Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



		of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and	the latest i	information.	Inspection					
Α	For th	e 2022 calend	ar year, or tax year beginning and	ending		•					
В	Check if applicat	ble: C Name or	forganization		D Employer identificat	ion number					
	Address GENERATIONS AHEAD										
	Name	5									
	Initial returr										
	Final		THREE MILE ROAD N.		231-360-00) <u>53</u> 377,809.					
	ated	City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$									
	returr	Amended TRAVERSE CITY, MI 49686 H(a) Is this a group ret									
	Appli tion pend		nd address of principal officer:MARJORIE RICH			Yes 🔀 No					
	-	SAME	AS C ABOVE		H(b) Are all subordinates inclu	ded? Yes No					
		empt status:		or 527							
	Webs		RATIONSAHEAD.ORG		H(c) Group exemption n						
_			X Corporation Trust Association Other	L Year	of formation: 2020 M S	tate of legal domicile: M L					
P	art I										
e	1	Briefly describ	be the organization's mission or most significant activities: EMPO	WERS 1	COUNG PARENTS	TO BECOME					
Activities & Governance			NT BY BUILDING POSITIVE RELATIONS								
/err	2	Check this bo			e than 25% of its net asse						
ğ	3		10 10								
8	4	Number of inc	6								
ties	5		of individuals employed in calendar year 2022 (Part V, line 2a)			30					
ť	6		of volunteers (estimate if necessary)			0.					
Ac			d business revenue from Part VIII, column (C), line 12			0.					
	d	Net unrelated	business taxable income from Form 990-T, Part I, line 11		Prior Year	Current Year					
	8	Contributions	and grants (Part VIII, line 1h)		261,185.	377,118.					
Revenue	9		ce revenue (Part VIII, line 2g)		0.	557.					
evel Svel	10		come (Part VIII, column (A), lines 3, 4, and 7d)		0.	134.					
č	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.					
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		261,185.	377,809.					
	13		milar amounts paid (Part IX, column (A), lines 1-3)		0.	0.					
	14		to or for members (Part IX, column (A), line 4)		0.	0.					
ŝ	15				152,216.	220,913.					
Expenses	16a	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) 24 , 3		0.	0.					
e de	b	Total fundrais	ing expenses (Part IX, column (D), line 25) 24,3	74.							
ш			es (Part IX, column (A), lines 11a-11d, 11f-24e)	70,762.	85,335.						
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		222,978.	306,248.					
	19	Revenue less	expenses. Subtract line 18 from line 12		38,207.	71,561.					
Net Assets or Fund Balances				B	eginning of Current Year	End of Year					
sets	20	Total assets (I	Part X, line 16)		234,935.	293,962.					
t As	21	Total liabilities	(Part X, line 26)		12,534.	0.					
PRE	22	Net assets or	fund balances. Subtract line 21 from line 20		222,401.	293,962.					
Pa	art II	Signature	e 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	Signature of officer	Date	
	MARJORIE RICH, EXECUTIVE	DIRECTOR	
	Type or print name and title		
	Print/Type preparer's name	Preparer's signature Date	Check PTIN
Paid	TRINA B. OCHS, CPA	07/	31/23 ^{if} P00209084
Preparer	Firm's name DGN , LLC		Firm's EIN 20-2349670
Use Only	Firm's address P.O. BOX 947		
	TRAVERSE CITY, MI	49685-0947	Phone no. 231 - 946 - 1722
May the IF	RS discuss this return with the preparer shown abo	ove? See instructions	X Yes No
232001 12-1	3-22 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.	Form 990 (2022)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	1 990 (2022) GENERATIONS AHEAD	84-4266286	Page 2
	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission: GENERATIONS AHEAD EMPOWERS YOUNG PARENTS TO BECOME RE BUILDING POSITIVE RELATIONSHIPS, STRENGTHENING FAMILY	ESILIENT BY	
	RAISING HEALTHY CHILDREN.		
2	Did the organization undertake any significant program services during the year which were not listed on t		
2	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program server If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 204,728. including grants of \$) (Expenses \$ 204,728. Including grants of \$) (Expenses \$ PROVIDE SERVICES FREE OF CHARGE TO TEEN AND YOUNG ADD	JLT PARENTS	557. ₎
	(MOTHERS AND FATHERS) LIVING IN THE GRAND TRAVERSE RE		
	PROVIDED INCLUDE: MENTORING, HOME VISITS, MENTAL HEAI		
	PARENTING EDUCATION, SUPPORT GROUPS AND FAMILY ACTIVI		
	AND BABY SUPPLIES. THE GOALS OF GENERATIONS AHEAD INC		G
	YOUNG PARENTS TO COMPLETE HIGH SCHOOL, PURSUE POST-SE	CONDARY JOB	
	TRAINING OR EDUCATION, INCREASE THEIR FAMILY RESILIEN		
	HEALTHY RELATIONSHIPS WITH THEIR CHILDREN AND LARGER	FAMILY. IN 202	2,
	WE HELPED 60 FAMILIES.		
4b	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
		· · ·	,
4c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 204,728.	, ,	
		 Form 9	90 (2022)
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Form 990 (2022)

