\$16,000 needed for scholarship support.

- **Litter Sweeps**

- 10 events so far, 518 volunteers, 1.2 tons of trash
- #EARTHDAYHHI - 354 volunteers, 1347# of trash removed
- August 30th "Jimmy Buffett Day" litter sweep with volunteers from Latitude Margaritaville - 10am Burke's Beach
- Sept 8 PIWR and Haigh Landing litter sweep 8-10am
- Sept 13 Cross Island Boat Landing (Miller Group); Coligny Beach USCB Environmental Club
- September 21 9-11:30 Oyster Factory Park
- 3rd and final kayak-based litter sweep of the Broad Creek will be held in November

- **Oyster Shell Recycling**

- Record year for the SCORE Division of SCDNR - shell capture & reef builds
- TOF is a "model" program - see video by C. Perry (SASMI/PEW & SCDNR)
- 2534 bags filled by 322 volunteers
- 7 reef built (2 May River, 1 Haig Pt, 4 HHI) = 631.7 linear feet of reef
- 6000 spartina plants planted (Harbor Town/Palmetto Bluff)
- CCA/Bluffton Rotary used 350 bags for additional build in May River
- Pilot program
- First bagging event of Fall - Sept 21 ROCS
- ~ capture so far in 2024 ~ 20 tons
- HHI Oyster Festival - Nov 8-9 (to date we've captured 18.85 tons in 6 years)

Website Rebuild Update -

- Progress is slow but happening

TOF “Kids in Kayaks” enclosed trailer

- Currently at Island Rec - we need a more visible location!

Upcoming meetings:

Strategic Planning Retreat/4Q BOD Meeting

October 16 9:30-4pm location: TBD

additional invites: all TOF contractors

The meeting was adjourned by M. Overton at 7:05pm (B. Kinard, M Cerrati, second)

Respectfully submitted - J. Fruh, Secretary

CATEGORY	2025 REV PROJECT	OTHER REVENUE	2025 EXPENSE PR
REVENUE			
2025 Donations/Annual Memberships	\$35,000		
2025 Grants	\$60,000		
ATAX	\$72,000		
2025 Corporate Sponsorships	\$40,000		
2025 Online Giving General	\$5,000		
2025 KBBC Water Festival Raffle Ticket	\$4,000.00		
2025 Oyster Roast*	\$115,000		
Paddle Battle	\$35,000		
10th year Celebration	\$100,000		
In-kind		\$30,000	
Community Foundation acct.		\$55,000	
State Grant - money to be spent/deposited in prior year		\$75,000	
TOTAL SUBTOTAL REVENUE	\$466,000	\$160,000	
TOTAL REVENUE	626,000.00		
Expense			
5010 · Advertising and Promotion			\$55,000
5040 · Contract Labor			\$129,000
5070 · Dues and Licenses			\$1,500
5078 · Fundraising Expense			\$100,000
5080 · Insurance - Liability			\$15,000
5090 · Insurance - Health			\$7,000
5107 · Meeting Expense			\$500
5120 · Office Supplies			\$600
5140 · Professional Services			\$5,000
5145 · Program Expenses			\$108,000

5150 · Postage & Shipping				\$125
5152 · Recycling Services				\$3,500
5160 · Rent - Premises				\$2,500
5200 · Salaries - Executive Director				\$50,000
5240 · Taxes - Property Beaufort County				\$200.00
5260 · Travel				\$1,500
6600 · Payroll Expenses				\$8,000
TOTAL EXPENSES				\$487,425

The Outside Foundation New File

Balance Sheet

As of August 25, 2024

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
1052 Cash In Bank - Coastal	206,683.35
Total Bank Accounts	\$206,683.35
Other Current Assets	
1080 Payroll Exchange	0.00
1110 Accounts Receivable - Sale	400.00
1210 Inventory - Logo Items Etc.	1,423.00
1350 Deposit at Community Foundation	298.12
Total Other Current Assets	\$2,121.12
Total Current Assets	\$208,804.47
Fixed Assets	
1530 Equipment	19,165.32
1580 Accumulated Depreciation - Equi	-11,772.69
Total Fixed Assets	\$7,392.63
TOTAL ASSETS	\$216,197.10
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Credit Cards	
1645 AMEX Blue - 9-01002	7,992.37
1650 Gold Circuit Visa	0.00
Total Credit Cards	\$7,992.37
Other Current Liabilities	
2080 State Income Tax	0.00
2320 Old outstanding checks	0.00
24000 Payroll Liabilities	0.04
Total Other Current Liabilities	\$0.04
Total Current Liabilities	\$7,992.41
Total Liabilities	\$7,992.41
Equity	
3040 Retained Fund Equity	35,541.32
32000 Unrestricted Net Assets	126,184.20
Net Income	46,479.17
Total Equity	\$208,204.69
TOTAL LIABILITIES AND EQUITY	\$216,197.10

The Outside Foundation
Balance Sheet
As of December 31, 2023

	<u>Dec 31, 23</u>
ASSETS	
Current Assets	
Checking/Savings	
1052 · Cash In Bank - Coastal	167,185.82
Total Checking/Savings	<u>167,185.82</u>
Other Current Assets	
1110 · Accounts Receivable - Sale	400.00
1210 · Inventory - Logo Items Etc.	1,423.00
Total Other Current Assets	<u>1,823.00</u>
Total Current Assets	<u>169,008.82</u>
Fixed Assets	
1530 · Equipment	19,165.32
1580 · Accumulated Depreciation - Equi	-11,772.69
Total Fixed Assets	<u>7,392.63</u>
TOTAL ASSETS	<u><u>176,401.45</u></u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
2080 · State Income Tax	592.83
24000 · Payroll Liabilities	3,207.78
Total Other Current Liabilities	<u>3,800.61</u>
Total Current Liabilities	<u>3,800.61</u>
Total Liabilities	3,800.61
Equity	
3040 · Retained Fund Equity	35,541.32
32000 · Unrestricted Net Assets	163,828.08
Net Income	-26,768.56
Total Equity	<u>172,600.84</u>
TOTAL LIABILITIES & EQUITY	<u><u>176,401.45</u></u>

The Outside Foundation
Profit & Loss
December 2023

	<u>Dec 23</u>
Ordinary Income/Expense	
Income	
4022 · Grants Received	21,415.62
4023 · Donations Recieved	4,220.00
4028 · Fund Raising Events	4,486.75
Total Income	<u>30,122.37</u>
Gross Profit	30,122.37
Expense	
5030 · Bank Service Charges	27.70
5040 · Contract Labor	5,700.00
5090 · Insurance - Health	167.86
5145 · Program Expenses	6,393.38
5200 · Salaries - Executive Director	7,833.34
5235 · Taxes - Real Estate	214.12
66000 · Payroll Expenses	6,358.72
Total Expense	<u>26,695.12</u>
Net Ordinary Income	3,427.25
Other Income/Expense	
Other Income	
9620 · Stale Checks	89.00
Total Other Income	<u>89.00</u>
Net Other Income	<u>89.00</u>
Net Income	<u><u>3,516.25</u></u>

The Outside Foundation
Profit & Loss
January through December 2023

	Jan - Dec 23
Ordinary Income/Expense	
Income	
4022 · Grants Received	54,939.81
4023 · Donations Recieved	55,559.33
4028 · Fund Raising Events	107,046.87
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Total Income	217,546.01
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Gross Profit	217,546.01
Expense	
5010 · Advertising and Promotion	18,963.88
5025 · Auto Expense	290.82
5030 · Bank Service Charges	27.70
5040 · Contract Labor	57,657.93
5070 · Dues and Licenses	1,006.58
5078 · Fundraising Expense	41,383.22
5080 · Insurance - Liability	1,382.28
5090 · Insurance - Health	5,961.98
5107 · Meeting Expense	182.51
5120 · Office Supplies	512.86
5130 · Operating Supplies	8,928.50
5140 · Professional Services	4,678.00
5145 · Program Expenses	47,863.50
5150 · Postage & Shipping	113.55
5152 · Recycling Services	3,114.12
5160 · Rent - Premises	1,630.00
5200 · Salaries - Executive Director	47,000.04
5235 · Taxes - Real Estate	214.12
5240 · Taxes - Other	1,380.69
5260 · Travel	530.16
5265 · Uniform Expense	160.50
66000 · Payroll Expenses	10,118.63
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Total Expense	253,101.57
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Net Ordinary Income	-35,555.56
Other Income/Expense	
Other Income	
9615 · Credit Card Rewards/Credits	250.00
9620 · Stale Checks	8,537.00
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Total Other Income	8,787.00
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Net Other Income	8,787.00
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Net Income	-26,768.56
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The Outside Foundation
Profit & Loss
January through December 2023

	Jan - Dec 23	Jan - Dec 22	\$ Change
Ordinary Income/Expense			
Income			
4020 · Sales - Logo Items Etc.	0.00	75.00	-75.00
4022 · Grants Received	54,939.81	175,378.59	-120,438.78
4023 · Donations Received	55,559.33	82,600.95	-27,041.62
4028 · Fund Raising Events	107,046.87	88,916.59	18,130.28
Total Income	217,546.01	346,971.13	-129,425.12
Cost of Goods Sold			
4520 · Purchase - Logo Items Etc.	0.00	179.00	-179.00
Total COGS	0.00	179.00	-179.00
Gross Profit	217,546.01	346,792.13	-129,246.12
Expense			
5010 · Advertising and Promotion	18,963.88	24,507.95	-5,544.07
5025 · Auto Expense	290.82	0.00	290.82
5030 · Bank Service Charges	27.70	52.00	-24.30
5040 · Contract Labor	57,657.93	31,008.24	26,649.69
5055 · Depreciation Expense	0.00	1,904.69	-1,904.69
5060 · Donations	0.00	103.06	-103.06
5070 · Dues and Licenses	1,006.58	366.00	640.58
5078 · Fundraising Expense	41,383.22	33,122.88	8,260.34
5080 · Insurance - Liability	1,382.28	1,023.88	358.40
5090 · Insurance - Health	5,961.98	0.00	5,961.98
5105 · Management Charges	0.00	0.00	0.00
5107 · Meeting Expense	182.51	414.10	-231.59
5110 · Printing	0.00	129.92	-129.92
5120 · Office Supplies	512.86	1,129.58	-616.72
5130 · Operating Supplies	8,928.50	0.00	8,928.50
5140 · Professional Services	4,678.00	2,150.00	2,528.00
5145 · Program Expenses	47,863.50	26,752.14	21,111.36
5150 · Postage & Shipping	113.55	72.96	40.59
5152 · Recycling Services	3,114.12	3,374.48	-260.36
5160 · Rent - Premises	1,630.00	1,638.39	-8.39
5200 · Salaries - Executive Director	47,000.04	47,916.71	-916.67
5205 · Salaries - Other	0.00	3,100.00	-3,100.00
5230 · Taxes - Payroll	0.00	0.00	0.00
5235 · Taxes - Real Estate	214.12	0.00	214.12
5240 · Taxes - Other	1,380.69	0.00	1,380.69
5260 · Travel	530.16	51.00	479.16
5265 · Uniform Expense	160.50	245.00	-84.50
66000 · Payroll Expenses	10,118.63	3,902.80	6,215.83
Total Expense	253,101.57	182,965.78	70,135.79
Net Ordinary Income	-35,555.56	163,826.35	-199,381.91
Other Income/Expense			
Other Income			
9610 · Interest	0.00	2.00	-2.00
9615 · Credit Card Rewards/Credits	250.00	0.00	250.00
9620 · Stale Checks	8,537.00	0.00	8,537.00
Total Other Income	8,787.00	2.00	8,785.00
Other Expense			
9705 · Interest Expense	0.00	0.27	-0.27
Total Other Expense	0.00	0.27	-0.27
Net Other Income	8,787.00	1.73	8,785.27
Net Income	-26,768.56	163,828.08	-190,596.64

