990 **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

2023

Department of the Treasury Internal Revenue Service Open to Public Inspection

A	For the 2	2023 calend	lar year, or tax year beginning 01/0	1/2023 and endi	ng	12/31/2	023							
В	Check if a	applicable:	C Name of organization OPEN SANCTUARY		D Emplo	oyer identification number								
П	Address o	hange	Doing business as					83-2139828						
$\overline{\Box}$	Name cha	ĭ l	Number and street (or P.O. box if mail is not de	livered to street address)	Room	n/suite	E Teleph	none number						
$\overline{\Box}$	Initial retu	ĭ	7522 Monarch Road					904-631-3838						
$\overline{\Box}$	Final return	n/terminated	City or town, state or province, country, and ZIF	or foreign postal code										
П	Amended		Niwot, CO 80503	.			G Gross	receipts \$ 416,443						
\exists		on pending	F Name and address of principal officer: Shilpi S	Shah		H(a) Is this a gro								
ш	rippilodilo	n ponding	7522 Monarch Road, Niwot, CO 80503			1		es included? Yes No						
ī	Tax-exem	not status:	1	ach a list. See instructions.										
		www.ope	H(c) Group ex											
<u>к</u>		ganization:	1	-	of legal domicile: CO									
_	art I	Summa		r L Year of	TOTTIGLIOT	2010	III Otato	or rogar dorrillono.						
	_		cribe the organization's mission or most	significant activities. Th	o Open	Sanctuary D	roject i	s a fragly accessible						
Ф	1													
Activities & Governance	-	always growing digital guide for any resources or information you need in order to responsibly create and successfully manage (Continued on Schedule O, Statement 2)												
Ĕ	-		box if the organization discontinued	Lite operations or dispos	ed of m	ore than 25	% of it	e not accote						
ŏ	1		voting members of the governing body			iore triarr 25	3	_						
<u>م</u>			independent voting members of the go	•			4	3						
Se			er of individuals employed in calendar y	J , ,	,		5	3						
ξ				•			6	5						
ĺĊ.			er of volunteers (estimate if necessary) ated business revenue from Part VIII, co				7a	12						
•				• •			7a 7b	0						
	d	Net unrelat	ed business taxable income from Form	990-1, Part I, IIIIe 11 .		Prior Year		Current Year						
		Contributio	no and granta (Part VIII, line 1h)	384,197		416,443								
Revenue			ns and grants (Part VIII, line 1h)	3	· ·									
		•	ervice revenue (Part VIII, line 2g)		0	0								
Be			income (Part VIII, column (A), lines 3, 4		0	0								
			nue (Part VIII, column (A), lines 5, 6d, 8c				0	0						
			ue—add lines 8 through 11 (must equal F			3	84,197	416,443						
			similar amounts paid (Part IX, column (0		0							
		-	id to or for members (Part IX, column (A				0	0						
es	15 5		ner compensation, employee benefits (Pa		· —	3.	49,665	358,865						
Expenses	16a F		al fundraising fees (Part IX, column (A), I				0	0						
Ϋ́	b]		aising expenses (Part IX, column (D), lin		41									
	17	•	nses (Part IX, column (A), lines 11a-11c	18,621	16,091									
		•	nses. Add lines 13–17 (must equal Part				68,286	374,956						
		Revenue le	ss expenses. Subtract line 18 from line	12		•	15,911	41,487						
sor					Beg	inning of Curre	ent Year	End of Year						
Net Assets or Fund Balances	20		s (Part X, line 16)			1	68,932	211,232						
at A	21		ies (Part X, line 26)				193	1,006						
			or fund balances. Subtract line 21 from	line 20		1	68,739	210,226						
P	art II	Signatu	re Block											
			I declare that I have examined this return, includir b. Declaration of preparer (other than officer) is basing					my knowledge and belief, it is						
uu	ic, correct,	and complete	Decidiation of preparer (other than officer) is bas	ca on all illionnation of which pi	горагот по	lo arry knowica:	go.							
C:														
Si	-	Signature	of officer	Date	9									
Here Shilpi Shah, Treasurer														
			nt name and title											
Pa	nid	Print/Type	preparer's name Preparer's si	gnature	Date		Check [if PTIN						
	eparer	·		self-emp	ployed									
	se Only	Lives's see	ne	s EIN										
		Firm's add				Phone	no.							
Ma	v the IRS	S discuss t	his return with the preparer shown above	e? See instructions .				. Yes No						