Part IV Checklist of Required Schedules

GENERATIONS AHEAD

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
6	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</i> "Yes," <i>complete Schedule D, Part I</i>	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	- '		
U		8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
Ū	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII	10-		x
h	· · · · · · · · · · · · · · · · · · ·	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		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	120		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b		1.10		_ <u>-</u>
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u>.</u> _
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	990	(2022)
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4 2022.04010 GENERATIONS AHEAD

Form 990 (2022)	GENERATIONS	AHEAD
Part IV	Checklist	of Required Schedules	(continued)

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 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 I 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? If "Yes," complete Schedule R, Part I 33 34 Was the organization nelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 356 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule Q and provide explanations on Schedule O for Part VI. 36 36 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI. 37 38 Did the organization complete Schedu			-		Yes	No
22 Did the organization answer 'Yes' to Part VI, Section A, line 3, 4, or 5, about compensation of the organization survent and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J 23 24a Did the organization news taxes survey th bond is use with an outstanding principal amount of more than 500,000 as of the base day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule J. Did the organization maintain an escrew account other than a refunding escrew at any time during the year to defease any tax-seempt bonds? 24a 24 Did the organization maintain an escrew account other than a refunding escrew at any time during the year 0 defease any tax-seempt bonds? 24d 25 Section 50(16)8, 50(16)4, and 50(16)29 organizations. Did the organization ange in an excess benefit transaction with a disqualified person during the year 0 the organization areas that 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-E27 // 'Yes,' complete Schedule L, Part I 25a 25 Did the organization are that year of the sequence of the organization and that the transaction with a disqualified person or paysables to any current or former officer, director, trustee, key employee, creator or fourder, substantial contributer, or 33% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II. 26 26 Did the organization apple thereofy or tamily member of any of these persons? If 'Yes,' complete Schedule L, Part II. 27 <						
and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 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 Docember 31, 2002? If 'Yes,' amover fine 24b through 24d and complete Schedule L, 'I'No,'' go to line 25a. 24a 2 bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 2 bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24c 2 bid the organization invest any proceeds of tax-exempt bonds outstanding at any time during the year? 24c 2 bid the organization attain an exercer account other than a refulunding scrow at any time during the year? 24d 2 bid the organization attain an one behalf of issuer for bonds outstanding at any time during the year? 24d 2 bid 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 organizations potential schedule L, Part I 25b 2 bid the organization provid any any of these person? If 'Yes,' complete Schedule L, Part II 26 2 bid the organization provide again or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor? If 'Yes,' complete Schedule L, Part II 26 2 bid the organization nevelow endore, tas				22		X
Schedule / 23 24a Dd the organization have 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 Docember 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No.' go to line 25a 24a 24b Dd the organization invest any proceeds of tax-exempt bonds bayond a temporary period exception? 24b 25 Dd the organization invest any proceeds of tax-exempt bonds outstanding escrow at any time during the year to defease any tax-exempt bonds? 24d 25a Section 501(6(3), 501(4)(4), and 501(4)(20) organizations. Dit the organization angage in an excess benefit transacton with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a 25a Section 501(6(3), 501(4)(4), and 501(4)(20) organizations. Ditor forms able of sport 20 + Yes,' complete Schedule L, Part I 25a 25b Dd the organization aware that 1 engaged in an excess benefit transactor with a disqualified person may the organization's prior Forms 900 or 900-221. 25a 25b Dd 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 amployee bareoso 11'' Yes,' complete Schedule L, Part I 26b 27b Dd 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 any 55b controlled entity orable member or any of these persons 11'' Yes,' complete Schedule L			t			
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 vass issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K, If 'No,' go to line 25a, and the December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K, If 'No,' go to line 25a, and the December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K, If 'No,' go to line 25a, and the second to the than a relution generous at any time during the year to defease any tax exempt bonds? 24a 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization rangage in an excess benefit transaction with a disqualified person time a prior year, and that the transaction person any of the organization or payables to any current or former fore, direct, rutue k, ley enployee, creator or founder, substantial combubutor, or 39% complete Schedule L, Part II 25a 27 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, direct, rutue k, ley enployee, creator or founder, substantial combubutor, or 39% controlled entity or former officer, direct, rutue k, ley enployee, creator or founder, substantial contributor or any 5% complete Schedule L, Part III 26 27 Did the organization approved be theredo or family member of any of these persons? If 'Yes,' complete Schedule L, Part III 26 28 Was the organization approved be endored or the lowing privas (see the Schedule L, Part III) 26 29 Did the organization approved be endor or family dimetable, approved privas,' complete Schedule L, Part IIII 28a						x
ast day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete 24a Schedule K, IH 'No,' go to line 25a. 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24c d Did the organization anistian an escrew account other than a refunding eacrow 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 d Did the organization aver that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction may not be any parazitator's prior Forms 200 or 900-E27 If 'Yes,' complete Schedule L, Part I 25a D Did the organization aver that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction than not been reported on any of the organization's prior Forms 200 or 900-E27 If 'Yes,' complete Schedule L, Part II 25b 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or formed, cubicating any individual accinitious or approvement or approvement or any individual accinitious or approvement or any individual accinitious or approvement or any individual accinitious or approvement or approvement assistance to any current or former officer, director, trustee, key employee, creator or founder, or bustantial contributor? II 'Yes,' complete Schedule L, Part IV. 28 b A tam				23		_ A
Schedule K. If "No," go to line 25a 24a b Did the organization mixest any proceeds of tax exempt bonds beyond a temporary period exception? 24b c Did the organization mixest any proceeds of tax exempt bonds beyond a temporary period exception? 24c d Did the organization at as an "on behalf of" issuer for bonds outstanding at any time during the year to delease any tax exempt bonds? 24c d Did the organization at as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d d Did the organization bas not been reported on any of the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former frider, director, trustee, key employee, creator or founder, substantial contributor or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part I 26 27 D d the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part I 27 28 D d the organization provide thereod) or family member of any of these person? If "Yes," complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): 27 29 D d the organization active to a business transaction with one of the following parties (see the Schedule L, Part IV, in			ie			
b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding secrow at any time during the year to delease any tax exempt bonds? 24c d Did the organization maintain an escrow account other than a refunding secrow at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 25a 25b Did the organization are that 1 engaged in an excess barefit transaction with a disqualified person during the year? 25b 25b Did the organization are on the access barefit 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 900 or 900-E27 // Yes, "complete Schedule L, Part I 25b 27b 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 (rainity member of any of these persons? // Yes, "complete Schedule L, Part I/ 26c 27d Did the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions or applicable from or mage) and assets. 27f 28d A tamity member of any indinduial described in line 28a // Yes, "complet				04-		x