The Outside Foundation
Trial Balance
As of December 31, 2023

	Dec 31, 23	
	Debit	Credit
1052 · Cash In Bank - Coastal	167,185.82	
1080 · Payroll Exchange	0.00	
1110 · Accounts Receivable - Sale	400.00	
1210 · Inventory - Logo Items Etc.	1,423.00	
1350 · Deposit at Community Foundation	0.00	
1530 · Equipment	19,165.32	
1580 · Accumulated Depreciation - Equi		11,772.69
1645 · AMEX Blue - 9-01002	0.00	
1650 · Gold Circuit Visa	0.00	
2080 · State Income Tax		592.83
2320 · Old outstanding checks	0.00	
24000 · Payroll Liabilities		3,207.78
3040 · Retained Fund Equity		35,541.32
32000 · Unrestricted Net Assets		163,828.08
4022 · Grants Received		54,939.81
4023 · Donations Recieved		55,559.33
4028 · Fund Raising Events		107,046.87
5010 · Advertising and Promotion	18,963.88	
5025 · Auto Expense	290.82	
5030 · Bank Service Charges	27.70	
5040 · Contract Labor	57,657.93	
5070 · Dues and Licenses	1,006.58	
5078 · Fundraising Expense	41,383.22	
5080 · Insurance - Liability	1,382.28	
5090 · Insurance - Health	5,961.98	
5107 · Meeting Expense	182.51	
5120 · Office Supplies	512.86	
5130 · Operating Supplies	8,928.50	
5140 · Professional Services	4,678.00	
5145 · Program Expenses	47,863.50	
5150 · Postage & Shipping	113.55	
5152 · Recycling Services	3,114.12	
5160 · Rent - Premises	1,630.00	
5200 · Salaries - Executive Director	47,000.04	
5235 · Taxes - Real Estate	214.12	
5240 · Taxes - Other	1,380.69	
5260 · Travel	530.16	
5265 · Uniform Expense	160.50	
66000 · Payroll Expenses	10,118.63	
9615 · Credit Card Rewards/Credits		250.00
9620 · Stale Checks		8,537.00
TOTAL	441,275.71	441,275.71

The Outside Foundation
Balance Sheet
As of December 31, 2022

	Dec 31, 22
ASSETS	
Current Assets	
Checking/Savings	
1052 · Cash In Bank - Coastal	192,419.50
Total Checking/Savings	192,419.50
Other Current Assets	
1110 · Accounts Receivable - Sale	400.00
1210 · Inventory - Logo Items Etc.	1,423.00
Total Other Current Assets	1,823.00
Total Current Assets	194,242.50
Fixed Assets	
1530 · Equipment	16,564.00
1580 · Accumulated Depreciation - Equi	-10,200.00
Total Fixed Assets	6,364.00
TOTAL ASSETS	200,606.50
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
2080 · State Income Tax	375.00
24000 · Payroll Liabilities	1,890.73
Total Other Current Liabilities	2,265.73
Total Current Liabilities	2,265.73
Total Liabilities	2,265.73
Equity	
3040 · Retained Fund Equity	32,940.00
Net Income	165,400.77
Total Equity	198,340.77
TOTAL LIABILITIES & EQUITY	200,606.50

The Outside Foundation
Profit & Loss
October through December 2022

	Oct - Dec 22	Jan - Dec 22
Ordinary Income/Expense		
Income		
4020 · Sales - Logo Items Etc.	0.00	75.00
4022 · Grants Received	141,158.91	175,378.59
4023 · Donations Recieved	27,423.38	82,600.95
4028 · Fund Raising Events	13,373.81	88,916.59
Total Income	181,956.10	346,971.13
Cost of Goods Sold		
4520 · Purchase - Logo Items Etc.	0.00	179.00
Total COGS	0.00	179.00
Gross Profit	181,956.10	346,792.13
Expense		
5010 · Advertising and Promotion	-833.94	24,507.95
5030 · Bank Service Charges	0.00	52.00
5040 · Contract Labor	10,381.58	31,008.24
5055 · Depreciation Expense	0.00	332.00
5060 · Donations	0.00	103.06
5070 · Dues and Licenses	0.00	366.00
5078 · Fundraising Expense	540.67	33,122.88
5080 · Insurance - Liability	25.88	1,023.88
5105 · Management Charges	0.00	0.00
5107 · Meeting Expense	39.24	414.10
5110 · Printing	75.92	129.92
5120 · Office Supplies	618.32	1,129.58
5140 · Professional Services	200.00	2,150.00
5145 · Program Expenses	8,960.86	26,752.14
5150 · Postage & Shipping	17.15	72.96
5152 · Recycling Services	630.36	3,374.48
5160 · Rent - Premises	504.39	1,638.39
5200 · Salaries - Executive Director	8,750.01	47,916.71
5205 · Salaries - Other	0.00	3,100.00
5230 · Taxes - Payroll	0.00	0.00
5260 · Travel	0.00	51.00
5265 · Uniform Expense	0.00	245.00
66000 · Payroll Expenses	669.37	3,902.80
Total Expense	30,579.81	181,393.09
Net Ordinary Income	151,376.29	165,399.04
Other Income/Expense		
Other Income		
9610 · Interest	0.00	2.00
Total Other Income	0.00	2.00
Other Expense		
9705 · Interest Expense	0.00	0.27
Total Other Expense	0.00	0.27
Net Other Income	0.00	1.73
Net Income	151,376.29	165,400.77

The Outside Foundation
Profit & Loss
January through December 2022

	<u>Jan - Dec 22</u>	<u>Jan - Dec 22</u>
Ordinary Income/Expense		
Income		
4020 · Sales - Logo Items Etc.	75.00	75.00
4022 · Grants Received	175,378.59	175,378.59
4023 · Donations Recieved	82,600.95	82,600.95
4028 · Fund Raising Events	88,916.59	88,916.59
Total Income	<u>346,971.13</u>	<u>346,971.13</u>
Cost of Goods Sold		
4520 · Purchase - Logo Items Etc.	179.00	179.00
Total COGS	<u>179.00</u>	<u>179.00</u>
Gross Profit	346,792.13	346,792.13
Expense		
5010 · Advertising and Promotion	24,507.95	24,507.95
5030 · Bank Service Charges	52.00	52.00
5040 · Contract Labor	31,008.24	31,008.24
5055 · Depreciation Expense	332.00	332.00
5060 · Donations	103.06	103.06
5070 · Dues and Licenses	366.00	366.00
5078 · Fundraising Expense	33,122.88	33,122.88
5080 · Insurance - Liability	1,023.88	1,023.88
5105 · Management Charges	0.00	0.00
5107 · Meeting Expense	414.10	414.10
5110 · Printing	129.92	129.92
5120 · Office Supplies	1,129.58	1,129.58
5140 · Professional Services	2,150.00	2,150.00
5145 · Program Expenses	26,752.14	26,752.14
5150 · Postage & Shipping	72.96	72.96
5152 · Recycling Services	3,374.48	3,374.48
5160 · Rent - Premises	1,638.39	1,638.39
5200 · Salaries - Executive Director	47,916.71	47,916.71
5205 · Salaries - Other	3,100.00	3,100.00
5230 · Taxes - Payroll	0.00	0.00
5260 · Travel	51.00	51.00
5265 · Uniform Expense	245.00	245.00
66000 · Payroll Expenses	3,902.80	3,902.80
Total Expense	<u>181,393.09</u>	<u>181,393.09</u>
Net Ordinary Income	165,399.04	165,399.04
Other Income/Expense		
Other Income		
9610 · Interest	2.00	2.00
Total Other Income	<u>2.00</u>	<u>2.00</u>
Other Expense		
9705 · Interest Expense	0.27	0.27
Total Other Expense	<u>0.27</u>	<u>0.27</u>
Net Other Income	<u>1.73</u>	<u>1.73</u>
Net Income	<u><u>165,400.77</u></u>	<u><u>165,400.77</u></u>

**Financial statements of
*The Outside Foundation***

For the period ending December 31, 2021

THE OUTSIDE FOUNDATION
 STMT OF ASSETS, LIABILITIES AND EQUITY-CASH BASIS
 DECEMBER 31, 2021

ASSETS

CURRENT ASSETS			
1052	CASH IN BANK-COASTAL STATES BANK	\$	26,249
1110	ACCOUNTS RECEIVABLE-SALE OF LOGO ITEMS		400
1210	INVENTORY-LOGO ITEMS ETC.		1,423
1350	DEPOSIT AT COMMUNITY FOUNDATION		53,862
			53,862
	TOTAL CURRENT ASSETS	\$	81,934
PROPERTY, PLANT AND EQUIPMENT			
1530	EQUIPMENT		16,564
1580	ACCUMULATED DEPRECIATION-EQUIPMENT		(9,868)
			6,696
	TOTAL PROPERTY, PLANT AND EQUIPMENT		6,696
	TOTAL ASSETS	\$	88,630

LIABILITIES AND FUND EQUITY

CURRENT LIABILITIES			
2022	ADVANCE-SBA-PPP FUNDS	\$	7,300
2060	FICA TAX WITHHELD		798
2070	FEDERAL INCOME TAX WITHHELD		586
2080	STATE INCOME TAX WITHHELD		443
			9,127
	TOTAL CURRENT LIABILITIES	\$	9,127
FUND EQUITY			
3040	RETAINED FUND EQUITY (DEFICIT)		84,824
3050	CURRENT YEAR SURPLUS (DEFICIT)		(5,321)
			79,502
	TOTAL FUND EQUITY		79,502
	TOTAL LIABILITIES AND FUND EQUITY	\$	88,630

NO ASSURANCE IS PROVIDED ON THESE FINANCIAL STATEMENTS

THE OUTSIDE FOUNDATION
STATEMENT OF REVENUE AND EXPENSES -CASH BASIS
FOR THE TWELVE MONTHS ENDED DECEMBER 31, 2021

	Current		Year To Date	
	Actual	Percent	Actual	Percent
REVENUE				
4020	\$ 91	0.2	\$ 1,246	1.0
4022	27,080	49.4	48,462	38.9
4023	15,919	29.1	24,980	20.1
4024			1,500	1.2
4028	11,695	21.3	48,302	38.8
	<hr/>		<hr/>	
* TOTAL REVENUE	54,784	100.0	124,491	100.0
COST OF SALES				
4520			2,143	1.7
4550			1,700	1.4
	<hr/>		<hr/>	
* TOTAL COST OF SALES	0	0.0	3,843	3.1
	<hr/>		<hr/>	
* GROSS PROFIT	54,784	100.0	120,648	96.9
OPERATING EXPENSES				
5010				
	8,163	14.9	24,799	19.9
5030	31	0.1	57	0.0
5040	5,270	9.6	17,830	14.3
5045	300	0.5	300	0.2
5050			9	0.0
5055	166	0.3	1,366	1.1
5060			1,104	0.9
5070			342	0.3
5077			418	0.3
5078	3,698	6.7	18,233	14.6
5080			510	0.4
5105	214	0.4	645	0.5
5107	98	0.2	217	0.2
5110	(116)	(0.2)	(116)	(0.1)
5120	73	0.1	361	0.3
5130			237	0.2
5140	375	0.7	1,850	1.5
5145	6,564	12.0	16,598	13.3
5150			73	0.1
5152	552	1.0	2,518	2.0
5160	238	0.4	1,201	1.0
5180	112	0.2	112	0.1
5200				
	7,917	14.5	26,667	21.4
5205	2,520	4.6	7,860	6.3
5210	102	0.2	102	0.1
5230	604	1.1	2,434	2.0
5240			52	0.0
5265			135	0.1
	<hr/>		<hr/>	
* TOTAL OPERATING EXPENSES	36,880	67.3	125,916	101.1

