Return of Organization Exempt From Income Tax

OMB No. 1545-0047

23

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

Department of the Treasury Internal Revenue Service 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.

Open to Public Inspection

A	For the	2023 calen	lar year, or tax year beginning 01/01/2023 and ending	12/31/	2023	
в	Check if	applicable:	C Name of organization JAFARI NO-INTEREST CREDIT UNION		D Emplo	oyer identification number
	Address	change	Doing business as		81-1523850	
	Name ch	nange	Number and street (or P.O. box if mail is not delivered to street address) Roo	E Teleph	none number	
	Initial ret	urn	2323 S Voss Rd Suite 370		713-331-1072	
	Final retu	rn/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amende	d return	G Gross	receipts \$ 83,997		
	Applicati	ion pending	F Name and address of principal officer: Imran Dhanji	H(a) Is this a gr	- oup return fo	or subordinates? 🗌 Yes 🗹 No
			2323 S Voss Rd STE 370, Houston, TX 77057	H(b) Are all s	ubordinate	es included? 🗌 Yes 🗌 No
I	Tax-exer	mpt status:	501(c)(3) 🖌 501(c) (14) (insert no.) 🗌 4947(a)(1) or 🗌 527	If "No," attac	h a list. Se	ee instructions.
J	Website	: www.Jaf	ariCU.com	H(c) Group e	xemption	number
κ	Form of o	organization: 🗸	Corporation Trust Association Other L Year of formation	on: 2016	M State	of legal domicile: TX
P	art I	Summa	Ŷ			
	1	Briefly des	cribe the organization's mission or most significant activities: A State-or	hartered cre	dit unior	n, providing federally
e		insured Sa	vings accounts to members, and providing loans to members.			
Activities & Governance						
veri	2	Check this	box $\hfill \square$ if the organization discontinued its operations or disposed of	more than 2	5% of it	s net assets.
g	3	Number of	voting members of the governing body (Part VI, line 1a)		3	7
ø	4	Number of	independent voting members of the governing body (Part VI, line 1b)		4	7
ties	5	Total numb	per of individuals employed in calendar year 2023 (Part V, line 2a) .		5	0
tivil	6	Total numb	per of volunteers (estimate if necessary)		6	14
Ac	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12		7a	0
	b	Net unrelat	ed business taxable income from Form 990-T, Part I, line 11		7b	0
				Prior Yea	r	Current Year
Ð	8	Contributio	ns and grants (Part VIII, line 1h)		0	0
nué	9	Program s	ervice revenue (Part VIII, line 2g)		45,199	24,172
Revenue	10	Investment	income (Part VIII, column (A), lines 3, 4, and 7d)		13,374	59,825
œ	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		12,000	0
	12	Total reven	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		70,573	83,997
	13	Grants and	similar amounts paid (Part IX, column (A), lines 1–3)		0	0
	14	Benefits pa	id to or for members (Part IX, column (A), line 4)		0	0
S	15	Salaries, ot	her compensation, employee benefits (Part IX, column (A), lines 5–10)		0	0
nse	16a	Profession	al fundraising fees (Part IX, column (A), line 11e)		0	0
Expenses	b	Total fundr	aising expenses (Part IX, column (D), line 25) 0			
Ш	17	Other expe	nses (Part IX, column (A), lines 11a–11d, 11f–24e)		31,629	41,067
	18	Total expe	nses. Add lines 13–17 (must equal Part IX, column (A), line 25) .		31,629	41,067
	19	Revenue le	ss expenses. Subtract line 18 from line 12		38,944	42,930
or			В	eginning of Cur	rent Year	End of Year
Net Assets or Fund Balances	20	Total asset	s (Part X, line 16)	1,9	912,556	2,262,007
t As: d Bé	21	Total liabili	ties (Part X, line 26)		504,318	1,810,839
Fun	22	Net assets	or fund balances. Subtract line 21 from line 20		408,238	451,168
Pa	art II	Signatu	re 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 Imran Dhanji, President Type or print name and title			Dat	e		
Paid Proparor	Print/Type preparer's name	Date		Check if self-employed	PTIN		
Preparer Use Only	Firm's name		Firm's EIN				
	Firm's address	Phone	e no.				
May the IRS	discuss this return with the prepa	rer shown above? See instructions .				Ses 2	🗌 No
						00	20

For Paperwork Reduction Act Notice, see the separate instructions.