c Did the organization maintain an escrow account other than a retunding escrow at any time during the year to delease any tax-exempt bonds? 24c d Did the organization case as an "on behalt 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 in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 900-E2? 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 forme officer, director, trustee, key employee, creator or founder, substantial contributor or 39% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 27 Did the organization provide a grant or other assistance to any current or forme officer, director, trustee, key employee, creator or founder, substantial contributor or 39% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 28 Was the organization provide director, trustee, key employee, creator or founder, or substantial contributor? II 27 29 Vaste organization cover wore than 255, 000 in non-cash contributions, or tays complete Schedule L, Part IV 28a 29 Did the organization cover wore than 255,000 in non-cash contributions? II "Yes," complete Schedule M <t< td=""><td></td><td></td><td></td><td></td><td></td><td>- 23</td></t<>						- 23
any tax-exempt bonds? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a picory beam of the organization and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 E27 // "Yes," complete Schedule L, Part I 25a 26 Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a picor year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 E27 // "Yes," complete Schedule L, Part I 25b 27 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, controlled entity orfamily member of any of these persons? If "Yes," complete Schedule L, Part II 26 28 Did the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions); 28 29 Vas the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28a 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV 28a 20 Did the organization receive contributions o			·····	240		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 601(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage 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 cr32? If "Yes," complete Schedule L, Part I 25a 261 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, truste, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 270 Did the organization provide a grant or other assistance to any current or former officer, director, truste, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II. 27 271 Was the organization provide a grant or other assistance to any ourment of founder, substantial contributor? If "Yes," complete Schedule L, Part IV. 28 281 Was the organization provide a grant or other assistance to any current or founder, substantial contributor? If "Yes," complete Schedule L, Part IV. 28 292 Was the organization provide described in line 28a? If "Yes," complete Schedule L, Part IV. 28 304 the organization inducidue taminer description and/corganizations described in line 28a or 28b?/If "Yes," complete Schedule L, Part I N. 29 <td></td> <td></td> <td></td> <td>24c</td> <td></td> <td></td>				24c		
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 // 11 "Yes," complete Schedule L, Part I 25a 25b 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 E2? // "Yes," complete Schedule L, Part I 25b 25c 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 of nainy member of any of these persons? If "Yes," complete Schedule L, Part II 26 27 Did the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part III 27 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV 28 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part I 28 20 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 30 31 Did the organization selet, exchauge, dispose d, or transfer more than \$25% of						
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a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 28a "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 c 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. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 2 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 31 31 Did the organization ilquidate, 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 I 31 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37.If "Yes," complete Schedule R, Part 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 Did the organization. Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes," comp	dule L	ile L, Part IV,				
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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 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 39 Note: All Form 990 filers are required to complete Schedule O 38 2 94 Yet Statements Regarding Other IRS Filings and Tax Compliance Yet 94 La 3 1b 0 95 Enter the number of Forms W-2G included on line 1a. E						
Part V, line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 38 Did the organization complete Schedule O 38 2 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 31 31 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 31 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup wit			L	33		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 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? If "Yes," complete Schedule R, Part VI 37 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 38 Did the organization complete Schedule O complete Schedule O 38 2 Part V Statements Regarding Other IRS Filings and Tax Compliance 38 2 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 3 3 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 5						
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 Note: All Form 990 filers are required to complete Schedule O 38 2 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 31 31 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 31 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 31 31						X
 within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>			·····	35a		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 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? If "Yes," complete Schedule R, Part VI and the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 37 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 Note: All Form 990 filers are required to complete Schedule O 38 2 Part V Statements Regarding Other IRS Filings and Tax Compliance 1a Check if Schedule O contains a response or note to any line in this Part V 1a 3 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 3 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1				25h		
If "Yes," complete Schedule R, Part V, line 2 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? If "Yes," complete Schedule R, Part VI 37 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 Note: All Form 990 filers are required to complete Schedule O 38 2 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 4 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 3 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 4				350		
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</i> "Yes," <i>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? 38 Note: All Form 990 filers are required to complete Schedule O 38 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 38 1a 1a 3 b Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1a				36		x
and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>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 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 Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			·····			
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 38 Note: All Form 990 filers are required to complete Schedule O 38 38 38 Part V Statements Regarding Other IRS Filings and Tax Compliance 38 38 Check if Schedule O contains a response or note to any line in this Part V 4 4 4 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 3 4 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 4 4				37		x
Note: All Form 990 filers are required to complete Schedule 0 38 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 Yes 1a 1a 3 b Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 3 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1a 3			F			
Check if Schedule O contains a response or note to any line in this Part V 1a Ye 1a Ta b Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming				38	Х	
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 3 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1a 3						
1a 1a 3 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1a 3 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1a 3			<u></u>	<u></u>		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	,	1	~		Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			3			
					v	
				1c		(2022)
232004 12-13-22 Form 95				TOTT	550	(2022)