Form 990 (2023) Page **2**

Part	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:
	The Open Sanctuary Project is a freely accessible, always growing digital guide for any resources or information you need in order
	to responsibly create and successfully manage an animal sanctuary or to provide the best possible care to animals in order to help
	them live laws healthy beautiful free of explaination
	them live long, neariny, nappy lives free of exploitation.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	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 \$ 358,782 including grants of \$) (Revenue \$ 416,443)
	The Open Sanctuary Project is a freely accessible, always growing digital guide for any resources or information you need in order
	to responsibly create and successfully manage an animal sanctuary or to provide the best possible care to animals in order to help
	them live long, healthy, happy lives free of exploitation. All of our resources are researched and responsibly crafted with the
	intention of promoting compassionate care standards and practices for animals in need of help and sanctuary, while identifying
	and discouraging practices that are exploitative or harmful to the individual.
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
40	(Code:) (Expenses ψ
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4e	Total program service expenses 358,782

	<u> </u>
	Chacklist at Deguired Schedules
art IV	Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	~	
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? <i>If</i> "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? If "Yes," complete Schedule C, Part II	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			
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	5		<u> </u>
7	"Yes," complete Schedule D, Part I	6		<i>'</i>
8	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	7		<u> </u>
	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</i> "Yes," <i>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</i> "Yes," <i>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, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		,
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		~
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		~
е	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)? If "Yes," complete Schedule D, Part X	11f		,
12a	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	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		~
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? If "Yes," complete Schedule F, Parts III and IV.	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? If "Yes," complete Schedule G, Part III	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? If "Yes," complete Schedule I, Parts I and II	21		~

Part l	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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		\ \
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
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? If "Yes," complete Schedule L, Part III	27		v
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		,
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		\(\tau \)
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
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</i> "Yes," <i>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		<i>'</i>
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	35b		
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>	36		•
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	37		<i>'</i>
Part	V Statements Regarding Other IRS Filings and Tax Compliance	38		
	Check if Schedule O contains a response or note to any line in this Part V			
_			Yes	No
b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		

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 5							
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		~				
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,	4a		/				
_	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?	5a		V				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~				
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
ou	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	~					
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).	UD						
и а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods							
	and services provided to the payor?	7a						
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							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12							
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: Gross income from members or shareholders							
a b	Gross income from members or shareholders							
J	against amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note: See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which							
	the organization is licensed to issue qualified health plans							
С	Enter the amount of reserves on hand							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~				
	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?	4.5						
		15						
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		/				
.0	If "Yes," complete Form 4720, Schedule O.	10						
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.	- •						

Form 990 (2023) Page **6**

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 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. Enter the number of voting members included on line 1a, above, who are independent . 3 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 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? 10a 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. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? 13 ~ Did the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed co 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Upon request Other (explain on Schedule O) Own website ✓ Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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. SHILPI SHAH, (904)631-3838

Part VI

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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 no	r any relate	d org	aniz	atic	n c	ompe	nsa	ted any current	officer, director,	or trustee.
				C)						
(A)	(B)	(-1	-4 -1		ition	. 41		(D)	(E)	(F)
Name and title	Average hours per week	(do not check more than one box, unless person is both an officer and a director/trustee)					an tee)	Reportable compensation from the	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
SHALEEN SHAH	4.00									
BOARD PRESIDENT	4.00	~		~				0	0	0
SHILPI SHAH	4.00									
TREASURER/SECRETARY	4.00	~		~				0	0	0
PEGGY CUSACK	2.00									
BOARD MEMBER		~						0	0	0