1

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Form 99	0 (2023)		Page 2
Part	Statement of Program Service Accompl Check if Schedule O contains a response		
1	Briefly describe the organization's mission:		
-	Provide Savings accounts and no-interest loans to n	nembers	
2	Did the organization undertake any significant proprior Form 990 or 990-EZ?		
3	Did the organization cease conducting, or makes services?		
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service $accolored expenses$. Section $501(c)(3)$ and $501(c)(4)$ organiz the total expenses, and revenue, if any, for each p	ations are required to report the an	
4a	(Code:) (Expenses \$ ir	ncluding grants of \$) (Revenue \$
	Savings accounts: Member Accounts 398 Total Depo		
4b		ncluding grants of \$) (Revenue \$)
	Provide no-interest loans: Total loans \$826,559		
4c	(Code:) (Expenses \$ ir	ncluding grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.		
4e	(Expenses \$ 0 including grants of \$ Total program service expenses	0) (Revenue \$0	0)

Form 99	D (2023)		F	Page 3
Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		~
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		~
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		~
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? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		~
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? <i>If "Yes," complete Schedule D, Part I</i>	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		~
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .	10		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	~	
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		~
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		~
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		~
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	~	
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		~
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		~
b	fundraising, business, investment, and program service activities outside the United States, or aggregate			
45	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		~
15	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		~
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		~
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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		~

Form 99	0 (2023)		I	Page 4
Part	V 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>	22		~
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> .	23		~
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>	24a		~
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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>	24d 25a		
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>	25b		
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>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		~
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		~
	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> 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>	28b 28c		~ ~
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		~ ~
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> 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>	31 32		~ ~
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> .	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		
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>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
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	38	~	
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			. 🗌
1a b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1c	Yes	No
		10		1

				Page 5
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
		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		~
b	· · · · · · · · · · · · · · · · · · ·			
5a		5a		~
b		5b		~
с		5c		
6a		62		~
 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 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)? 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? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 				
5	gifts were not tax deductible?	6b		
	• •			
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17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See in	nstruc	tions
Secti	Check if Schedule O contains a response or note to any line in this Part VI			
5000			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7 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.	-		
ь 2	Enter the number of voting members included on line 1a, above, who are independent . 1b 7 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		~
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		~
6 7a	Did the organization have members or stockholders?	6 7a	~	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	~	
ь 9	Each committee with authority to act on behalf of the governing body?	8b 9	~	~
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	~	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	~	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	10-		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a 12b	~	~
b C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	~	
13	Did the organization have a written whistleblower policy?	13	~	
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	14	~	
a	The organization's CEO, Executive Director, or top management official	15a	v	
b	Other officers or key employees of the organization	15b	~	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		~
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed <u>None</u> Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	T (sec	tion {	501(c
	✓ 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. Imran Dhanji, (713)331-1072

Form 990 (2023)

Page **6**

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

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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.