NO ASSURANCE IS PROVIDED ON THESE FINANCIAL STATEMENTS

THE OUTSIDE FOUNDATION
STATEMENT OF REVENUE AND EXPENSES -CASH BASIS
FOR THE TWELVE MONTHS ENDED DECEMBER 31, 2021

		Current		Year To Date	
		Actual	Percent	Actual	Percent
	* NET OPERATING INCOME (LOSS)	17,904	32.7	(5,268)	(4.2)
	OTHER INCOME				
9610	INTEREST	(5)	(0.0)	(36)	(0.0)
	* TOTAL OTHER INCOME	(5)	(0.0)	(36)	(0.0)
	OTHER EXPENSES				
9705	INTEREST EXPENSE			90	0.1
	* TOTAL OTHER EXPENSES	0	0.0	90	0.1
	* NET INCOME (LOSS)	17,909	32.7	(5,321)	(4.3)
	* NET INCOME (LOSS) AFTER INCOM \$	17,909	32.7	\$ (5,321)	(4.3)

NO ASSURANCE IS PROVIDED ON THESE FINANCIAL STATEMENTS

THE OUTSIDE FOUNDATION
STATEMENT OF REVENUE AND EXPENSES -CASH BASIS
FOR THE TWELVE MONTHS ENDED DECEMBER 31, 2021

	Current			Year To Date		
	Actual	Last Year	Ly-Var	Actual	Last Year	Ly-Var
REVENUE						
4020 SALES-LOGO ITEMS ETC.	\$ 91	\$ 71	\$ 20	\$ 1,246	\$ 1,152	\$ 94
4022 GRANTS RECEIVED	27,080	4,000	23,080	48,462	15,465	32,997
4023 DONATIONS RECEIVED	15,919	3,076	12,843	24,980	33,685	(8,704)
4024 SALE OF DONATED ITEM		850	(850)	1,500	850	650
4028 FUND RAISING EVENTS	11,695	1,265	10,430	48,302	50,817	(2,514)
4029 RECYCLING FEES RECEIVED					432	(432)
* TOTAL REVENUE	54,784	9,262	45,522	124,491	102,400	22,091
COST OF SALES						
4520 PURCHASES-LOGO ITEMS ETC				2,143		(2,143)
4550 PURCHASES - OTHER				1,700		(1,700)
* TOTAL COST OF SALES	0	0	0	3,843	0	(3,843)
* GROSS PROFIT	54,784	9,262	45,522	120,648	102,400	18,248
OPERATING EXPENSES						
5010 ADVERTISING AND PROMOTION	8,163	56	(8,106)	24,799	986	(23,813)
5030 BANK SERVICE CHARGES	31		(31)	57	25	(32)
5040 CONTRACT LABOR	5,270	3,550	(1,720)	17,830	10,362	(7,467)
5045 CHRISTMAS EXPENSE	300	300		300	300	
5050 CREDIT CARD DISCOUNT FEES				9		(9)
5055 DEPRECIATION EXPENSE	166	1,516	1,350	1,366	1,516	150
5060 DONATIONS				1,104	1,000	(104)
5070 DUES AND LICENSES		45	45	342	290	(52)
5077 EVENT EXPENSES				418	611	193
5078 FUNDRAISING EXPENSE	3,698		(3,698)	18,233	17,923	(310)
5080 INSURANCE-LIABILITY				510	1,003	493
5105 MANAGEMENT CHARGES	214	148	(66)	645	448	(198)
5107 MEETING EXPENSE	98	181	83	217	318	101
5110 PRINTING	(116)		116	(116)		116
5120 OFFICE SUPPLIES	73	304	231	361	521	160
5130 OPERATING SUPPLIES		50	50	237	101	(136)
5140 PROFESSIONAL SERVICES	375	375		1,850	1,750	(100)
5145 PROGRAM EXPENSES	6,564	4,006	(2,558)	16,598	5,166	(11,432)
5150 POSTAGE AND SHIPPING		33	33	73	78	4
5152 RECYCLING SERVICES	552	704	152	2,518	5,367	2,849
5160 RENT - PREMISES	238	291	53	1,201	291	(910)
5180 REPAIRS AND MAINTENANCE	112	10	(102)	112	10	(102)
5200 SALARIES-EXECUTIVE						
DIRECTOR	7,917	6,250	(1,667)	26,667	25,000	(1,667)
5205 SALARIES-OTHER	2,520	1,480	(1,040)	7,860	8,020	160
5210 SALES EXPENSE	102		(102)	102		(102)
5212 SCHOLARSHIP EXPENSE					200	200
5230 TAXES - PAYROLL	604	596	(8)	2,434	2,613	179
5240 TAXES - OTHER				52		(52)
5265 UNIFORM EXPENSE				135	218	83

NO ASSURANCE IS PROVIDED ON THESE FINANCIAL STATEMENTS

THE OUTSIDE FOUNDATION
STATEMENT OF REVENUE AND EXPENSES - CASH BASIS
FOR THE TWELVE MONTHS ENDED DECEMBER 31, 2021

	Current			Year To Date		
	Actual	Last Year	Ly-Var	Actual	Last Year	Ly-Var
* TOTAL OPERATING EXPENSES	36,880	19,896	(16,985)	125,916	84,117	(41,799)
* NET OPERATING INCOME (LOSS)	17,904	(10,633)	28,537	(5,268)	18,283	(23,551)
OTHER INCOME						
9610 INTEREST	(5)		5	(36)	(90)	(54)
* TOTAL OTHER INCOME	(5)	0	5	(36)	(90)	(54)
OTHER EXPENSES						
9705 INTEREST EXPENSE				90		(90)
* TOTAL OTHER EXPENSES	0	0	0	90	0	(90)
* NET INCOME (LOSS)	17,909	(10,633)	28,542	(5,321)	18,374	(23,695)
* NET INCOME (LOSS) AFTER INCOM \$	17,909	\$ (10,633)	\$ 28,542	\$ (5,321)	\$ 18,374	\$ (23,695)

NO ASSURANCE IS PROVIDED ON THESE FINANCIAL STATEMENTS

The Outside Foundation New File

Profit and Loss

January 1 - August 25, 2024

	TOTAL
Income	
4022 Grants Received	
4022-1 Organization	7,500.00
4022-2 Government	32,501.26
Total 4022 Grants Received	40,001.26
4023 Donations Recieved	82,750.57
4023-2 Retail & Hats	143.91
4023-6 Annual Giving	47.00
4023-8 Recurring Gifts	50.00
Total 4023 Donations Recieved	82,991.48
4028 Fund Raising Events	92,982.07
4028-1 Page Island	6,600.00
Total 4028 Fund Raising Events	99,582.07
Total Income	\$222,574.81
GROSS PROFIT	\$222,574.81
Expenses	
5010 Advertising and Promotion	16,422.55
5040 Contract Labor	48,345.12
5070 Dues and Licenses	263.70
5078 Fundraising Expense	19,962.45
5080 Insurance - Liability	3,983.00
5090 Insurance - Health	839.80
5107 Meeting Expense	169.75
5120 Office Supplies	325.07
5140 Professional Services	8,460.00
5145 Program Expenses	52,129.66
5150 Postage & Shipping	53.60
5152 Recycling Services	1,332.00
5160 Rent - Premises	855.00
5200 Salaries - Executive Director	18,814.00
5235 Taxes - Real Estate	194.42
5260 Travel	1,489.33
66000 Payroll Expenses	956.25
Total Expenses	\$174,595.70
NET OPERATING INCOME	\$47,979.11
Other Income	
9610 Interest	298.12
9615 Credit Card Rewards/Credits	960.25
Total Other Income	\$1,258.37

The Outside Foundation New File

Profit and Loss

January 1 - August 25, 2024

	TOTAL
Other Expenses	
9710 Unclassified	2,758.31
Total Other Expenses	\$2,758.31
NET OTHER INCOME	\$ -1,499.94
NET INCOME	\$46,479.17

The Outside Foundation
Balance Sheet
As of December 31, 2023

	<u>Dec 31, 23</u>
ASSETS	
Current Assets	
Checking/Savings	
1052 · Cash In Bank - Coastal	167,185.82
Total Checking/Savings	<u>167,185.82</u>
Other Current Assets	
1110 · Accounts Receivable - Sale	400.00
1210 · Inventory - Logo Items Etc.	1,423.00
Total Other Current Assets	<u>1,823.00</u>
Total Current Assets	<u>169,008.82</u>
Fixed Assets	
1530 · Equipment	19,165.32
1580 · Accumulated Depreciation - Equi	-11,772.69
Total Fixed Assets	<u>7,392.63</u>
TOTAL ASSETS	<u><u>176,401.45</u></u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
2080 · State Income Tax	592.83
24000 · Payroll Liabilities	3,207.78
Total Other Current Liabilities	<u>3,800.61</u>
Total Current Liabilities	<u>3,800.61</u>
Total Liabilities	3,800.61
Equity	
3040 · Retained Fund Equity	35,541.32
32000 · Unrestricted Net Assets	163,828.08
Net Income	-26,768.56
Total Equity	<u>172,600.84</u>
TOTAL LIABILITIES & EQUITY	<u><u>176,401.45</u></u>

The Outside Foundation
Profit & Loss
December 2023

	<u>Dec 23</u>
Ordinary Income/Expense	
Income	
4022 · Grants Received	21,415.62
4023 · Donations Recieved	4,220.00
4028 · Fund Raising Events	4,486.75
	<hr/>
Total Income	30,122.37
	<hr/>
Gross Profit	30,122.37
Expense	
5030 · Bank Service Charges	27.70
5040 · Contract Labor	5,700.00
5090 · Insurance - Health	167.86
5145 · Program Expenses	6,393.38
5200 · Salaries - Executive Director	7,833.34
5235 · Taxes - Real Estate	214.12
66000 · Payroll Expenses	6,358.72
	<hr/>
Total Expense	26,695.12
	<hr/>
Net Ordinary Income	3,427.25
Other Income/Expense	
Other Income	
9620 · Stale Checks	89.00
	<hr/>
Total Other Income	89.00
	<hr/>
Net Other Income	89.00
	<hr/>
Net Income	<u><u>3,516.25</u></u>

The Outside Foundation
Profit & Loss
January through December 2023

	Jan - Dec 23
Ordinary Income/Expense	
Income	
4022 · Grants Received	54,939.81
4023 · Donations Recieved	55,559.33
4028 · Fund Raising Events	107,046.87
	<hr/>
Total Income	217,546.01
	<hr/>
Gross Profit	217,546.01
Expense	
5010 · Advertising and Promotion	18,963.88
5025 · Auto Expense	290.82
5030 · Bank Service Charges	27.70
5040 · Contract Labor	57,657.93
5070 · Dues and Licenses	1,006.58
5078 · Fundraising Expense	41,383.22
5080 · Insurance - Liability	1,382.28
5090 · Insurance - Health	5,961.98
5107 · Meeting Expense	182.51
5120 · Office Supplies	512.86
5130 · Operating Supplies	8,928.50
5140 · Professional Services	4,678.00
5145 · Program Expenses	47,863.50
5150 · Postage & Shipping	113.55
5152 · Recycling Services	3,114.12
5160 · Rent - Premises	1,630.00
5200 · Salaries - Executive Director	47,000.04
5235 · Taxes - Real Estate	214.12
5240 · Taxes - Other	1,380.69
5260 · Travel	530.16
5265 · Uniform Expense	160.50
66000 · Payroll Expenses	10,118.63
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Total Expense	253,101.57
	<hr/>
Net Ordinary Income	-35,555.56
Other Income/Expense	
Other Income	
9615 · Credit Card Rewards/Credits	250.00
9620 · Stale Checks	8,537.00
	<hr/>
Total Other Income	8,787.00
	<hr/>
Net Other Income	8,787.00
	<hr/>
Net Income	-26,768.56
	<hr/> <hr/>