2022.04010 GENERATIONS AHEAD

0-	Establish a work of smalley as war acted on Estar W/O. Types with lief Wares and Tay, Chatemanta		165	NO						
za	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 6									
h	filed for the calendar year ending with or within the year covered by this return 2a 0 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х							
b 3a										
	 a 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 									
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	3b								
та	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х						
h	If "Yes," enter the name of the foreign country	та								
D	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		Х						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
04	any contributions that were not tax deductible as charitable contributions?	6a		х						
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).									
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		Х						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7c		Х						
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х						
f										
g										
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?									
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?									
9	9 Sponsoring organizations maintaining donor advised funds.									
а	a Did the sponsoring organization make any taxable distributions under section 4966?									
b	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?									
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:									
a	Gross income from members or shareholders 11a									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
10-	amounts due or received from them.) Section (1047(a)(4) non-avameted britishig truste is the association filing Form 10412	10-								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a								
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.									
	Is the organization licensed to issue qualified health plans in more than one state?	13a								
u	Note: See the instructions for additional information the organization must report on Schedule O.	lou								
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans 13b									
с	Enter the amount of reserves on hand 13c									
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
	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?	15		Х						
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х						
	If "Yes," complete Form 4720, Schedule O.									
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.									

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Yes No

GENERATIONS AHEAD

Statements Regarding Other IRS Filings and Tax Compliance (continued)

Form 990 (2022)

Part V

Form 990 (2022)	Form	990	(2022)
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X

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Sec	Check if Schedule O contains a response or note to any line in this Part VI				Σ
				Yes	
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 1	.0		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b 1	.0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh				
_	officer, director, trustee, or key employee?		2		Г
3	Did the organization delegate control over management duties customarily performed by or under t				T
-	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				t
5	Did the organization become aware during the year of a significant diversion of the organization's a				
6	Did the organization have members or stockholders?				t
0 7a	Did the organization have members of stockholders, or other persons who had the power to elect or a				┢
14	more members of the governing body?		7a		
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,		. <u>1a</u>		┢
b			76		
0	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the y		. 7b		
8			0-	x	
a ⊾	The governing body?			X	+
b	Each committee with authority to act on behalf of the governing body?		. 8b	<u>^</u>	╀
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re				
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		. 9		L
ec	tion B. Policies (This Section B requests information about policies not required by the Internal I	Revenue Code.)		V.	г
•-			10-	Yes	╞
	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				
	and branches to ensure their operations are consistent with the organization's exempt purposes?			37	╞
1 a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13			X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris		12 b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	'Yes," describe			
	on Schedule O how this was done		. 12c	Х	
3	Did the organization have a written whistleblower policy?		. 13	X	
4	Did the organization have a written document retention and destruction policy?		. 14	X	
5	Did the process for determining compensation of the following persons include a review and appro-	val by independent			Γ
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?			
а	The organization's CEO, Executive Director, or top management official		15a	X	
b	Other officers or key employees of the organization		15b	Х	Γ
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement with a			
	taxable entity during the year?		16a		Г
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org				
	exempt status with respect to such arrangements?		16b		L
ec	tion C. Disclosure	<u></u>			
7	List the states with which a copy of this Form 990 is required to be filed				
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,	and 990-T (section 501(c)	(3)s only) avail	ał
Ŭ	for public inspection. Indicate how you made these available. Check all that apply.		(0)0 01119	Juvun	u
		in on Schedule O)			
0		,	and fine	noial	
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, or textments available to the public during the tax user	connict of interest policy,	anu final	icial	
0	statements available to the public during the tax year.	and an all war a stud			
20	State the name, address, and telephone number of the person who possesses the organization's b	books and records			
	MARJORIE RICH - 231-360-0053				
	3962 THREE MILE RD. N, TRAVERSE CITY, MI 49686			0000	
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	7 7		1		
10	731 792967 12197 2022.04010 GENERATIONS AE	IEAD	121	197	