				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
(A) Name and title						e than c		Reportable	Reportable	Estimated amount
Name and the	Average hours					is both or/trust		compensation	compensation	of other
	per week			-	-		<u> </u>	from the	from related	compensation
	(list any hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	ligh mpl	Former	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	related	idua	utio	e,	mp	est o oye	Ē	1099-NEC)	1099-NEC)	related organizations
	organizations	or tr	nal		loye	e com				-
	below dotted line)	Iste	trus		۴,	pen				
	,	O I	tee			Highest compensated employee				
Azmat Tejani	2.00									
Director		~						0	0	0
Ali Oonwala	3.00									
Supervisory Committe chairmam		~						0	0	0
Imran Dhanji	6.00									
President		~		~				0	0	0
Faiyaz Bhojani	2.00									
Director		~						0	0	0
Ali Rizvi	2.00									
Vice-President		~		~				0	0	0
Mohammed Mithani	2.00									
Vice-President		~		~				0	0	0
Reza Khalili	2.00									
Chairman, Director		~						0	0	0
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Part	VI Section A. Officers, Directors, 1	rustees,	Key I	Ξm	ploy	yee	s, an	d F	lighest Compe	nsated	Emplo	yees (continued)
					•	C)						
	(A)	(B)	(do n	ot cł		ition more	e than c	one	(D)	(E))	(F)
	Name and title	Average	box,	unles	ss pe	erson	is both	n an	Reportable	Report		Estimated amount of other
		hours per week				-	or/trust	ŕ	compensation from the	compen from re		compensation
		(list any	Individual t or director	Insti	Officer	Key employee	High	Former	organization (W-2/	organizatio		from the
		hours for related	rect	tutic	ĕř	emp	est o loye	ner	1099-MISC/ 1099-NEC)	1099-N 1099-N		organization and related organizations
		organizations	or tr	nal		oloye	eom		,		,	
		below dotted line)	Individual trustee or director	Institutional trustee		НФ.	pens					
		,	U U	lee			Highest compensated employee					
							<u>u</u>					
			-									
			1									
			-									
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			1									
1b	Subtotal						•	•	0		0	0
С	Total from continuation sheets to Part		n A			• •	•	•				
d	Total (add lines 1b and 1c)			· .	•				0	· .	0	0
2	Total number of individuals (including reportable compensation from the organi		limite	d 1	10	inos	ie list	ted	above) who re	eceived	more t	nan \$100,000 of
		201011							0			Yes No
3	Did the organization list any former of	officer dire	octor	tru	ister	o k		mnl	lovee or highes	t compe	ensated	
Ū	employee on line 1a? If "Yes," complete s											3 🗸
4	For any individual listed on line 1a, is the							n a	and other comper	nsation fr	om the	-
	organization and related organizations											
	individual											4 🖌
5	Did any person listed on line 1a receive o									ion or ind	dividual	
	for services rendered to the organization	? If "Yes," c	compl	ete	Scł	nedu	ıle J f	for s	such person .			5 🖌
Secti	on B. Independent Contractors											
1	Complete this table for your five high											
	compensation from the organization. Repo	ort compen	Isation	I TOI	nthe	e ca	iendai	r ye	ear ending with or	within th	e orgar	inzation's tax year.
	(A) Name and business add	ress							(B) Description of serv	vices		(C) Compensation
Nerr		1033						-		1000		Compensation
None								-				
								-				
								-				
								-				

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								

Part VIII Statement of Revenue

	_ c	Check if Schedule O contains a response or note to any line in this Part VIII.						
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Part	. VIII	Statement of Revenue Check if Schedule O contains a respo	nse or note to an	w line in this Pa	art VIII		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts, ts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b					
Ame	С	Fundraising events 1c					
iifts ar /	d	Related organizations 1d					
s, G mil	e	Government grants (contributions) 1e					
on: r Si	f	All other contributions, gifts, grants, and similar amounts not included above					
outi the	g	and similar amounts not included above 1f Noncash contributions included in					
d O	9		\$				
Col	h	Total. Add lines 1a–1f		0			
			Business Code	_			
ce	2a	Voluntary Fees	522130	3,332	3,332	0	0
ervi	b	Account Fee	522130	18,290	18,290	0	0
enu	С	Loan Application Fees	522130	2,550	2,550	0	0
Program Service Revenue	d						
Bo.	е						
ď	f	All other program service revenue		0	0	0	0
	g 3	Total. Add lines 2a–2f		24,172			
	Ŭ	other similar amounts)		59,825	59,825	0	0
	4	Income from investment of tax-exempt b		0	0	0	
	5	Royalties		0	0	0	
		(i) Real	(ii) Personal	-			
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С		0 0				
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities sales of assets	(ii) Other				
		sales of assets other than inventory 7a					
Ø	b	Less: cost or other basis					
evenue	~	and sales expenses . 7b					
eve	с		0 0				
r Ŗ	d	Net gain or (loss)					
Other R	8a	Gross income from fundraising					
Ò		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	с 9а	Net income or (loss) from fundraising ev Gross income from gaming	ents				
	ou	activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b					
	c	Net income or (loss) from gaming activit					
	10a	Gross sales of inventory, less					
		returns and allowances 10a	3				
	b	Less: cost of goods sold 10					
	С	Net income or (loss) from sales of inven-	-				
snu			Business Code				
neo	11a հ						
scellanec Revenue	b						
Miscellaneous Revenue	c d	All other revenue					
Σ	e	Total. Add lines 11a–11d		0			
	12			83,997	83,997	0	0
							- 000 (0000)