The Outside Foundation
Profit & Loss
January through December 2023

	Jan - Dec 23	Jan - Dec 22	\$ Change
Ordinary Income/Expense			
Income			
4020 · Sales - Logo Items Etc.	0.00	75.00	-75.00
4022 · Grants Received	54,939.81	175,378.59	-120,438.78
4023 · Donations Received	55,559.33	82,600.95	-27,041.62
4028 · Fund Raising Events	107,046.87	88,916.59	18,130.28
Total Income	217,546.01	346,971.13	-129,425.12
Cost of Goods Sold			
4520 · Purchase - Logo Items Etc.	0.00	179.00	-179.00
Total COGS	0.00	179.00	-179.00
Gross Profit	217,546.01	346,792.13	-129,246.12
Expense			
5010 · Advertising and Promotion	18,963.88	24,507.95	-5,544.07
5025 · Auto Expense	290.82	0.00	290.82
5030 · Bank Service Charges	27.70	52.00	-24.30
5040 · Contract Labor	57,657.93	31,008.24	26,649.69
5055 · Depreciation Expense	0.00	1,904.69	-1,904.69
5060 · Donations	0.00	103.06	-103.06
5070 · Dues and Licenses	1,006.58	366.00	640.58
5078 · Fundraising Expense	41,383.22	33,122.88	8,260.34
5080 · Insurance - Liability	1,382.28	1,023.88	358.40
5090 · Insurance - Health	5,961.98	0.00	5,961.98
5105 · Management Charges	0.00	0.00	0.00
5107 · Meeting Expense	182.51	414.10	-231.59
5110 · Printing	0.00	129.92	-129.92
5120 · Office Supplies	512.86	1,129.58	-616.72
5130 · Operating Supplies	8,928.50	0.00	8,928.50
5140 · Professional Services	4,678.00	2,150.00	2,528.00
5145 · Program Expenses	47,863.50	26,752.14	21,111.36
5150 · Postage & Shipping	113.55	72.96	40.59
5152 · Recycling Services	3,114.12	3,374.48	-260.36
5160 · Rent - Premises	1,630.00	1,638.39	-8.39
5200 · Salaries - Executive Director	47,000.04	47,916.71	-916.67
5205 · Salaries - Other	0.00	3,100.00	-3,100.00
5230 · Taxes - Payroll	0.00	0.00	0.00
5235 · Taxes - Real Estate	214.12	0.00	214.12
5240 · Taxes - Other	1,380.69	0.00	1,380.69
5260 · Travel	530.16	51.00	479.16
5265 · Uniform Expense	160.50	245.00	-84.50
66000 · Payroll Expenses	10,118.63	3,902.80	6,215.83
Total Expense	253,101.57	182,965.78	70,135.79
Net Ordinary Income	-35,555.56	163,826.35	-199,381.91
Other Income/Expense			
Other Income			
9610 · Interest	0.00	2.00	-2.00
9615 · Credit Card Rewards/Credits	250.00	0.00	250.00
9620 · Stale Checks	8,537.00	0.00	8,537.00
Total Other Income	8,787.00	2.00	8,785.00
Other Expense			
9705 · Interest Expense	0.00	0.27	-0.27
Total Other Expense	0.00	0.27	-0.27
Net Other Income	8,787.00	1.73	8,785.27
Net Income	-26,768.56	163,828.08	-190,596.64

The Outside Foundation
Trial Balance
As of December 31, 2023

	Dec 31, 23	
	Debit	Credit
1052 · Cash In Bank - Coastal	167,185.82	
1080 · Payroll Exchange	0.00	
1110 · Accounts Receivable - Sale	400.00	
1210 · Inventory - Logo Items Etc.	1,423.00	
1350 · Deposit at Community Foundation	0.00	
1530 · Equipment	19,165.32	
1580 · Accumulated Depreciation - Equi		11,772.69
1645 · AMEX Blue - 9-01002	0.00	
1650 · Gold Circuit Visa	0.00	
2080 · State Income Tax		592.83
2320 · Old outstanding checks	0.00	
24000 · Payroll Liabilities		3,207.78
3040 · Retained Fund Equity		35,541.32
32000 · Unrestricted Net Assets		163,828.08
4022 · Grants Received		54,939.81
4023 · Donations Recieved		55,559.33
4028 · Fund Raising Events		107,046.87
5010 · Advertising and Promotion	18,963.88	
5025 · Auto Expense	290.82	
5030 · Bank Service Charges	27.70	
5040 · Contract Labor	57,657.93	
5070 · Dues and Licenses	1,006.58	
5078 · Fundraising Expense	41,383.22	
5080 · Insurance - Liability	1,382.28	
5090 · Insurance - Health	5,961.98	
5107 · Meeting Expense	182.51	
5120 · Office Supplies	512.86	
5130 · Operating Supplies	8,928.50	
5140 · Professional Services	4,678.00	
5145 · Program Expenses	47,863.50	
5150 · Postage & Shipping	113.55	
5152 · Recycling Services	3,114.12	
5160 · Rent - Premises	1,630.00	
5200 · Salaries - Executive Director	47,000.04	
5235 · Taxes - Real Estate	214.12	
5240 · Taxes - Other	1,380.69	
5260 · Travel	530.16	
5265 · Uniform Expense	160.50	
66000 · Payroll Expenses	10,118.63	
9615 · Credit Card Rewards/Credits		250.00
9620 · Stale Checks		8,537.00
TOTAL	441,275.71	441,275.71

The Outside Foundation
Balance Sheet
As of December 31, 2022

	Dec 31, 22
ASSETS	
Current Assets	
Checking/Savings	
1052 · Cash In Bank - Coastal	192,419.50
Total Checking/Savings	192,419.50
Other Current Assets	
1110 · Accounts Receivable - Sale	400.00
1210 · Inventory - Logo Items Etc.	1,423.00
Total Other Current Assets	1,823.00
Total Current Assets	194,242.50
Fixed Assets	
1530 · Equipment	16,564.00
1580 · Accumulated Depreciation - Equi	-10,200.00
Total Fixed Assets	6,364.00
TOTAL ASSETS	200,606.50
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
2080 · State Income Tax	375.00
24000 · Payroll Liabilities	1,890.73
Total Other Current Liabilities	2,265.73
Total Current Liabilities	2,265.73
Total Liabilities	2,265.73
Equity	
3040 · Retained Fund Equity	32,940.00
Net Income	165,400.77
Total Equity	198,340.77
TOTAL LIABILITIES & EQUITY	200,606.50

The Outside Foundation
Profit & Loss
October through December 2022

	Oct - Dec 22	Jan - Dec 22
Ordinary Income/Expense		
Income		
4020 · Sales - Logo Items Etc.	0.00	75.00
4022 · Grants Received	141,158.91	175,378.59
4023 · Donations Recieved	27,423.38	82,600.95
4028 · Fund Raising Events	13,373.81	88,916.59
Total Income	181,956.10	346,971.13
Cost of Goods Sold		
4520 · Purchase - Logo Items Etc.	0.00	179.00
Total COGS	0.00	179.00
Gross Profit	181,956.10	346,792.13
Expense		
5010 · Advertising and Promotion	-833.94	24,507.95
5030 · Bank Service Charges	0.00	52.00
5040 · Contract Labor	10,381.58	31,008.24
5055 · Depreciation Expense	0.00	332.00
5060 · Donations	0.00	103.06
5070 · Dues and Licenses	0.00	366.00
5078 · Fundraising Expense	540.67	33,122.88
5080 · Insurance - Liability	25.88	1,023.88
5105 · Management Charges	0.00	0.00
5107 · Meeting Expense	39.24	414.10
5110 · Printing	75.92	129.92
5120 · Office Supplies	618.32	1,129.58
5140 · Professional Services	200.00	2,150.00
5145 · Program Expenses	8,960.86	26,752.14
5150 · Postage & Shipping	17.15	72.96
5152 · Recycling Services	630.36	3,374.48
5160 · Rent - Premises	504.39	1,638.39
5200 · Salaries - Executive Director	8,750.01	47,916.71
5205 · Salaries - Other	0.00	3,100.00
5230 · Taxes - Payroll	0.00	0.00
5260 · Travel	0.00	51.00
5265 · Uniform Expense	0.00	245.00
66000 · Payroll Expenses	669.37	3,902.80
Total Expense	30,579.81	181,393.09
Net Ordinary Income	151,376.29	165,399.04
Other Income/Expense		
Other Income		
9610 · Interest	0.00	2.00
Total Other Income	0.00	2.00
Other Expense		
9705 · Interest Expense	0.00	0.27
Total Other Expense	0.00	0.27
Net Other Income	0.00	1.73
Net Income	151,376.29	165,400.77

The Outside Foundation
Profit & Loss
January through December 2022

	Jan - Dec 22	Jan - Dec 22
Ordinary Income/Expense		
Income		
4020 · Sales - Logo Items Etc.	75.00	75.00
4022 · Grants Received	175,378.59	175,378.59
4023 · Donations Recieved	82,600.95	82,600.95
4028 · Fund Raising Events	88,916.59	88,916.59
Total Income	346,971.13	346,971.13
Cost of Goods Sold		
4520 · Purchase - Logo Items Etc.	179.00	179.00
Total COGS	179.00	179.00
Gross Profit	346,792.13	346,792.13
Expense		
5010 · Advertising and Promotion	24,507.95	24,507.95
5030 · Bank Service Charges	52.00	52.00
5040 · Contract Labor	31,008.24	31,008.24
5055 · Depreciation Expense	332.00	332.00
5060 · Donations	103.06	103.06
5070 · Dues and Licenses	366.00	366.00
5078 · Fundraising Expense	33,122.88	33,122.88
5080 · Insurance - Liability	1,023.88	1,023.88
5105 · Management Charges	0.00	0.00
5107 · Meeting Expense	414.10	414.10
5110 · Printing	129.92	129.92
5120 · Office Supplies	1,129.58	1,129.58
5140 · Professional Services	2,150.00	2,150.00
5145 · Program Expenses	26,752.14	26,752.14
5150 · Postage & Shipping	72.96	72.96
5152 · Recycling Services	3,374.48	3,374.48
5160 · Rent - Premises	1,638.39	1,638.39
5200 · Salaries - Executive Director	47,916.71	47,916.71
5205 · Salaries - Other	3,100.00	3,100.00
5230 · Taxes - Payroll	0.00	0.00
5260 · Travel	51.00	51.00
5265 · Uniform Expense	245.00	245.00
66000 · Payroll Expenses	3,902.80	3,902.80
Total Expense	181,393.09	181,393.09
Net Ordinary Income	165,399.04	165,399.04
Other Income/Expense		
Other Income		
9610 · Interest	2.00	2.00
Total Other Income	2.00	2.00
Other Expense		
9705 · Interest Expense	0.27	0.27
Total Other Expense	0.27	0.27
Net Other Income	1.73	1.73
Net Income	165,400.77	165,400.77

**Financial statements of
*The Outside Foundation***

For the period ending December 31, 2021

THE OUTSIDE FOUNDATION
 STMT OF ASSETS, LIABILITIES AND EQUITY-CASH BASIS
 DECEMBER 31, 2021

ASSETS

CURRENT ASSETS			
1052	CASH IN BANK-COASTAL STATES BANK	\$	26,249
1110	ACCOUNTS RECEIVABLE-SALE OF LOGO ITEMS		400
1210	INVENTORY-LOGO ITEMS ETC.		1,423
1350	DEPOSIT AT COMMUNITY FOUNDATION		53,862
			<hr/>
	TOTAL CURRENT ASSETS	\$	81,934
PROPERTY, PLANT AND EQUIPMENT			
1530	EQUIPMENT		16,564
1580	ACCUMULATED DEPRECIATION-EQUIPMENT		(9,868)
			<hr/>
	TOTAL PROPERTY, PLANT AND EQUIPMENT		6,696
			<hr/>
	TOTAL ASSETS	\$	88,630
			<hr/> <hr/>