Part VII	Compensation of Officers,	Directors,	Trustees,	Key Employees,	Highest	Compensated
	Employees, and Independe	ent Contra	ctors			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)		
Name and title	Average	Average F					one	Reportable	Reportable	Estimated		
	hours per	box	ox, unless person is both an officer and a director/trustee)			is bot	h an	compensation	compensation	amount of		
	week					1		from	from related	other		
	(list any hours for	irecto						the	organizations (W-2/1099-MISC/	compensation from the		
	related	e or d	tee			sated		organization (W-2/1099-MISC/	1099-NEC)	organization		
	organizations	truste	al trus		yee	mpen		1099-NEC)	1000 (120)	and related		
	below	Individual trustee or director	In stitutional trustee	5	Key employee	est co oyee	er	,		organizations		
	line)	Indivi	Instit	Officer	Keye	Highest compensated employee	Former			-		
(1) MARJORIE RICH	40.00											
EXECUTIVE DIRECTOR				X				74,077.	0.	1,426.		
(2) MARSHA SMITH	4.00											
PAST CHAIR				X				0.	0.	0.		
(3) ALISON METIVA	4.00											
VICE CHAIR		1		X				0.	0.	0.		
(4) ROBERT COONEY	2.00											
SECRETARY				X				0.	0.	0.		
(5) REV. HOMER NYE	2.00											
DIRECTOR		X						0.	0.	0.		
(6) LAUREN FLYNN	2.00											
DIRECTOR		X						0.	0.	0.		
(7) CAMILLE GOULDING	4.00											
TREASURER				Х				0.	0.	0.		
(8) BRIANNA BAILEY	2.00											
DIRECTOR		Х						0.	0.	0.		
(9) SARA WYCOFF MCCAULEY	2.00											
DIRECTOR		Х						0.	0.	0.		
(10) KATHERINE GREENE	4.00											
CHAIR				х				0.	0.	0.		
(11) MIAYA RUNNING	2.00									_		
DIRECTOR		х						0.	0.	0.		
		<u> </u>										
232007 12-13-22						0				Form 990 (2022)		

8

Form 990 (2022) GENERATIONS AHEAD 84-4								84-426	6286 Page 8		
Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
	(A) Name and title	(B) (C) Average hours per week officer and a director/trustee)					than c is both	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
	Subtotal Total from continuation sheets to Part VI Total (add lines 1b and 1c) Total number of individuals (including but n compensation from the organization	I, Section A						•	74,077. 0. 74,077. eceived more than \$100	0 0 0,000 of reportable	• 0.
3 4	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i> For any individual listed on line 1a, is the su	<i>uch individual</i> Im of reportabl	 le co	omp	ensa	ation	and	otł	her compensation from	the organization	3 X
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," com</i> tion B. Independent Contractors	accrue comper	nsat	ion f	rom	any	unre	elat	ed organization or indiv	idual for services	4 X 5 X
1	Complete this table for your five highest co the organization. Report compensation for									. , .	nsation from
	(A) Name and business	address	NC	ONE	2			+	(B) Description of s	ervices	(C) Compensation
								_			
2	Total number of independent contractors (ii \$100,000 of compensation from the organiz	•	ot lii	mite	d to	thos (~	ted	above) who received n	nore than	Form 990 (2022)

232008 12-13-22

			2022) GENERATIONS	Α	HEAD			84-4266	286 Page 9
Pa	rt V	111	I Statement of Revenue						
			Check if Schedule O contains a respo	nse	or note to any lin	e in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated	(D) Revenue excluded
ts ts	1	а	Federated campaigns 1a						
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b						
S, G			Fundraising events 1c						
Sift lar J			Related organizations 1d						
imi)			Government grants (contributions) 1e		75,059.				
rior S		f	All other contributions, gifts, grants, and						
Oth			similar amounts not included above 1f		302,059.				
ont nd (-	Noncash contributions included in lines 1a-1f		44,671.	277 110			
<u>a</u> O		h	Total. Add lines 1a-1f			377,118.			
			DROCDAM DEVENUES		Business Code 624100	557.	557.		
Program Service Revenue	2		PROGRAM REVENUES	_	024100	557.	557.		
Servine		b		_					
Ner a		c d		_					
Be		u e		_					
Pro			All other program service revenue	_					
						557.			
	3		Investment income (including dividends, ir						
			other similar amounts)						
	4		Income from investment of tax-exempt bo	nd p	roceeds				
	5		Royalties						
			(i) Real		(ii) Personal				
			Gross rents 6a						
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss) Gross amount from sales of (i) Securiti		(ii) Other				
	'	d	assets other than inventory 7a		134.				
		h	Less: cost or other basis						
an			and sales expenses 7b		Ο.				
evenue		с	Gain or (loss) 7c		134.				
Ê			Net gain or (loss)			134.	134.		
Other			Gross income from fundraising events (not						
ð			including \$ of						
			contributions reported on line 1c). See						
			,	8a					
			Less: direct expenses	8b					
			Net income or (loss) from fundraising even						
	9	a	Gross income from gaming activities. See	9a					
		h	Part IV, line 19 Less: direct expenses	9a 9b					
			Net income or (loss) from gaming activities						
			Gross sales of inventory, less returns						
			and allowances	10a					
		b		10b					
		с	Net income or (loss) from sales of inventor	у					
S					Business Code				
leor	11	а							
Miscellaneous Revenue		b		_					
Sce	'	C		_					
ž			All other revenue						
	12	e	Total. Add lines 11a-11d Total revenue. See instructions			377,809.	691.	0.	0.
23200	9 12-	13							Form 990 (2022
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84-4266286