Part IX Statement of Functional Expenses

following ŠOP 98-2 (ASC 958-720)

Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses (B) (C) Program service expenses Management and general expenses 8b, 9b, and 10b of Part VIII. 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 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members Compensation of current officers, directors, 5 trustees, and key employees Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . Other salaries and wages 7 Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes 11 Fees for services (nonemployees): Management а Legal b С Accounting d Lobbying Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column a (A), amount, list line 11g expenses on Schedule O.) . 12 Advertising and promotion 13 Office expenses 18,300 14 Information technology 13,770 15 Royalties Occupancy 16 Travel 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization . 23 Insurance 1,177 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.) Provision for Loan Losses 7,820 а b С _____ d All other expenses е 25 **Total functional expenses.** Add lines 1 through 24e 41.067 0 0 0 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here [] if

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

Form 990 (2023)

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Image: Control of Contrel of Contenetated Control of Control of Control of Control of		n 990 (20	,			Page 11
(A) Beginning of year (B) 1 Cash - non-interest-bearing 340,990 1 46,755 2 Savings and temporary cash investments 1,030,000 2 1,411,308 3 Pieldges and grants receivable, net 4 4 4 4 Accounts receivable, net 4 4 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 6 Loans and other receivables from other disqualified persons (as defined under section 4958(r)(1), and persons described in section 4958(r)(3)(8) 6 9 7 Notes and loans receivable, net 10a 10 6 9 Prepaid expenses and deferred charges 9 9 10a 10 10 Lass: accumulated depreciation 10b 5 5 10c 5 11 Investments – other securities. See Part IV, line 11 12 12 10 12 13 100 5 5 10 5 10	Ρ	art X				_
2 Savings and temporary cash investments 1,030,000 2 1,411,308 3 Piedges and grants receivable, net 3 3 4 Accounts receivables from any current of forcer, director, trustes, key employes, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from any current of forcer, director, trustes, key employes, 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(0)(3)(B) 6 7 Notes and loans receivable, net 5 5 10a Loan, buildings, and equipment: cost or other 10a 10 b Less: accumulated depreciation 10a 10 5 5 11 Investmentspolaticy traded securities 11 500 i3 500 14 101 500 i3 500 10 22 0 15 To accounts payable and accrued expenses 17 0 20 0 16 Totata sesets. Acd lines 1 through 15 (must equal line 3) </th <th></th> <th></th> <th>Check if Schedule O contains a response or note to any line in this Par</th> <th>(A)</th> <th></th> <th>(B)</th>			Check if Schedule O contains a response or note to any line in this Par	(A)		(B)
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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 0 23 Secured mortgages and notes payable to unrelated third parties 23 0 24 Unsecured notes and loans payable to unrelated third parties 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 1,504,318 25 1,810,839 26 Total liabilities. Add lines 17 through 25 1,504,318 26 1,810,839 0 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 27 Net assets with donor restrictions 27 28 Net assets with donor restrictions 28 0 0 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 0 0 29 Capital stock or trust principal, or current funds 0 29 0 30 Paid-in or capital surplus, or land, building, or equipment fund 0 30 0 31 Retained earnings, endowment, accumulated income, or other funds 408,238 31					-	0
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20 Occurred notes and loars payable to unrelated third parties 1 20 0 24 Unsecured notes and loars payable to unrelated third parties 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 25 1,504,318 25 1,810,839 26 Total liabilities. Add lines 17 through 25 1 1,504,318 26 1,810,839 27 Net assets without donor restrictions 27 28 27 28 Organizations that follow FASB ASC 958, check here rain and complete lines 27, 28, 32, and 33. 28 27 29 Capital stock or trust principal, or current funds 0 29 0 30 Paid-in or capital surplus, or land, building, or equipment fund 0 30 0 31 Retained earnings, endowment, accumulated income, or other funds 408,238 31 451,168	ilities	22	trustee, key employee, creator or founder, substantial contributor, or 35%			