LIABILITIES AND FUND EQUITY

CURRENT LIABILITIES			
2022	ADVANCE-SBA-PPP FUNDS	\$	7,300
2060	FICA TAX WITHHELD		798
2070	FEDERAL INCOME TAX WITHHELD		586
2080	STATE INCOME TAX WITHHELD		443
			<hr/>
	TOTAL CURRENT LIABILITIES	\$	9,127
FUND EQUITY			
3040	RETAINED FUND EQUITY (DEFICIT)		84,824
3050	CURRENT YEAR SURPLUS (DEFICIT)		(5,321)
			<hr/>
	TOTAL FUND EQUITY		79,502
			<hr/>
	TOTAL LIABILITIES AND FUND EQUITY	\$	88,630
			<hr/> <hr/>

NO ASSURANCE IS PROVIDED ON THESE FINANCIAL STATEMENTS

THE OUTSIDE FOUNDATION
STATEMENT OF REVENUE AND EXPENSES -CASH BASIS
FOR THE TWELVE MONTHS ENDED DECEMBER 31, 2021

	Current		Year To Date		
	Actual	Percent	Actual	Percent	
REVENUE					
4020	\$	91	0.2	\$ 1,246	1.0
4022		27,080	49.4	48,462	38.9
4023		15,919	29.1	24,980	20.1
4024				1,500	1.2
4028		11,695	21.3	48,302	38.8
* TOTAL REVENUE		54,784	100.0	124,491	100.0
COST OF SALES					
4520				2,143	1.7
4550				1,700	1.4
* TOTAL COST OF SALES		0	0.0	3,843	3.1
* GROSS PROFIT		54,784	100.0	120,648	96.9
OPERATING EXPENSES					
5010					
		8,163	14.9	24,799	19.9
5030		31	0.1	57	0.0
5040		5,270	9.6	17,830	14.3
5045		300	0.5	300	0.2
5050				9	0.0
5055		166	0.3	1,366	1.1
5060				1,104	0.9
5070				342	0.3
5077				418	0.3
5078		3,698	6.7	18,233	14.6
5080				510	0.4
5105		214	0.4	645	0.5
5107		98	0.2	217	0.2
5110		(116)	(0.2)	(116)	(0.1)
5120		73	0.1	361	0.3
5130				237	0.2
5140		375	0.7	1,850	1.5
5145		6,564	12.0	16,598	13.3
5150				73	0.1
5152		552	1.0	2,518	2.0
5160		238	0.4	1,201	1.0
5180		112	0.2	112	0.1
5200					
		7,917	14.5	26,667	21.4
5205		2,520	4.6	7,860	6.3
5210		102	0.2	102	0.1
5230		604	1.1	2,434	2.0
5240				52	0.0
5265				135	0.1
* TOTAL OPERATING EXPENSES		36,880	67.3	125,916	101.1

NO ASSURANCE IS PROVIDED ON THESE FINANCIAL STATEMENTS

THE OUTSIDE FOUNDATION
STATEMENT OF REVENUE AND EXPENSES -CASH BASIS
FOR THE TWELVE MONTHS ENDED DECEMBER 31, 2021

		Current		Year To Date	
		Actual	Percent	Actual	Percent
	* NET OPERATING INCOME (LOSS)	17,904	32.7	(5,268)	(4.2)
	OTHER INCOME				
9610	INTEREST	(5)	(0.0)	(36)	(0.0)
	* TOTAL OTHER INCOME	(5)	(0.0)	(36)	(0.0)
	OTHER EXPENSES				
9705	INTEREST EXPENSE			90	0.1
	* TOTAL OTHER EXPENSES	0	0.0	90	0.1
	* NET INCOME (LOSS)	17,909	32.7	(5,321)	(4.3)
	* NET INCOME (LOSS) AFTER INCOM \$	17,909	32.7	\$ (5,321)	(4.3)

NO ASSURANCE IS PROVIDED ON THESE FINANCIAL STATEMENTS

THE OUTSIDE FOUNDATION
STATEMENT OF REVENUE AND EXPENSES -CASH BASIS
FOR THE TWELVE MONTHS ENDED DECEMBER 31, 2021

	Current			Year To Date		
	Actual	Last Year	Ly-Var	Actual	Last Year	Ly-Var
REVENUE						
4020 SALES-LOGO ITEMS ETC.	\$ 91	\$ 71	\$ 20	\$ 1,246	\$ 1,152	\$ 94
4022 GRANTS RECEIVED	27,080	4,000	23,080	48,462	15,465	32,997
4023 DONATIONS RECEIVED	15,919	3,076	12,843	24,980	33,685	(8,704)
4024 SALE OF DONATED ITEM		850	(850)	1,500	850	650
4028 FUND RAISING EVENTS	11,695	1,265	10,430	48,302	50,817	(2,514)
4029 RECYCLING FEES RECEIVED					432	(432)
* TOTAL REVENUE	54,784	9,262	45,522	124,491	102,400	22,091
COST OF SALES						
4520 PURCHASES-LOGO ITEMS ETC				2,143		(2,143)
4550 PURCHASES - OTHER				1,700		(1,700)
* TOTAL COST OF SALES	0	0	0	3,843	0	(3,843)
* GROSS PROFIT	54,784	9,262	45,522	120,648	102,400	18,248
OPERATING EXPENSES						
5010 ADVERTISING AND PROMOTION	8,163	56	(8,106)	24,799	986	(23,813)
5030 BANK SERVICE CHARGES	31		(31)	57	25	(32)
5040 CONTRACT LABOR	5,270	3,550	(1,720)	17,830	10,362	(7,467)
5045 CHRISTMAS EXPENSE	300	300		300	300	
5050 CREDIT CARD DISCOUNT FEES				9		(9)
5055 DEPRECIATION EXPENSE	166	1,516	1,350	1,366	1,516	150
5060 DONATIONS				1,104	1,000	(104)
5070 DUES AND LICENSES		45	45	342	290	(52)
5077 EVENT EXPENSES				418	611	193
5078 FUNDRAISING EXPENSE	3,698		(3,698)	18,233	17,923	(310)
5080 INSURANCE-LIABILITY				510	1,003	493
5105 MANAGEMENT CHARGES	214	148	(66)	645	448	(198)
5107 MEETING EXPENSE	98	181	83	217	318	101
5110 PRINTING	(116)		116	(116)		116
5120 OFFICE SUPPLIES	73	304	231	361	521	160
5130 OPERATING SUPPLIES		50	50	237	101	(136)
5140 PROFESSIONAL SERVICES	375	375		1,850	1,750	(100)
5145 PROGRAM EXPENSES	6,564	4,006	(2,558)	16,598	5,166	(11,432)
5150 POSTAGE AND SHIPPING		33	33	73	78	4
5152 RECYCLING SERVICES	552	704	152	2,518	5,367	2,849
5160 RENT - PREMISES	238	291	53	1,201	291	(910)
5180 REPAIRS AND MAINTENANCE	112	10	(102)	112	10	(102)
5200 SALARIES-EXECUTIVE						
DIRECTOR	7,917	6,250	(1,667)	26,667	25,000	(1,667)
5205 SALARIES-OTHER	2,520	1,480	(1,040)	7,860	8,020	160
5210 SALES EXPENSE	102		(102)	102		(102)
5212 SCHOLARSHIP EXPENSE					200	200
5230 TAXES - PAYROLL	604	596	(8)	2,434	2,613	179
5240 TAXES - OTHER				52		(52)
5265 UNIFORM EXPENSE				135	218	83

NO ASSURANCE IS PROVIDED ON THESE FINANCIAL STATEMENTS

THE OUTSIDE FOUNDATION
STATEMENT OF REVENUE AND EXPENSES - CASH BASIS
FOR THE TWELVE MONTHS ENDED DECEMBER 31, 2021

	Current			Year To Date		
	Actual	Last Year	Ly-Var	Actual	Last Year	Ly-Var
* TOTAL OPERATING EXPENSES	36,880	19,896	(16,985)	125,916	84,117	(41,799)
* NET OPERATING INCOME (LOSS)	17,904	(10,633)	28,537	(5,268)	18,283	(23,551)
OTHER INCOME						
9610 INTEREST	(5)		5	(36)	(90)	(54)
* TOTAL OTHER INCOME	(5)	0	5	(36)	(90)	(54)
OTHER EXPENSES						
9705 INTEREST EXPENSE				90		(90)
* TOTAL OTHER EXPENSES	0	0	0	90	0	(90)
* NET INCOME (LOSS)	17,909	(10,633)	28,542	(5,321)	18,374	(23,695)
* NET INCOME (LOSS) AFTER INCOM \$	17,909	\$ (10,633)	\$ 28,542	\$ (5,321)	\$ 18,374	\$ (23,695)

NO ASSURANCE IS PROVIDED ON THESE FINANCIAL STATEMENTS

Carey & Company P.A.
70 Main Street, Suite 100
Hilton Head Island, SC 29926
843-681-4430

August 13, 2024

CONFIDENTIAL

The Outside Foundation
50 Shelter Cove Lane Suite H
Hilton Head Island, SC 29928

Dear Jean:

This letter is to confirm and specify the terms of our engagement with you and to clarify the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements.

We will prepare your federal and state exempt organization returns from information which you will furnish to us. Please verify the data you submit, although it may be necessary to ask you for clarification of some of the information.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, cancelled checks and other data that form the basis of these returns. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the tax returns and, therefore, you should review them carefully before you sign them.

Our work in connection with the preparation of your tax returns does not include any procedures designed to discover defalcations and/or other irregularities, should any exist. We will render such accounting and bookkeeping assistance as determined to be necessary for preparation of the tax returns.

The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or the circumstances of these penalties, please contact us.

Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

Our fee for these services will be based upon the amount of time required at standard billing rates plus out-of-pocket expenses. All invoices are due and payable upon presentation.

If the foregoing fairly sets forth your understanding, please sign the enclosed copy of this letter in the space indicated and return it to our office. However, if there are other tax returns you expect us to prepare, please inform us by noting so at the end of the return copy of this letter.

We want to express our appreciation for this opportunity to work with you.

Very truly yours,

Carey & Company P.A.

Accepted By: _____

Date: _____

Carey & Company P.A.
70 Main Street, Suite 100
Hilton Head Island, SC 29926
843-681-4430

August 13, 2024

CONFIDENTIAL

The Outside Foundation
50 Shelter Cove Lane Suite H
Hilton Head Island, SC 29928

Dear Jean:

We have prepared the enclosed returns from information provided by you, which was audited through a financial statement audit of the Foundation's financial records.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Carey & Company P.A.

Form 990	Two Year Comparison Report	2022 & 2023
For calendar year 2023, or tax year beginning _____, ending _____		

Name **The Outside Foundation** Taxpayer Identification Number **46-4305638**

		2022	2023	Differences
R e v e n u e	1. Contributions, gifts, grants	1. 257,980	110,499	-147,481
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3.		
	4. Program service revenue	4.		
	5. Investment income	5. 2		-2
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7.		
	8. Net income or (loss) from fundraising events	8. 55,794	65,664	9,870
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10. -104		104
	11. Other revenue	11.		8,787
	12. Total revenue. Add lines 1 through 11	12. 313,672	184,950	-128,722
E x p e n s e s	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15.		
	16. Salaries, other compensation, and employee benefits	16. 54,920	57,119	2,199
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 2,150	4,678	2,528
	19. Occupancy, rent, utilities, and maintenance	19. 1,638	1,630	-8
	20. Depreciation and Depletion	20. 1,905	1,286	-619
	21. Other expenses	21. 89,230	148,295	59,065
	22. Total expenses. Add lines 13 through 21	22. 149,843	213,008	63,165
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 163,829	-28,058	-191,887
O t h e r I n f o r m a t i o n	24. Total exempt revenue	24. 313,672	184,950	-128,722
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. -102	8,787	8,889
	27. Total assets	27. 201,637	175,114	-26,523
	28. Total liabilities	28. 2,266	3,801	1,535
	29. Retained earnings	29. 199,371	171,313	-28,058
	30. Number of voting members of governing body	30. 6	8	
31. Number of independent voting members of governing body	31. 6	8		
32. Number of employees	32. 2	1		
33. Number of volunteers	33.			