Part	VII Section A. Officers, Directors,	Γrustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated Em	ployees (co	ontinued)
					(6	C)						
	(A) Name and title		box,	unles	Position check more than dess person is both and a director/trus			n an	(D) Reportable compensation	(E) Reportable compensation from related	Estimate of o	ed amount other
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (1099-MISC 1099-NEC	W-2/ fror / organiz	ensation n the ation and ganizations
			-									
			-									
			-									
			-									
			-									
			-									
1b	Subtotal								0		0	0
d	Total (add lines 1b and 1c) Total number of individuals (including reportable compensation from the organic	but not		ed 1	to 1	thos	e lis	ted	above) who re	eceived mo	o re than \$10	0 00,000 of
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete or the line of the </i>										ated	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th									such	
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co										V
Secti	on B. Independent Contractors											
1	Complete this table for your five high compensation from the organization. Rep											
	(A) Name and business add	Iress							(B) Description of serv	vices	(C) Compensa	tion
None												
2	Total number of independent contractor received more than \$100,000 of compens							th	nose listed abov	re) who		

Page 8

	•
Part VIII	Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to an	ıy line in this Pa	ırt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ú, v	1a	Federated campaig	ne		1a	0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b	0				
àra 10u		•								
s, C Am	C	Fundraising events			1c	0				
ifts ar /	d	Related organization			1d	0				
ດ, ພິສີ	е	Government grants			1e	0				
ns, Sin	f	All other contribution	ns, git	fts, grants,						
tio er (and similar amounts no	ot inclu	uded above	1f	416,443				
bu	g	Noncash contribution	ons in	cluded in		110/110				
itri A O		lines 1a-1f			1g	\$ 0				
Sor	h	Total. Add lines 1a-				Ψ	417 442			
<u> </u>	h	Total. Add lines ra-	-11 .		•		416,443			
d)	_					Business Code				
ic	2a									
er Je	b									
yram Ser Revenue	С									
am eve	d									
gra	е									
Program Service Revenue	f	All other program se								
ш.	g	Total. Add lines 2a-					0			
	3	Investment income					0			
		other similar amoun								
	4	Income from investment of tax-exempt bor				na proceeas				
	5	,								
				(i) Real		(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6с		0	0				
	d	Net rental income o		3)						
	7a	Gross amount from	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(i) Securit		(ii) Other				
	14	sales of assets		(,) 0000		(, 0				
		other than inventory	_							
		-	7a							
Revenue	b	Less: cost or other basis								
en		and sales expenses .	7b							
ě	С	Gain or (loss)	7с		0	0				
	d	Net gain or (loss)								
Other	8a	Gross income from	m fu	ndraisina						
Б		events (not including		0						
		of contributions rep		d on line						
		1c). See Part IV, line			8a					
	h	Less: direct expens			8b					
		•								
	C	Net income or (loss)			y eve	πιδ				
	9a	Gross income f								
		activities. See Part I	v, iin	e 19 .	9a					
		Less: direct expense			9b					
	С	Net income or (loss)	from	gaming ac	ctivitie	es				
	10a	Gross sales of ir	nvento	ory, less						
		returns and allowances 10a								
	b	Less: cost of goods	sold		10b					
	C	Net income or (loss))rv				
	-	TAGE HICOTHIC OF (1022)	, 11 011	Jaies Ul III	VOITE					
Sno	4.4					Business Code				
eo ne	11a									
scellaneo Revenue	b									
ev el	С									
Miscellaneous Revenue	d	All other revenue								
2	е	Total. Add lines 11a	<u>1</u> 1d	<u>l</u>		<u></u>	0			
	12	Total revenue. See					416,443	0	0	0

Page **10** Form 990 (2023)