23 Observed montgages and nones payable to unrelated third parties 1 20 0 24 Unsecured notes and loans payable to unrelated third parties 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 25 1,504,318 25 1,810,839 26 Total liabilities. Add lines 17 through 25 1,504,318 26 1,810,839 27 Net assets without donor restrictions 27 28 28 Organizations that follow FASB ASC 958, check here reand complete lines 27, 28, 32, and 33. 28 27 28 Net assets with donor restrictions 28 28 0 Organizations that do not follow FASB ASC 958, check here reand complete lines 29 through 33. 29 0 29 Capital stock or trust principal, or current funds 0 29 0 30 Paid-in or capital surplus, or land, building, or equipment fund 0 30 0 31 Retained earnings, endowment, accumulated income, or other funds 408,238 31 451,168 32 Total net assets or fund balances 1 408,238 32	iab					0
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of Schedule D1,504,318251,810,83926Total liabilities. Add lines 17 through 251,504,318261,810,83930Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.271,504,318261,810,83927Net assets without donor restrictions272828Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.282829Capital stock or trust principal, or current funds029030Paid-in or capital surplus, or land, building, or equipment fund030031Retained earnings, endowment, accumulated income, or other funds408,23831451,16832Total net assets or fund balances408,23832451,168		25				
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SourceOrganizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.2727Net assets without donor restrictions2728Net assets with donor restrictions28Organizations that do not follow FASB ASC 958, check here28Organizations that do not follow FASB ASC 958, check here2929Capital stock or trust principal, or current funds029Capital stock or trust principal, or current funds030Paid-in or capital surplus, or land, building, or equipment fund030Retained earnings, endowment, accumulated income, or other funds408,23831Retained earnings, endowment, accumulated income, or other funds408,23832Total net assets or fund balances408,23832Ats1,168		26				
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27Net assets without donor restrictions2728Net assets with donor restrictions28Organizations that do not follow FASB ASC 958, check here2and complete lines 29 through 33.029Capital stock or trust principal, or current funds030Paid-in or capital surplus, or land, building, or equipment fund031Retained earnings, endowment, accumulated income, or other funds408,23832Total net assets or fund balances408,23833Total liabilities and net assets/fund balances1,912,556332,262,007	nce		and complete lines 27, 28, 32, and 33.			
28 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here rand complete lines 29 through 33. 29 29 Capital stock or trust principal, or current funds 0 30 Paid-in or capital surplus, or land, building, or equipment fund 0 31 Retained earnings, endowment, accumulated income, or other funds 408,238 32 Total net assets or fund balances 408,238 33 Total liabilities and net assets/fund balances 1,912,556	ala					
Organizations that do not follow FASB ASC 958, check hereImage: Complete lines 29 through 33.29Capital stock or trust principal, or current funds030Paid-in or capital surplus, or land, building, or equipment fund031Retained earnings, endowment, accumulated income, or other funds408,23832Total net assets or fund balances408,23833Total liabilities and net assets/fund balances1,912,55633332,262,007	B	28			28	
29Capital stock or trust principal, or current funds029030Paid-in or capital surplus, or land, building, or equipment fund030031Retained earnings, endowment, accumulated income, or other funds408,23831451,16832Total net assets or fund balances408,23832451,16833Total liabilities and net assets/fund balances1,912,556332,262,007	Fun					
30Paid-in or capital surplus, or land, building, or equipment fund03031Retained earnings, endowment, accumulated income, or other funds408,2383132Total net assets or fund balances408,2383233Total liabilities and net assets/fund balances1,912,55633) OL	29	Capital stock or trust principal, or current funds	0	29	0
Set Total net assets or fund balances1408,23831451,16832Total net assets or fund balances1408,23832451,16833Total liabilities and net assets/fund balances1,912,556332,262,007	iets	30		0	30	0
32 Total net assets or fund balances 408,238 32 451,168 33 Total liabilities and net assets/fund balances 1,912,556 33 2,262,007	Ass	31	Retained earnings, endowment, accumulated income, or other funds .	408,238	31	451,168
Z 33 Total liabilities and net assets/fund balances 1,912,556 33 2,262,007	et /	32		408,238	32	451,168
	Ž	33	Total liabilities and net assets/fund balances	1,912,556	33	2,262,007