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Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) (B) (C) (A) Do not include amounts reported on lines 6b. Program service expenses Total expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses 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 Benefits paid to or for members 4 5 Compensation of current officers, directors, 74,077. 48,125. 18,729. 7,223. trustees, and key employees 6 Compensation not included above to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 82,178. 12,334. 126,492. 31,980. 7 Other salaries and wages Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) 3,810. 930. 2,880. Other employee benefits 9 16,534. 10,949. 3,975. 1,610. Payroll taxes 10 Fees for services (nonemployees): 11 a Management b Legal Accounting С 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, q 100. 9,600. 9,500 column (A), amount, list line 11g expenses on Sch O.) 2,560. 615. 1,177. 768. Advertising and promotion 12 2,879. 4,177. 816. 482. Office expenses 13 14 Information technology Royalties 15 16 Occupancy 9. 9. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... 1,161. 649. 512. Conferences, conventions, and meetings 19 Interest 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 339. 2,004. 1,665. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 46,986. 46,986. CLIENT SUPPORT а CAREER SUPPORT 4,658. 4,658. h 3,553. **GROUP ACTIVITY** 3,553. С CLIENT TRANSPORTATION 3,053. 3,029. 24. d 1,792. 7,574. 3,825. 1,957. All other expenses е 306,248. 204,728. 77,146. 24,374. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

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Form **990** (2022)

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		Check if Schedule O contains a response or not	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		234,935.	1	293,962.
	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				
		trustee, key employee, creator or founder, subst				
		controlled entity or family member of any of thes			5	
	6	Loans and other receivables from other disgualif				
		under section 4958(f)(1)), and persons described			6	
ŝ	7	Notes and loans receivable, net	F		7	
Assets	8	Inventories for sale or use			8	
¥	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other	Γ			
		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 1			12	
	13	Investments - program-related. See Part IV, line 1			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equa		234,935.	16	293,962.
	17	Accounts payable and accrued expenses	34.	17		
	18	Grants payable		18		
	19	Deferred revenue		12,500.	19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete F	Part IV of Schedule D		21	
es	22	Loans and other payables to any current or form	er officer, director,			
Liabilities		trustee, key employee, creator or founder, subst	antial contributor, or 35%			
iab		controlled entity or family member of any of thes	e persons		22	
-	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	I third parties		24	
	25	Other liabilities (including federal income tax, pay	ables to related third			
		parties, and other liabilities not included on lines	17-24). Complete Part X			
		of Schedule D	·····	10 524	25	
	26	Total liabilities. Add lines 17 through 25		12,534.	26	0.
ŝ		Organizations that follow FASB ASC 958, che	ck here X			
nce		and complete lines 27, 28, 32, and 33.		000 401		
ala	27	Net assets without donor restrictions		222,401.	27	268,462.
dB	28	Net assets with donor restrictions			28	25,500.
n		Organizations that do not follow FASB ASC 9	58, check here			
Net Assets or Fund Balances		and complete lines 29 through 33.				
ŝts	29	Capital stock or trust principal, or current funds			29	
SSE	30	Paid-in or capital surplus, or land, building, or eq	F		30	
∋tA	31	Retained earnings, endowment, accumulated inc	F	222 101	31	
ž	32	Total net assets or fund balances		222,401.	32	293,962.
	33	Total liabilities and net assets/fund balances		234,935.	33	293,962.

Form 990 (2022)

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GENERATIONS AHEAD Part X Balance Sheet

Form	1990 (2022) GENERATIONS AHEAD	84-4260	5286	Pag	je 12
Pa	rt 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	377		
2	Total expenses (must equal Part IX, column (A), line 25)	2	306		
3	Revenue less expenses. Subtract line 2 from line 1	3			61.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	222	, 4	01.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			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	293	, 9	62.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				/es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	• O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e 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 oversight of the	e 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 Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				I
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

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Department of the Treasury

Internal Revenue Service

(Form 990)

Total

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the	e organization
-------------	----------------