	on 501(c)(3) and 501(c)(4) organizations must comp	loto all columna All	other ergenizations	must samplete salu	mn (4)
Sectio	Check if Schedule O contains a response				
	t include amounts reported on lines 6b, 7b, 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		ехрепзез	general expenses	ехрепзез
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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	84,360	71,706	8,436	4,218
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	04,300	71,700	0,430	4,210
7 8	Other salaries and wages	237,604	237,604		
9	Other employee benefits	12,852	12,852		
10	Payroll taxes	24,049	23,081	645	323
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.) .				
12	Advertising and promotion	14	14		
13	Office expenses	1,310	1,185	125	
14	Information technology	8,916	7,837	1,079	
15	Royalties	0,710	7,037	1,077	
16	Occupancy				
17					
18	Travel				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,396	2,396		
20	Interest	2,070	2,070		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	2,107	2,107		
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.)				
а	Payroll Processing Fees	1,348	0	1,348	0
b		1,010		1,010	
c					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	374,956	358,782	11,633	4,541
26	Joint costs. Complete this line only if the	374,700	330,702	11,000	11041
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
	<u> </u>				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X		📙
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	166,798	1	208,822
	2	Savings and temporary cash investments	·	2	,
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		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	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	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	2,134	9	2,410
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	168,932	16	211,232
	17	Accounts payable and accrued expenses	193	17	1,006
	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	
S	22	Loans and other payables to any current or former officer, director,			
≝		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
Ξ	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		25	
	26	Total liabilities. Add lines 17 through 25	193	26	1,006
es		Organizations that follow FASB ASC 958, check here			
nc n		and complete lines 27, 28, 32, and 33.			
ale	27	Net assets without donor restrictions	168,739		210,226
D E	28	Net assets with donor restrictions	0	28	0
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here			
		and complete lines 29 through 33.			
S S	29	Capital stock or trust principal, or current funds		29	
se	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds .		31	
É	32	Total net assets or fund balances	168,739	32	210,226
_	33	Total liabilities and net assets/fund balances	168,932	33	211,232

Form 990 (2023) Page **12**

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)			416	6,443
2	Total expenses (must equal Part IX, column (A), line 25)			374	4,956
3	Revenue less expenses. Subtract line 2 from line 1			41	1,487
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4			168	8,739
5	Net unrealized gains (losses) on investments		0		
6	Donated services and use of facilities				0
7	Investment expenses				0
8	Prior period adjustments				0
9	Other changes in net assets or fund balances (explain on Schedule O)				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))			210	0,226
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: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain	<u></u>			
	Schedule O.	OII			
22	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		~
Za	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.	0.			
	☐ 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 audited o				
	separate basis, consolidated basis, or both.				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	t of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain	on			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	·	3b	200	

Form **990** (2023)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number

	N SANCTUARY PROJECT INC					83-21		
	Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.							
The c	The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)							
1	A church, convention of church					0(b)(1)(A)(i).		
2	A school described in section		,		•			
3	A hospital or a cooperative hos						/···	
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 t		collogo or university	owned o	r operate	d by a government	al unit described in	
3	section 170(b)(1)(A)(iv). (Comp		college of university	owned o	Operate	d by a government	ai unit described in	
6	☐ A federal, state, or local govern	•	mental unit described	in secti o	n 170(h)	(1)(Δ)(_V)		
7	An organization that normally	•					the general public	
=	described in section 170(b)(1)(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a gove.		. and goneral passes	
8	☐ A community trust described in		•	Part II.)				
9	☐ An agricultural research organi			•	erated in	conjunction with a l	and-grant college	
	or university or a non-land-granuniversity:	nt college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or	
10	☐ An organization that normally r	eceives (1) more	than $33^{1}/3\%$ of its su	pport fro	m contrib	outions, membership	fees, and gross	
	receipts from activities related support from gross investment	to its exempt full income and uni	nctions, subject to ce related business taxal	rtαιn exce ole incom	eptions; a ie (less se	and (2) no more than ection 511 tax) from	businesses	
	acquired by the organization at	fter June 30, 197	75. See section 509(a	a)(2). (Cor	nplete Pa	art III.)		
11	An organization organized and	•		-				
12	An organization organized and							
	one or more publicly supported the box on lines 12a through 12							
•	_		,, ,,	, ,		•	, ,	
а	Type I. A supporting organithe supported organization							
	supporting organization. Yo					ine directors or trust		
b		-	· ·			supported organizati	on(s), by having	
_	control or management of t							
	organization(s). You must of	complete Part I	V, Sections A and C					
С							ally integrated with,	
	its supported organization(s	s) (see instructio	ns). You must comp	lete Part	IV, Secti	ions A, D, and E.		
d								
	that is not functionally integ						d an attentiveness	
	requirement (see instruction	•	•		-			
е							e II, Type III	
	functionally integrated, or T			oporting (organizat	IOII.		
ı g	Enter the number of supported or Provide the following information						•	
9	(i) Name of supported organization	(ii) EIN	(iii) Type of organization		rganization	(v) Amount of monetary	(vi) Amount of	
	(i) Name of Supported organization	(11) 2.114	(described on lines 1–10	listed in you	ır governing	support (see	other support (see	
	above (see instructions)) document? instructions) instructions)						instructions)	
				Yes	No			
(A)								
(A)								
(B)								
(C)								
(D)								
(E)								
Total	1							