Form **990** (2023)

Form 99	90 (2023)				Pa	ige 12
Par	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			8	3,997
2	Total expenses (must equal Part IX, column (A), line 25)	2			4	1,067
3	Revenue less expenses. Subtract line 2 from line 1	3			4	2,930
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			40	8,238
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10			45	1,168
Part	XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII	• •	• •	· •		<u> </u>
					Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other	volain				
	If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.	xpiain	on			
-						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		-	2a	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both.	nplied	or			
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		-	2b		~
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ited o	na			
	separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis	!l.				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov the audit, review, or compilation of its financial statements and selection of an independent account			_		
				2c	~	
	If the organization changed either its oversight process or selection process during the tax year, e Schedule O.	xpiain	on			
0.5		- المالين	46.0			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	ortn in				
Ŀ		• •		3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not une required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a			0L		
	required addit or addits, explain why on Schedule O and describe any steps taken to undergo such	auuns	•	3b		

Form **990** (2023)

SCHE	DULE	D
(Form	990)	

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. 2023

OMB No. 1545-0047

	nent of the Treasury Revenue Service		Attach to Form 990. 10 for instructions and the latest informat	ion	Open to Public Inspection
	of the organization				identification number
	RI NO-INTEREST				81-1523850
			sed Funds or Other Similar Fund	s or Ac	
		ete if the organization answered "			
	•		(a) Donor advised funds	(b) Funds and other accounts
1	Total number a	at end of year			
2	Aggregate valu	ue of contributions to (during year) .			
3		ue of grants from (during year)			
4		ue at end of year			
5	-		advisors in writing that the assets hel		
6			organization's exclusive legal control?		
6			nd donor advisors in writing that grant t of the donor or donor advisor, or for		
				-	
Par	• •	rvation Easements			
Fai		ete if the organization answered "	Yes" on Form 990 Part IV line 7		
1		conservation easements held by the o			
•	• • • •	of land for public use (for example, recrea		a histori	cally important land area
		of natural habitat	,		ed historic structure
	Preservatio	n of open space			
2			d a qualified conservation contribution	in the fo	rm of a conservation
	easement on t	he last day of the tax year.			Held at the End of the Tax Year
а					1
b	-	-			
C L			storic structure included on line 2a .		;
d		tructure listed in the National Register	e 2c acquired after July 25, 2006, and		
3		-	ferred, released, extinguished, or term	· 20	
•	tax year				y the organization during the
4		tes where property subject to conserv	vation easement is located		
5	Does the orga	anization have a written policy reg	arding the periodic monitoring, inspe		
	violations, and	enforcement of the conservation eas	ements it holds?		· · · 🗌 Yes 🗌 No
6	Staff and volunt	teer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conserva	tion easements during the year
7	Amount of expe	enses incurred in monitoring, inspecting	g, handling of violations, and enforcing c	onservati	ion easements during the year
8	Does each cor	 nservation easement reported on line	2d above satisfy the requirements of s	ection 17	70(h)(4)(B)(i)
9	In Part XIII, des	scribe how the organization reports co	onservation easements in its revenue a	and expe	
			note to the organization's financial stat	ements t	hat describes the
		accounting for conservation easemer			
Par	-	zations Maintaining Collections ete if the organization answered "`	of Art, Historical Treasures, or C Yes" on Form 990, Part IV, line 8.	Other Si	milar Assets
1a			B ASC 958, not to report in its revenue		
			held for public exhibition, education,		
	•		o its financial statements that describe		
b	•	· · ·	B ASC 958, to report in its revenue st		
		reasures, or other similar assets held lowing amounts relating to these item	for public exhibition, education, or rese	earch in 1	iurmerance of public service,
	-				¢
•	IN ASSERS INCIL				. \$