Form **990****Tax Return History****2023**

Name

The Outside Foundation

Employer Identification Number

46-4305638

	2019	2020	2021	2022	2023	2024
Contributions, gifts, grants				257,980	110,499	
Membership dues						
Program service revenue						
Capital gain or loss						
Investment income				2		
Fundraising revenue (income/loss)				55,794	65,664	
Gaming revenue (income/loss)						
Other revenue				-104	8,787	
Total revenue				313,672	184,950	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.						
Other compensation				54,920	57,119	
Professional fees				2,150	4,678	
Occupancy costs				1,638	1,630	
Depreciation and depletion				1,905	1,286	
Other expenses				89,230	148,295	
Total expenses				149,843	213,008	
Excess or (Deficit)				163,829	-28,058	
Total exempt revenue				313,672	184,950	
Total unrelated revenue						
Total excludable revenue				-102	8,787	
Total Assets				201,637	175,114	
Total Liabilities				2,266	3,801	
Net Fund Balances				199,371	171,313	

Filing Instructions

The Outside Foundation

Exempt Organization Tax Return

Taxable Year Ended December 31, 2023

Date Due: November 15, 2024

Remittance: None is required. Your Form 990 for the tax year ended 12/31/23 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-TE, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned to:

Carey & Company P.A.
70 Main Street, Suite 100
Hilton Head Island, SC 29926

***Important:* Your return will not be filed with the IRS until the signed Form 8879-TE has been received by this office.**

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2023, or fiscal year beginning 2023, and ending 20

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

2023

Department of the Treasury
Internal Revenue Service

Name of filer

The Outside Foundation

EIN or SSN

46-4305638

Name and title of officer or person subject to tax **Dr. Jean Fruh**
Executive Director

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	184,950
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize **Carey & Company P.A.** to enter my PIN **12345** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

57507855555

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature **Patrick P. Carey, Jr., CPA** Date _____

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

Form **990**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2023

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning , **and ending**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p style="text-align: center;">The Outside Foundation</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p style="text-align: center;">50 Shelter Cove Lane Suite H</p> City or town, state or province, country, and ZIP or foreign postal code <p style="text-align: center;">Hilton Head Island SC 29928</p>	D Employer identification number <p style="text-align: center;">46-4305638</p> E Telephone number <p style="text-align: center;">843-686-6996</p> G Gross receipts \$ 226,333
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F Name and address of principal officer: <p style="text-align: center;">Dr. Jean Fruh 50 Shelter Cove Lane Hilton Head Island SC 29928</p>	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
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I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: www.outsidefoundation.org	H(c) Group exemption number	L Year of formation: 2014	M State of legal domicile: SC
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other				

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <p style="text-align: center;">Public Education</p>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	8
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	1
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	257,980	110,499
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2	0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	55,690	74,451
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	313,672	184,950
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	
14 Benefits paid to or for members (Part IX, column (A), line 4)			0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		54,920	57,119
16a Professional fundraising fees (Part IX, column (A), line 11e)			0
b Total fundraising expenses (Part IX, column (D), line 25)		0	
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		94,923	155,889
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	149,843	213,008	
19 Revenue less expenses. Subtract line 18 from line 12	163,829	-28,058	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	201,637	175,114
	22 Net assets or fund balances. Subtract line 21 from line 20	2,266	3,801
		199,371	171,313

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer <p style="text-align: center;">Dr. Jean Fruh</p> Type or print name and title	Date <p style="text-align: center;">Executive Director</p>
------------------	--	--

Paid Preparer Use Only	Print/Type preparer's name <p>Patrick P. Carey, Jr., CPA</p>	Preparer's signature <p>Patrick P. Carey, Jr., CPA</p>	Date	Check <input type="checkbox"/> if self-employed	PTIN <p>P00033247</p>
	Firm's name <p style="text-align: center;">Carey & Company P.A.</p>	Firm's EIN <p style="text-align: center;">57-0927046</p>		Firm's address <p style="text-align: center;">70 Main Street, Suite 100 Hilton Head Island, SC 29926</p>	
				Phone no. <p style="text-align: center;">843-681-4430</p>	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III 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:

Public Education

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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 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 \$ **47,864** including grants of \$) (Revenue \$)

Education

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses \$ **140,330** including grants of \$) (Revenue \$)

4e Total program service expenses **188,194**

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions		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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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? If "Yes," complete Schedule D, Part IV		X
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		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.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		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?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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		X

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X

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	1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a				X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		X		
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
a	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:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
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.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15				X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16				X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17				

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
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.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	b Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?		X
14	Did the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official		X
15b	b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	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

17 List the states with which a copy of this Form 990 is required to be filed None

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.

Dr. Jean Fruh **32 Shelter Cove Lane** **SC 29928** **843-686-6996**
Hilton Head Island

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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Dr. Jean Fruh	30.00									
..... Executive Director	0.00	X		X				47,000	0	0
(2) Ron Miele	3.00									
..... Chairperson	0.00	X		X				0	0	0
(3) Michael Overton	1.00									
..... Vice Chairperson	0.00	X		X				0	0	0
(4) Brian Kinard	2.00									
..... Treasurer	0.00	X		X				0	0	0
(5) Dr. John Batson	1.00									
..... Board Member	0.00	X						0	0	0
(6) Melissa Krauss	1.00									
..... Board Member	0.00	X						0	0	0
(7) Michael Cerrati	1.00									
..... Board Member	0.00	X						0	0	0
(8) John Taylor	1.00									
..... Board Member	0.00	X						0	0	0
(9) Jake Gartner	1.00									
..... Board Member	0.00	X						0	0	0
(10) Ted K. Neely II	1.00									
..... Board Member	0.00	X						0	0	0
(11)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal							47,000			
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							47,000			

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	110,499				
	g Noncash contributions included in lines 1a-1f	1g	\$ 26,518				
	h Total. Add lines 1a-1f		110,499				
	Program Service Revenue	2a	Business Code				
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a		107,047				
		b Less: direct expenses	8b	41,383			
		c Net income or (loss) from fundraising events		65,664			
9a Gross income from gaming activities. See Part IV, line 19	9a						
		b Less: direct expenses	9b				
		c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	10a						
		b Less: cost of goods sold	10b				
		c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11a Stale Checks	Business Code	8,537	8,537			
	b Credit Card Rewards/Credits		250	250			
	c						
	d All other revenue						
	e Total. Add lines 11a-11d		8,787				
12 Total revenue. See instructions		184,950	8,787	0	0		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	47,000	47,000		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	10,119		10,119	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	4,678		4,678	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	18,964	18,964		
13 Office expenses	627	114	513	
14 Information technology				
15 Royalties				
16 Occupancy	1,630		1,630	
17 Travel	530		530	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,286	1,286		
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Contract Labor	57,658	57,658		
b Program Expenses	47,864	47,864		
c Operating Supplies	8,929	8,929		
d Insurance	7,344		7,344	
e All other expenses	6,379	6,379		
25 Total functional expenses. Add lines 1 through 24e	213,008	188,194	24,814	0
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	192,421	1	167,184
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	400	4	400
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	19,165		
	10b	Less: accumulated depreciation	13,058	10c	6,107
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,423	15	1,423
16	Total assets. Add lines 1 through 15 (must equal line 33)	201,637	16	175,114	
Liabilities	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. Complete Part IV of Schedule D		21	
	22	Loans and other 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		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,266	25	3,801
	26	Total liabilities. Add lines 17 through 25	2,266	26	3,801
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	199,371	27	171,313
	28	Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	199,371	32	171,313
33	Total liabilities and net assets/fund balances	201,637	33	175,114	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	184,950
2	Total expenses (must equal Part IX, column (A), line 25)	2	213,008
3	Revenue less expenses. Subtract line 2 from line 1	3	-28,058
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	199,371
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	171,313

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

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

2023

Open to Public Inspection

Name of the organization

The Outside Foundation

Employer identification number

46-4305638

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

Section A. Public Support

Calendar 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.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	%

16a 33 1/3% support test — 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test — 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test — 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test — 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

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

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.)

Section A. Public Support

Calendar 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.")	89,427	102,310	124,491	257,980	110,499	684,707
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose			55,602	88,994	115,834	260,430
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization'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	89,427	102,310	180,093	346,974	226,333	945,137
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						945,137

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6	89,427	102,310	180,093	346,974	226,333	945,137
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	313	90		2		405
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	313	90		2		405
11 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.)	89,740	102,400	180,093	346,976	226,333	945,542
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	99.96 %
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	99.92 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests — 2023.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support tests — 2022.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 on 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
2		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>	Yes	No
2a		
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
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	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
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	

Section 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-functionally integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4 Amounts paid to acquire exempt-use assets	4
5 Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6 Other distributions (describe in Part VI). See instructions.	6
7 Total annual distributions. Add lines 1 through 6.	7
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9 Distributable amount for 2022 from Section C, line 6	9
10 Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e 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)			
j 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			
b Applied to 2023 distributable amount			
c 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:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

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

2023

Open to Public Inspection

Name of the organization

The Outside Foundation

Employer identification number

46-4305638

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
 - a Public exhibition
 - d Loan or exchange program
 - b Scholarly research
 - e Other
 - c Preservation for future generations
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
 - b If "Yes," explain the arrangement in Part XIII and complete the following table.
- | | Amount |
|---------------------------------------|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
 - b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
 - a Board designated or quasi-endowment
 - b Permanent endowment
 - c Term endowment

The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations?	3a(i)	
(ii) Related organizations?	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		19,165	13,058	6,107
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				6,107

Part VII Investments – Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments – Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Payroll Liabilities	3,208
(3) State Income Tax	593
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	3,801

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

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

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**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

46-4305638

The Outside Foundation

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** Mail solicitations
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

.....
.....
.....
.....
.....

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		Fundraising (event type)	(event type)	None (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	107,047			107,047
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	107,047			107,047
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	41,383			41,383
	10 Direct expense summary. Add lines 4 through 9 in column (d)				41,383
11 Net income summary. Subtract line 10 from line 3, column (d)				65,664	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: Yes No

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain:

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:
a The organization's facility 13a %
b An outside facility 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:
Name
Address

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c If "Yes," enter name and address of the third party:
Name
Address

16 Gaming manager information:
Name
Gaming manager compensation \$
Description of services provided
 Director/officer Employee Independent contractor

17 Mandatory distributions:
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Multiple horizontal dotted lines for providing supplemental information.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2023

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

Attach to Form 990.