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

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 **(e)** 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 150,942 239,369 321,267 384,198 416,443 1,512,219 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities 3 furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 384,198 4 150,942 239,369 321,267 416,443 1,512,219 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) **Public support.** Subtract line 5 from line 4 1,512,219 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 4 150,942 239,369 321,267 384,198 416,443 1,512,219 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.) **Total support.** Add lines 7 through 10 11 1,512,219 Gross receipts from related activities, etc. (see instructions) 12 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) 13 Section C. Computation of Public Support Percentage % 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 % 331/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 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 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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.)

Secti	on A. Public Support			, , -		,	
Calen	dar 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	. ,		,		,	
0	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise						
2	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						
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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	on B. Total Support				T		
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
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.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop he	•			or fifth tax ye		. , . ,
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2023 (line 8	3, column (f), c	livided by line	13, column (f))		15	%
16	Public support percentage from 2022 Sch	nedule A, Part	III, line 15 .			16	%
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2023 (-			%
18	Investment income percentage from 2022						%
19a	331/3% support tests—2023. If the organ						
	17 is not more than 331/3%, check this box		_	-		_	_
b	331/3% support tests—2022. If the organiz						
	line 18 is not more than 331/3%, check this l	_	=				_
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions .

Schedule A (Form 990) 2023 Page 4

Part IV **Supporting Organizations**

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

Se

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

determine whether the organization had excess business holdings.)

Schedule A (Form 990) 2023 Page 5 Part IV **Supporting Organizations** (continued) Yes No 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 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 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 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete **line 2** below. The organization is the parent of each of its supported organizations. *Complete line 3 below.* С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a 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 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

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

Schedule A (Form 990) 2023 Page **6**

				. ago -
Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations	
1	\Box Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	
Sect	tion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7_	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion 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-functional	ally i	integrated Type III suppor	rting organization
	(see instructions).			

Schedule A (Form 990) 2023 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** 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 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2023 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2023 Amount for 2023 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. Excess distributions carryover, if any, to 2023 a From 2018 From 2019 **c** From 2020 **d** From 2021 **e** From 2022 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2023 distributable amount Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2023 from Section D, line 7: Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . . Excess from 2023 . . .

Schedule A (Form 990) 2023 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

OPEN SANCTUARY PROJECT INC	83-2139828
Form 990, Part VI, Section B, Line 11b - The 990 is provided electronically to the board members prior to fi	ling.
Form 990, Part VI, Section B, Line 12c - Annual Signature Required	
Form 990, Part VI, Section B, Line 15 - The Board of Directors approves the Executive Director Salary, Boa	rd Members do research on
comparable salaries in for similarly sized non-profit charities in Denver metro area.	
Form 990, Part VI, Section C, Line 19 - Available upon request.	

Schedule O, Statement 1 OPEN SANCTUARY PROJECT INC

Form: Form 990 (2023) EIN: 83-2139828

Page: 1 Header Section

Reasonable Cause Explanations

Extension was filed 5/15/24 and granted to file tax returns Nov 15, 2024. Additional time was required to complete the books and tax return

Explanation

Schedule O, Statement 2 OPEN SANCTUARY PROJECT INC

Form: Form 990 (2023)
Page: 1
Part I, Line 1

Activity Or Mission Description

Description

an animal sanctuary or to provide the best possible care to animals in order to help them live long, healthy, happy lives free of exploitation.