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. Revenue included on Form 990 Part VIII line 1 • _

а	a Revenue included on Form 990, Part VIII, line 1	 	. \$
b	b Assets included in Form 990, Part X	 	. \$

Schedu	le D (Form 990) 2023										Page 2
Part	III Organizations Maintaining	Coll	ections of	Art, His	torical 1	Freasures	, or O	her Similar	Asse	ts (con	tinued)
3	Using the organization's acquisition, collection items (check all that apply).		sion, and ot	ther reco	rds, chec	k any of th	e follov	ving that make	e sign	ificant u	ise of its
а	Public exhibition			d	🗌 Loan	or exchang	e prog	ram			
b	Scholarly research			е							
С	Preservation for future generations	5									
4	Provide a description of the organiza		collections a	and expla	ain how t	hey further	the org	anization's ex	empt	purpos	e in Part
	XIII.			-		-		-	-		
5	During the year, did the organization	solici	it or receive	donation	is of art,	historical ti	reasure	s, or other sim	nilar		
	assets to be sold to raise funds rather	r than	to be mainta	ained as _l	part of the	e organizati	ion's co	ollection? .	.	🗌 Yes	🗌 No
Part	IV Escrow and Custodial Arra	angei	ments								
	Complete if the organization 990, Part X, line 21.	ansv	wered "Yes	" on For	m 990, I	Part IV, line	e 9, or	reported an a	amou	int on F	orm
1a	Is the organization an agent, trustee, included on Form 990, Part X?									☐ Yes	□ No
b	If "Yes," explain the arrangement in P	art XII	I and compl	ete the fo	llowing ta	able.				_	
					0				Amo	unt	
с	Beginning balance						10	;			
d	Additions during the year						10	1			
е	Distributions during the year						16	•			
f	Ending balance						11	:			
2a	Did the organization include an amou	nt on	Form 990, P	art X, line	21, for e	scrow or c	ustodia	l account liabil	ity?	🗌 Yes	🗌 No
b	If "Yes," explain the arrangement in P	art XII	I. Check her	e if the e	xplanatio	n has been	provid	ed in Part XIII			
Par											
	Complete if the organization	ans	wered "Yes	" on For	m 990, I	1					
		(a)	Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years ba	ack ((e) Four ye	ears back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and										
d	Grants or scholarships										
е	Other expenditures for facilities and										
f	Administrative expenses										
g	End of year balance				- (line 1 -)) le e l el				
2	Provide the estimated percentage of t		-	o./	e (ine rg	, column (a	u)) neid	as.			
a b	Board designated or quasi-endowmen	o/		%							
b	Permanent endowment %	70									
С	The percentages on lines 2a, 2b, and	2c ch	ould equal 1	00%							
3a	Are there endowment funds not in the				zation th	at are held	and ac	ministered for	the		
•••	organization by:	0 000		ie eigen						Y	es No
	(i) Unrelated organizations?								.	3a(i)	
	(ii) Related organizations?									3a(ii)	
b	If "Yes" on line 3a(ii), are the related o									3b	
4	Describe in Part XIII the intended uses	-		-						I	
Part	VI Land, Buildings, and Equip	omen	t								
	Complete if the organization	ans	wered "Yes	" on For	m 990, F	Part IV, line	e 11a.	See Form 99	0, Pa	urt X, lin	ie 10.
	Description of property		(a) Cost or of			or other basis	• • •	Accumulated	(d) Book v	alue
			(investm	nent)	(o	ther)	d	epreciation			
1a	Land			0		0					0
b	Buildings			0		0		0			0
С	Leasehold improvements			0		0		0			0
d	Equipment			5		5		5			5
e	Other			0		0		0			0
Total.	Add lines 1a through 1e. (Column (d) n	nust e	qual Form 9	90, Part 2	X, line 10	c, column (l	B)) .				5