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

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

The Outside Foundation

Employer identification number

46-4305638

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded				
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (Outside Brands)	X	1	26,518	Page Island Oyster Roast
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

The Outside Foundation

Employer identification number

46-4305638

Form 990, Part III, Line 4d - All Other Accomplishments

Other

Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents

The organization made changes to their bylaws in 2024.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

The Board elects Board members.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

A draft of form 990 is circulated to the Financial Committee for review and comments prior to approval by the full Board of Directors.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The Governance Committee regularly and consistently monitors and enforces compliance with the policy.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

No documents available to the public

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

Prior year fixed assets adjustment \$ 0

Form **4562**

Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Depreciation and Amortization
(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2023

Attachment Sequence No. **179**

The Outside Foundation

Identifying number
46-4305638

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,160,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,890,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,286

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2023	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	1,286
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

DAA

Form 990	Event Income and Deduction Worksheet	2023
	Description Fundraising	

Name The Outside Foundation	Taxpayer Identification Number 46-4305638
---------------------------------------	---

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	107,047
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	
7. Total revenue. Add lines 1 through 6	7.	107,047
8. Cost of Goods Sold	8.	41,383
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	
15. Total expenses. Add lines 8 through 14	15.	41,383
16. Net Income/Loss. Line 7 minus Line 15	16.	65,664

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	41,383
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	41,383

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Information is indicated for use on Form 990-T, Schedule A:

Schedule A, UBIT Activity Code		Seq #	
<input type="checkbox"/>	Part V, Debt Financing		
<input type="checkbox"/>	Part VI, Controlled Org Income		
<input type="checkbox"/>	Part VII, Investments for C(7)(9)(17)		
<input type="checkbox"/>	Part VIII, Exploited Activities		
<input type="checkbox"/>	Part IX, Advertising Income		

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Federal Statements**Form 990, Part IX, Line 24e - All Other Expenses**

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
Recycling Services	\$ 3,114	\$ 3,114	\$	\$
Taxes - Other	1,381	1,381		
Dues & Licenses	1,007	1,007		
Auto expense	291	291		
Taxes - Real Estate	214	214		
Meeting Expense	183	183		
Uniform	161	161		
Bank Service Charge	28	28		
Total	<u>\$ 6,379</u>	<u>\$ 6,379</u>	<u>\$ 0</u>	<u>\$ 0</u>

Federal Statements

Schedule A, Part III, Line 1(e)

<u>Description</u>	<u>Amount</u>
Grants Received	\$ 54,940
Donations Received	29,041
Donations Received	26,518
Total	<u>\$ 110,499</u>

Schedule A, Part III, Line 2(e)

<u>Description</u>	<u>Amount</u>
Credit Card Rewards/Credits	\$ 250
Stale Checks	8,537
Fundraising	107,047
Total	<u>\$ 115,834</u>

Form **990**

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2023

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning _____, **and ending** _____

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Final return/terminated
 - Amended return
 - Application pending

C Name of organization
The Outside Foundation

Doing business as _____

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
50 Shelter Cove Lane Suite H

City or town, state or province, country, and ZIP or foreign postal code
Hilton Head Island SC 29928

D Employer identification number
46-4305638

E Telephone number
843-686-6996

G Gross receipts \$ **226,333**

F Name and address of principal officer:
Dr. Jean Fruh
50 Shelter Cove Lane
Hilton Head Island SC 29928

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. See instructions

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **www.outsidefoundation.org**

H(c) Group exemption number _____

K Form of organization: Corporation Trust Association Other

L Year of formation: **2014** **M** State of legal domicile: **SC**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: Public Education		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	8
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	1
	6 Total number of volunteers (estimate if necessary)	6	0
Revenue	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0
	8 Contributions and grants (Part VIII, line 1h)	Prior Year 257,980	Current Year 110,499
	9 Program service revenue (Part VIII, line 2g)		0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2	0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	55,690	74,451
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	313,672	184,950	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	54,920	57,119
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25)	0	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	94,923	155,889
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	149,843	213,008	
19 Revenue less expenses. Subtract line 18 from line 12	163,829	-28,058	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 201,637	End of Year 175,114
	21 Total liabilities (Part X, line 26)	2,266	3,801
	22 Net assets or fund balances. Subtract line 21 from line 20	199,371	171,313

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Dr. Jean Fruh Type or print name and title		Date _____	
	Executive Director			
Paid Preparer Use Only	Print/Type preparer's name Patrick P. Carey, Jr., CPA	Preparer's signature Patrick P. Carey, Jr., CPA	Date _____	Check <input type="checkbox"/> if self-employed PTIN P00033247
	Firm's name Carey & Company P.A.	Firm's EIN 57-0927046		
	Firm's address 70 Main Street, Suite 100 Hilton Head Island, SC 29926	Phone no. 843-681-4430		

May the IRS discuss this return with the preparer shown above? See instructions Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III 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:

Public Education

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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 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 \$ **47,864** including grants of \$) (Revenue \$)

Education

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses \$ **140,330** including grants of \$) (Revenue \$)

4e Total program service expenses **188,194**

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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X

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	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	X		
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	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:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
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.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17			

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
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.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		<input checked="" type="checkbox"/>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<input checked="" type="checkbox"/>	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?		<input checked="" type="checkbox"/>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<input checked="" type="checkbox"/>	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<input checked="" type="checkbox"/>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	<input checked="" type="checkbox"/>	
8b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.		<input checked="" type="checkbox"/>

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		<input checked="" type="checkbox"/>
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
11b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<input checked="" type="checkbox"/>	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	<input checked="" type="checkbox"/>	
13	Did the organization have a written whistleblower policy?		<input checked="" type="checkbox"/>
14	Did the organization have a written document retention and destruction policy?		<input checked="" type="checkbox"/>
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official		<input checked="" type="checkbox"/>
15b	Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		<input checked="" type="checkbox"/>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<input checked="" type="checkbox"/>
16b	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

- 17 List the states with which a copy of this Form 990 is required to be filed **None**
- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records.

Dr. Jean Fruh 32 Shelter Cove Lane SC 29928 843-686-6996
Hilton Head Island

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 instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Dr. Jean Fruh Executive Director	30.00 0.00	X		X				47,000	0	0
(2) Ron Miele Chairperson	3.00 0.00	X		X				0	0	0
(3) Michael Overton Vice Chairperson	1.00 0.00	X		X				0	0	0
(4) Brian Kinard Treasurer	2.00 0.00	X		X				0	0	0
(5) Dr. John Batson Board Member	1.00 0.00	X						0	0	0
(6) Melissa Krauss Board Member	1.00 0.00	X						0	0	0
(7) Michael Cerrati Board Member	1.00 0.00	X						0	0	0
(8) John Taylor Board Member	1.00 0.00	X						0	0	0
(9) Jake Gartner Board Member	1.00 0.00	X						0	0	0
(10) Ted K. Neely II Board Member	1.00 0.00	X						0	0	0
(11)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal							47,000			
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							47,000			

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	110,499				
	g Noncash contributions included in lines 1a-1f	1g	\$ 26,518				
	h Total. Add lines 1a-1f		110,499				
	Program Service Revenue	Business Code					
2a							
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		6a					
		b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		7a					
		b Less: cost or other basis and sales exps.	7b				
		c Gain or (loss)	7c				
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a	107,047				
		b Less: direct expenses	8b	41,383			
c Net income or (loss) from fundraising events			65,664				
9a Gross income from gaming activities. See Part IV, line 19	9a						
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	10a						
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code						
	11a Stale Checks		8,537	8,537			
	b Credit Card Rewards/Credits		250	250			
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			8,787			
12 Total revenue. See instructions			184,950	8,787	0	0	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	47,000	47,000		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	10,119		10,119	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	4,678		4,678	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	18,964	18,964		
13 Office expenses	627	114	513	
14 Information technology				
15 Royalties				
16 Occupancy	1,630		1,630	
17 Travel	530		530	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,286	1,286		
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Contract Labor	57,658	57,658		
b Program Expenses	47,864	47,864		
c Operating Supplies	8,929	8,929		
d Insurance	7,344		7,344	
e All other expenses	6,379	6,379		
25 Total functional expenses. Add lines 1 through 24e	213,008	188,194	24,814	0
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year		
Assets	1	Cash—non-interest-bearing	192,421	1	167,184	
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net	400	4	400	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	19,165		
	b	Less: accumulated depreciation	10b	13,058	10c	6,107
	11	Investments—publicly traded securities		11		
	12	Investments—other securities. See Part IV, line 11		12		
	13	Investments—program-related. See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	1,423	15	1,423	
16	Total assets. Add lines 1 through 15 (must equal line 33)	201,637	16	175,114		
Liabilities	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. Complete Part IV of Schedule D		21		
	22	Loans and other 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		22		
	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable to unrelated third parties		24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,266	25	3,801	
	26	Total liabilities. Add lines 17 through 25	2,266	26	3,801	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions	199,371	27	171,313	
	28	Net assets with donor restrictions		28		
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds		29		
	30	Paid-in or capital surplus, or land, building, or equipment fund		30		
	31	Retained earnings, endowment, accumulated income, or other funds		31		
32	Total net assets or fund balances	199,371	32	171,313		
33	Total liabilities and net assets/fund balances	201,637	33	175,114		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	184,950
2	Total expenses (must equal Part IX, column (A), line 25)	2	213,008
3	Revenue less expenses. Subtract line 2 from line 1	3	-28,058
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	199,371
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	171,313

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form **990**

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.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2022 calendar year, or tax year beginning , and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p style="text-align: center;">The Outside Foundation</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p style="text-align: center;">50 Shelter Cove Lane Suite H</p> City or town, state or province, country, and ZIP or foreign postal code <p style="text-align: center;">Hilton Head Island SC 29928</p>	D Employer identification number <p style="text-align: center;">46-4305638</p> E Telephone number <p style="text-align: center;">843-686-6996</p> G Gross receipts \$ 346,974
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F Name and address of principal officer: <p style="text-align: center;">Jean Fruh 50 Shelter Cove Lane Hilton Head Island SC 29928</p>	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
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I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: www.outsidefoundation.org	L Year of formation: 2014	M State of legal domicile: SC
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		H(c) Group exemption number	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <p style="text-align: center;">Public Education</p>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	9
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	9
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	2
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	73,442	257,980
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	37,972	55,690
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	111,414	313,672
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	
14 Benefits paid to or for members (Part IX, column (A), line 4)			0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		36,961	54,920
16a Professional fundraising fees (Part IX, column (A), line 11e)			0
b Total fundraising expenses (Part IX, column (D), line 25)		0	
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		71,866	94,923
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	108,827	149,843	
19 Revenue less expenses. Subtract line 18 from line 12	2,587	163,829	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	34,768	201,637
	22 Net assets or fund balances. Subtract line 21 from line 20	1,827	2,266
		32,941	199,371

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer <p style="text-align: center;">Jean Fruh</p> Type or print name and title <p style="text-align: center;">Executive Director</p>	Date
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Paid Preparer Use Only	Print/Type preparer's name Patrick P. Carey, Jr., CPA	Preparer's signature Patrick P. Carey, Jr., CPA	Date	Check <input type="checkbox"/> if self-employed	PTIN P00033247
	Firm's name Carey & Company P.A.	Firm's EIN 57-0927046			
	Firm's address 70 Main Street, Suite 100 Hilton Head Island, SC 29926	Phone no. 843-681-4430			

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III 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:

Public Education

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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 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 \$ **26,752** including grants of \$) (Revenue \$)

Education

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses \$ **104,766** including grants of \$) (Revenue \$)

4e Total program service expenses **131,518**

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions		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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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? If "Yes," complete Schedule D, Part IV		X
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		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.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		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?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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		X

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X

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	2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b				X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a				X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a				X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a				X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
a	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:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
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.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15				X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16				X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17				

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
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.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
11b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		X
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done		
13	Did the organization have a written whistleblower policy?		X
14	Did the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official		X
15b	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	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

- 17** List the states with which a copy of this Form 990 is required to be filed **None**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records

Foundation **32 Shelter Cove Lane** **SC 29928 843-686-6996**
Hilton Head Island

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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Jean Fruh	30.00									
..... Executive Director	0.00	X		X			47,917	0	0	
(2) Denise Spencer	3.00									
..... Chairperson	0.00	X		X			0	0	0	
(3) Michael Overton	1.00									
..... Vice Chairperson	0.00	X		X			0	0	0	
(4) Brian Kinard	2.00									
..... Treasurer	0.00	X		X			0	0	0	
(5) Dr. John Batson	1.00									
..... Board Member	0.00	X					0	0	0	
(6) Melissa Krauss	1.00									
..... Board Member	0.00	X					0	0	0	
(7) Michael Cerrati	1.00									
..... Board Member	0.00	X					0	0	0	
(8) John Taylor	1.00									
..... Board Member	0.00	X					0	0	0	
(9) Ron Miele	2.00									
..... Board Member	0.00	X					0	0	0	
(10)										
(11)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal							47,917			
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							47,917			