Namo	e of t	he organization							identification number		
Par	+ 1	Reason for Public	RATIONS AH		omplata ti	hia nant \ C			4-4266286		
								s.			
ſ	rgan	ization is not a private found									
1		A church, convention of ch				on 170(b)(1)(A)(I).				
2 [A school described in sect									
3 L		A hospital or a cooperative						<i></i>			
4 L		A medical research organiz	ation operated in co	onjunction with a hospital	describe	d in sectio	on 170(b)(1)(A)	(III). Enter	the hospital's name,		
- [city, and state:									
5 [An organization operated for		ollege or university owned	d or opera	ted by a g	overnmental u	nit descrit	bed in		
•		 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 									
6 L											
7 [An organization that norma		antial part of its support i	rom a gov	rernmenta	l unit or from th	ne general	public described in		
o [section 170(b)(1)(A)(vi). (C									
8		A community trust describe									
9 [An agricultural research org									
		or university or a non-land-g	grant college of agric	culture (see instructions).	Enterthe	name, cit	y, and state of	the collec	le or		
10	Х	university: An organization that norma	lly received (1) more	than 22 1/20/ of its own	nort from	oontributir	no momborok	in face o	nd areas respire from		
	23										
		activities related to its exen									
		income and unrelated busin See section 509(a)(2). (Con				esses acqu	lifed by the org	garnzation	alter Julie 30, 1975.		
11 [An organization organized a		eively to test for public sa	faty Saa	saction 5	19 (2)(4)				
12		An organization organized a	-	•	•			urry out the	nurnoses of one or		
		more publicly supported or		•	•		-	•	• •		
		lines 12a through 12d that	-								
а		Type I. A supporting orga						-	/ aivina		
		the supported organization	-	-	•						
		organization. You must c			,,						
b		Type II. A supporting org	-		tion with if	ts support	ed organizatio	n(s). by ha	avina		
		control or management o	-				•		-		
		organization(s). You mus			·						
с] Type III functionally inte			in connec	tion with,	and functional	ly integrat	ed with,		
		its supported organizatio							·		
d		Type III non-functionally						ted organ	ization(s)		
		that is not functionally int	tegrated. The organi	zation generally must sat	tisfy a dist	ribution re	quirement and	an attent	iveness		
		requirement (see instruct	ions). You must co	mplete Part IV, Sections	A and D	, and Part	v .				
е		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	а Туре I, Туре	II, Type III			
		functionally integrated, or	r Type III non-functio	onally integrated support	ing organi	zation.					
f	Ente	r the number of supported o	organizations								
g		ride the following information									
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your govern	anization listed ing document?	(v) Amount of	,	(vi) Amount of other		
		organization		above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)		

	(Corm		2022
Schedule A		99U)	2022

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
	Amounts from line 4						
8	Gross income from interest,						
-	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
Ū	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities	etc. (see instructi	ons)			12	
	First 5 years. If the Form 990 is for th			fourth or fifth tax			
	organization, check this box and sto						
Sec	ction C. Computation of Publ		rcentage				
-	Public support percentage for 2022 (column (f))		14	%
	Public support percentage from 2021					15	%
	33 1/3% support test - 2022. If the					nore, check t	his box and
	stop here. The organization qualifies	as a publicly supr	orted organizatio	n			
b	33 1/3% support test - 2021. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact						
	meets the facts-and-circumstances te			•			
b	10% -facts-and-circumstances tes	•			•		
~	more, and if the organization meets the						
	organization meets the facts-and-circ						
18	Private foundation. If the organization						
	in the organization			,,, 0, 17			ula A (Earm 000) 2022

Schedule A (Form 990) 2022

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Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")			250,020.	261,185.	377,809.	889,014.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					691.	691.
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5			250,020.	261,185.	378,500.	889,705.
7a	Amounts included on lines 1, 2, and						0
	3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0
_	amount on line 13 for the year						0.
	Add lines 7a and 7b						889,705.
Sec	Public support. (Subtract line 7c from line 6.)						005,705.
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(a) 2022	(f) Total
	Amounts from line 6	(a) 2010	(b) 2013	250,020.	(d)2021 261,185.	(e) 2022 378,500.	(f) Total 889,705.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources			300.			300.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b			300.			300.
	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						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)			250,320.	261,185.	378,500.	890,005.
	First 5 years. If the Form 990 is for th	1	rst, second, third,				on,
	check this box and stop here						X
	tion C. Computation of Publ						
	Public support percentage for 2022 (column (f))		15	%
	Public support percentage from 202					16	%
Sec	ction D. Computation of Inve	stment Incom	e Percentage				
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2022. If the						7 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che	eck this box and st	op here. The orga	anization qualifies a	as a publicly suppo	orted organization	
20	Private foundation. If the organization	on did not check a	box on line 14, 19	9a, or 19b, check th	his box and see ins		
23202	3 12-09-22			16		Schedule A	(Form 990) 2022

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2022.04010 GENERATIONS AHEAD

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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|--|

Part IV

1

2

1.4

...

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

effectively operated, supervised, or controlled the organization's activities. If the organization had more than one sup organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated amon	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one of more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officer directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

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

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

Section E. Type III Functionally Integrated Supporting Organizations

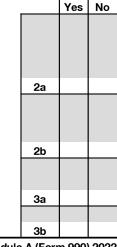
1	Check the box next to the method that the organization used to satisfy the Integral Pa	art Test during the veafsee instructions).