Part VII	Investments – Other Securities Complete if the organization answered "Yes" on Form 990, Part	t IV. line 11b. See I	- orm 990	Part X. line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) M	lethod of valuation: nd-of-year market value
(1) Financial	derivatives			
• •	eld equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	mp (b) must squal Form 000, Port X, line 12, sol (P))			
Part VIII	mn (b) must equal Form 990, Part X, line 12, col. (B)) Investments – Program Related			
	Complete if the organization answered "Yes" on Form 990, Part	t IV line 11c See F	orm 990	Part X line 13
	(a) Description of investment	(b) Book value		ethod of valuation:
	(a) Description of investment	(b) DOOK value		nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			David V. Burg 40
	Complete if the organization answered "Yes" on Form 990, Par	t IV, line 11d. See I	-orm 990	
(4)	(a) Description			(b) Book value
(1)				
(2) (3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	mn (b) must equal Form 990, Part X, line 15, col. (B))			
Part X	Other Liabilities			
	Complete if the organization answered "Yes" on Form 990, Parline 25.	t IV, line 11e or 11f	. See For	m 990, Part X,
1.	(a) Description of liability			(b) Book value
(1) Federal ir	icome taxes			
(2) Member	Share Accounts Balance			1,810,839
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
I otal. (Colu	mn (b) must equal Form 990, Part X, line 25, col. (B))			1,810,839

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 .

Schedu	le D (Form 990) 2023			Page 4
Par	XI Reconciliation of Revenue per Audited Financial Statem	ents 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:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	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:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	
Part			er 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:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	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:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lines 1)	ne 18.)	5	
Part				
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar			Part X, line
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	t to provide any additional in	formation.	
	·····			

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.



Department of the Treasury Internal Revenue Service	
Name of the organization	

Name of the organization	Employer identification number
JAFARI NO-INTEREST CREDIT UNION	81-1523850
Form 990, Part VI, Section A, Line 6 - The Credit Union is owned by its members. Each member has one vo	ote.
Form 990, Part VI, Section A, Line 7a - Each member has one vote. The members elect the Board of Direct	ors every 3 years.
Form 990, Part VI, Section B, Line 11b - Form 990 was provided to all Board of Directors and was also revi	ewed by the Supervisory
Committee.	
Form 990, Part VI, Section B, Line 12c - The Credit Union's monthly financial statements are provided to the issued are documented and available for review by the Board of Directors. The Credit Union's quarterly fir	
members and anyone else on the NCUA website.	
Form 990, Part VI, Section B, Line 15 - The Credit Union does not provide compensation to anyone. Every	one is a volunteer.
Form 990, Part VI, Section C, Line 19 - The Credit Union's monthly financial statements are provided to the issued are documented and available for review by the Board of Directors. The Credit Union's quarterly fir	
members and anyone else on the NCUA website. The annual financial statements are sent to the members	and the annual report is
available on the Credit Union website.	