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	257,980				
	g Noncash contributions included in lines 1a-1f	1g \$					
	h Total. Add lines 1a-1f		257,980				
	Program Service Revenue	2a	Business Code				
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2	2			
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents		(i) Real				
			(ii) Personal				
		6a					
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory		(i) Securities				
			(ii) Other				
		7a					
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18							
	8a		88,917				
	b Less: direct expenses	8b	33,123				
c Net income or (loss) from fundraising events			55,794				
9a Gross income from gaming activities. See Part IV, line 19							
	9a						
	b Less: direct expenses	9b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances							
	10a		75				
	b Less: cost of goods sold	10b	179				
c Net income or (loss) from sales of inventory			-104	-104			
Miscellaneous Revenue	11a	Business Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			313,672	-102	0	0	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	51,017	51,017		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	3,903		3,903	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	2,150		2,150	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	24,508	17,156	7,352	
13 Office expenses	1,333	203	1,130	
14 Information technology				
15 Royalties				
16 Occupancy	1,638		1,638	
17 Travel	51		51	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,905	1,905		
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Contract Labor	31,008	31,008		
b Supplies	26,752	26,752		
c Recycling Services	3,374	3,374		
d Insurance	1,024		1,024	
e All other expenses	1,180	103	1,077	
25 Total functional expenses. Add lines 1 through 24e	149,843	131,518	18,325	0
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	26,249	1	192,421
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	400	4	400
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	19,165		
	10b	Less: accumulated depreciation	11,772	10c	7,393
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,423	15	1,423
16	Total assets. Add lines 1 through 15 (must equal line 33)	34,768	16	201,637	
Liabilities	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. Complete Part IV of Schedule D		21	
	22	Loans and other 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		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	1,827	25	2,266
	26	Total liabilities. Add lines 17 through 25	1,827	26	2,266
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	32,941	27	199,371
	28	Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	32,941	32	199,371
33	Total liabilities and net assets/fund balances	34,768	33	201,637	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	313,672
2	Total expenses (must equal Part IX, column (A), line 25)	2	149,843
3	Revenue less expenses. Subtract line 2 from line 1	3	163,829
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	32,941
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	2,601
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	199,371

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

**HUBERT L. BERNHEIM, CPA
POST OFFICE DRAWER NINE
HILTON HEAD ISLAND, SC 29938
(843) 671-6005
OLDRENBERT5135@AOL.COM**

June 22, 2022

THE OUTSIDE FOUNDATION
50 SHELTER COVE LANE, H
HILTON HEAD ISLAND, SC 29928

Statement of Charges for Services Rendered:

Tax Preparation Fees:

TAX RETURN PREPARATION FEE-2021	\$	850.00
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Miscellaneous Fees and Adjustments:

LESS: CHARITABLE ORGANIZATION DISCOUNT		-425.00
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Total fee	\$	425.00
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Return of Organization Exempt From Income Tax

2021

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

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

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2021 calendar year, or tax year beginning , 2021, and ending , 20

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE OUTSIDE FOUNDATION		D Employer identification number 46-4305638
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number 8436866996
	50 SHELTER COVE LANE		H
	City or town, state or province, country, and ZIP or foreign postal code HILTON HEAD ISLAND, SC 29928		F Group Exemption Number ▶

G Accounting Method: Cash Accrual Other (specify) ▶ _____

H Check if the organization is not required to attach Schedule B (Form 990).

I Website: ▶ WWW.OUTSIDEFOUNDATION.ORG

J Tax-exempt status (check only one) – 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other _____

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 131,790.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	73,442.
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events:		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	48,302.
c Less: direct expenses from gaming and fundraising events	6c	18,233.	
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	30,069.	
7a Gross sales of inventory, less returns and allowances	7a	2,746.	
b Less: cost of goods sold	7b	2,143.	
c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c	603.	
8 Other revenue (describe in Schedule O) See Line 8 Stmt.	8	7,300.	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶	9	111,414.	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	
	11 Benefits paid to or for members	11	0.
	12 Salaries, other compensation, and employee benefits	12	36,961.
	13 Professional fees and other payments to independent contractors	13	1,850.
	14 Occupancy, rent, utilities, and maintenance	14	1,201.
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe in Schedule O) See Line 16 Stmt.	16	68,815.
17 Total expenses. Add lines 10 through 16 ▶	17	108,827.	
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 9)	18	2,587.
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	84,824.
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	-54,470.
	21 Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	32,941.

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	84,014.	22 26,249.
23 Land and buildings	8,062.	23 6,696.
24 Other assets (describe in Schedule O)	3,523.	24 1,823.
25 Total assets	95,599.	25 34,768.
26 Total liabilities (describe in Schedule O)	10,775.	26 1,827.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	84,824.	27 32,941.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? PUBLIC EDUCATION

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28 EDUCATION (Grants \$ 0.) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	19,116.
29 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)	32	19,116.

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
JEAN FRUH EXECUTIVE DIRECTOR-SECRETARY	20.00	26,667.	0.	0.
DENISE SPENCER CHAIRPERSON	1.00	0.	0.	0.
MICHAEL OVERTON VICE CHAIRPERSON	1.00	0.	0.	0.
MELISSA KRAUSS DIRECTOR	1.00	0.	0.	0.
BRIAN KINARD TREASURER	1.00	0.	0.	0.
DR. JOHN BATSON BOARD MEMBER	1.00	0.	0.	0.
MICHAEL CERRATI BOARD MEMBER	1.00	0.	0.	0.
.....				
.....				
.....				
.....				

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
35b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II, and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed
42a The organization's books are in care of FOUNDATION Telephone no. (843) 686-6996 Located at 32 SHELTER COVE LANE, HILTON HEAD ISLAND SC ZIP + 4 29928
42b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).
42c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	X

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 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	47	X
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	X
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	X
b If "Yes," was the related organization a section 527 organization?	49b	
50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ▶ **Yes** **No**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ Signature of officer	05/25/2022
	JEAN FRUH, EXECUTIVE DIRECTOR	Date
	▶ Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name HUBERT L BERNHEIM	Preparer's signature	Date 05/25/2022	Check <input checked="" type="checkbox"/> if self-employed	PTIN P01284405
	Firm's name ▶ HUBERT L. BERNHEIM, CPA			Firm's EIN ▶ 36-2750133	
	Firm's address ▶ POST OFFICE DRAWER NINE, HILTON HEAD ISLAND, SC 29938			Phone no. (843) 671-6005	

May the IRS discuss this return with the preparer shown above? See instructions ▶ **Yes** **No**

Additional information from your Form 990-EZ: Short Form Return of Organization Exempt from Income Tax**Form 990-EZ: Short Form Return of Organization Exempt from Income Tax****Line 8: Other Revenue****Continuation Statement**

Description	Amount
WAIVER OF PPP GRANT	7,300.
Total	7,300.

Form 990-EZ: Short Form Return of Organization Exempt from Income Tax**Line 16: Other Expenses****Continuation Statement**

Description	Amount
BANK CHARGES	67.
DUES AND LICENSES	394.
INSURANCE-LIABILITY	510.
MEETING EXPENSE	217.
OFFICE SUPPLIES	361.
OPERATING SUPPLIES	237.
POSTAGE AND SHIPPING	73.
RECYCLING SERVICE EXPENSE	2,518.
PROGRAM SERVICE EXPENSE	16,598.
CHRISTMAS EXPENSE	300.
REPAIRS AND MAINTENANCE	112.
PUBLIC EDUCATION EXPENSE	46,062.
Depreciation	1,366.
Total	68,815.

**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

2021

**Open to Public
Inspection**

Name of the organization THE OUTSIDE FOUNDATION	Employer identification number 46-4305638
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
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		<input type="checkbox"/>

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	69,810.	104,451.	89,427.	102,310.	124,491.	490,489.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization'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	69,810.	104,451.	89,427.	102,310.	124,491.	490,489.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						490,489.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6	69,810.	104,451.	89,427.	102,310.	124,491.	490,489.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		217.	313.	90.		620.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b		217.	313.	90.		620.
11 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.)	69,810.	104,668.	89,740.	102,400.	124,491.	491,109.
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	99.87 %
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	99.85 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	0.13 %
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	0.15 %

19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
3b	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
4c	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)? <i>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.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
5b	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?		
5c	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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
9b	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? <i>If "Yes," provide detail in Part VI.</i>		
9c	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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
10b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
	11a		
b	A family member of a person described on line 11a above?		
	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
	11c		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
	2		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2	Activities Test. Answer lines 2a and 2b below.		
		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .		
	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
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	
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	
Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D—Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

Part VI

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

Ruled area with horizontal dashed lines for supplemental information.

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

2021

Open to Public Inspection

Name of the organization

THE OUTSIDE FOUNDATION

Employer identification number

46-4305638

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1 PAGE ISLAND (event type)	(b) Event #2 PADDLE BATTLE (event type)	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts		44,370.		44,370.
	2 Less: Contributions		14,953.		14,953.
	3 Gross income (line 1 minus line 2)		29,417.		29,417.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				29,417.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ►

Address ►

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$
- c If "Yes," enter name and address of the third party:

Name ►

Address ►

16 Gaming manager information:

Name ►

Gaming manager compensation ► \$

Description of services provided ►

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

THE OUTSIDE FOUNDATION

Employer identification number

46-4305638

Pt I, Line 8:

Description: WAIVER OF PPP GRANT \$7,300

Pt I, Line 16:

Description: BANK CHARGES \$67

Description: DUES AND LICENSES \$394

Description: INSURANCE-LIABILITY \$510

Description: MEETING EXPENSE \$217

Description: OFFICE SUPPLIES \$361

Description: OPERATING SUPPLIES \$237

Description: POSTAGE AND SHIPPING \$73

Description: RECYCLING SERVICE EXPENSE \$2,518

Description: PROGRAM SERVICE EXPENSE \$16,598

Description: CHRISTMAS EXPENSE \$300

Description: REPAIRS AND MAINTENANCE \$112

Description: PUBLIC EDUCATION EXPENSE \$46,062

Description: Depreciation \$1,366

Pt I, Line 20:

Description: TRANSFER OF INVESTMENT FUND TO COMMUNITY FOUNDATION -\$54,470

Pt II, Line 24:

Description: INVENTORY Beginning of Year: \$3,523 End of Year: \$1,823

Pt II, Line 26:

Description: PAYROLL TAXES WITHHELD Beginning of Year: \$1,280 End of Year: \$1,827

Description: CREDIT CARD PAYABLE Beginning of Year: \$2,195 End of Year: \$0

Description: ADVANCE FROM SBA OF PPP FUNDS Beginning of Year: \$7,300 End of Year: \$0

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2021, or fiscal year beginning _____, 2021, and ending _____, 20_____

2021

Department of the Treasury
Internal Revenue Service

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer THE OUTSIDE FOUNDATION	EIN or SSN 46-4305638
Name and title of officer or person subject to tax JEAN FRUH, EXECUTIVE DIRECTOR	

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here . . . <input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . .	1b _____
2a Form 990-EZ check here . . . <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b <u>111,414.</u>
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here . . . <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5) . . .	4b _____
5a Form 8868 check here . . . <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here . . . <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b _____
7a Form 4720 check here . . . <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____
8a Form 5227 check here . . . <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here . . . <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize _____ to enter my PIN _____ as my signature

ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax Date 05/25/2022

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

5	7	0	4	1	2	5	1	3	5	5
---	---	---	---	---	---	---	---	---	---	---

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature Date 05/25/2022

ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: OCT 02 2014

THE OUTSIDE FOUNDATION
C/O MICHAEL P OVERTON
32 SHELTER COVE LN STE H
HILTON HEAD ISLAND, SC 29928

Employer Identification Number:
46-4305638
DLN:
17053210306044
Contact Person:
KAREN A BATEY ID# 31641
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
~~Form 990 Required:~~
Yes
Effective Date of Exemption:
October 31, 2013
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,



Director, Exempt Organizations