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. *Complete* **line 3** *below*. b
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? 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.
- 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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

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Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 GENERATIONS AHEAD

	rt V Type III Non-Functionally Integrated 509(a)(3) Support			
1	Check here if the organization satisfied the Integral Part Test as a qualify	-		Part VI). See instruction
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.	1
Sect	ion 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	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supportina ord	anization (see

instructions).

Schedule A (Form 990) 2022

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Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sect	ion D	- Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes 1						
2	Amou	unts paid to perform activity that directly furthers exemp					
	orgar	nizations, in excess of income from activity	2				
3		nistrative expenses paid to accomplish exempt purpose	es of supported organization	าร	3		
4		unts paid to acquire exempt-use assets			4		
5	Quali	fied set aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6		r distributions (describe in Part VI). See instructions.			6		
7	Total	annual distributions. Add lines 1 through 6.			7		
8		butions to attentive supported organizations to which th	ne organization is responsive	e			
		ide details in Part VI). See instructions.	0		8		
9	•	butable amount for 2022 from Section C, line 6			9		
10		B amount divided by line 9 amount			10		
		,	(i)	(ii)		(iii)	
Secti	ion E ·	- Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	IS	Distributable Amount for 2022	
1	Distri	butable amount for 2022 from Section C, line 6					
2	Unde	rdistributions, if any, for years prior to 2022 (reason-					
	able o	cause required - explain in Part VI). See instructions.					
3	Exce	ss distributions carryover, if any, to 2022					
а	From	2017					
b	b From 2018						
с	From	2019					
d	From	2020					
е	e From 2021						
f	Total	of lines 3a through 3e					
g	Appli	ed to underdistributions of prior years					
h	Appli	ed to 2022 distributable amount					
i	Carry	over from 2017 not applied (see instructions)					
j	Rema	ainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distri	butions for 2022 from Section D,					
	line 7	: \$					
а	Appli	ed to underdistributions of prior years					
		ed to 2022 distributable amount					
		ainder. Subtract lines 4a and 4b from line 4.					
-		aining underdistributions for years prior to 2022, if					
		Subtract lines 3g and 4a from line 2. For result greater					
		zero, explain in Part VI. See instructions.					
6		aining underdistributions for 2022. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in						
	Part VI. See instructions.						
7		ss distributions carryover to 2023. Add lines 3j					
-	and 4						
8		kdown of line 7:					
		ss from 2018					
		ss from 2019					
		ss from 2020					
		ss from 2021					
		ss from 2022					

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

	(Form 990) 2022	GENERATIO	ONS	AHEAD			84-426	6286 Page 8
Part VI	Part IV, Section A, line 1; Part IV, Sect	Information. Provide lines 1, 2, 3b, 3c, 4b, 4c, ion D, lines 2 and 3; Part 6, and 8; and Part V, Sec	5a, 6 IV, S	9a, 9b, 9c, 11a, 1 ection E, lines 1c, 2	1b, and 11c; Part I\ 2a, 2b, 3a, and 3b; F	/, Section B, lines Part V, line 1; Part	1 and 2; Part IV V, Section B, lir	', Section C, ne 1e; Part V,
								/
232028 12-09-:)70731	²² 792967 123	197 2	021		21 ENERATIONS	ΑΗΈΑΟ	Schedule A	(Form 990) 202
								/

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

22

Department of the Treasury Internal Revenue Service

Dout

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection Employer identification number

84 - 4266286

r

Name of the organization

GENERATIONS AHEAD

Pa	TI Types of Property							
		(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of de		ing	
		applicable	contributions or items contributed	amounts reported on Form 990, Part VIII, line 1g	noncash contribu	ution ar	nount	S
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	Х		44,671.	FMV			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz							
	for which the organization completed Form 828	33, Part V, D	Donee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	5 ,			
	must hold for at least 3 years from the date of t							37
								Х
	b If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p				itions?	31	X	
32a	Does the organization hire or use third parties of contributions?		0	<i>, , , , , , , , , ,</i>		32a		х
b	If "Yes," describe in Part II.							

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2022

232141 09-09-22

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

GENERATIONS AHEAD

Employer identification number 84-4266286

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

STABILITY, AND RAISING HEALTHY CHILDREN.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND THEN A COPY OF APPROVED

FORM IS PROVIDED TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C:

CONFLICTS OF INTEREST ARE NOTED PRIOR TO AUTHORIZING A TRANSACTION WHEREIN

A CONFLICT MAY EXIST AND A DETERMINATION IS MADE IF IT IS IN THE

ORGANIZATION'S BEST INTEREST TO PROCEED WITH THAT TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15:

STUDY WAS COMPLETED BY GOVERNANCE COMMITTEE BOARD MEMBERS OF REGIONAL

EXECUTIVE DIRECTORS TO DETERMINE SALARY. EXECUTIVE DIRECTOR EVALUATED

COMPARABLE POSITIONS IN AREA TO SET EMPLOYEE'S SALARY.

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

UPON REQUEST. THE 990 IS AVAILABLE ON THE ORGANIZATION'S WEBSITE.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 10-28-22

Schedule O (Form 990) 2022

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