

Return of Organization Exempt From Income Tax

Form 990

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

2024

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning JUL 1, 2024 and ending JUN 30, 2025

B Check if applicable: C Name of organization: TALLER SAN JOSE HOPE BUILDERS D Employer identification number: 59-3816355 E Telephone number: 714-543-5105 G Gross receipts \$: 4,020,686. H(a) Is this a group return for subordinates? H(b) Are all subordinates included? I Tax-exempt status: J Website: WWW.TSJHOPEBUILDERS.ORG K Form of organization: L Year of formation: 2005 M State of legal domicile: CA

Part I Summary

Table with 3 columns: Line number, Description, and Amount. Rows include: 1-7a Summary, 8-12 Revenue, 13-19 Expenses, 20-22 Net Assets or Fund Balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of officer: ZAJID COVA, CONTROLLER. Preparer: DIANA ZAMBRANO, CPA. Firm: RJI INTERNATIONAL CPAS.

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: HOPE BUILDERS EMPOWERS DISADVANTAGED YOUNG ADULTS WITH THE MENTORSHIP, JOB SKILLS AND LIFE SKILLS TRAINING THAT MEETS THE NEEDS OF EMPLOYERS.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 495,463. including grants of \$) (Revenue \$) APPLICANT: THE APPLICANT STAGE INCLUDES ALL THOSE WHO SUBMITTED AN APPLICATION TO HOPE BUILDERS. APPLICANTS NEED TO BE BETWEEN THE AGES OF 18-28, WITH RIGHT-TO-WORK DOCUMENTS. HOPE BUILDERS CASTS A WIDE NET TO RECRUIT AS MANY APPLICANTS AS POSSIBLE. WE THOROUGHLY VET AND SCREEN EACH APPLICANT TO IDENTIFY THOSE WHO ARE MOTIVATED TO CHANGE THEIR CURRENT CIRCUMSTANCES AND EXCITED TO START BUILDING THEIR CAREER. APPLICANTS, WHO COMPLETE ALL STEPS OF THE PROCESS, ARE INVITED TO ORIENTATION. AN APPLICANT WHO COMPLETES THIS STAGE MUST AGREE TO THE TRAINEE PLEDGE AND RENEW THEIR COMMITMENT TO BECOMING A HOPE BUILDER.

4b (Code:) (Expenses \$ 1,949,402. including grants of \$ 448,085.) (Revenue \$) TRAINEE: THE TRAINEE STAGE INCLUDES THOSE WHO SUCCESSFULLY COMPLETE THE APPLICATION PROCESS AND ENROLL IN ONE OF THE JOB TRAINING PATHWAYS (CONSTRUCTION, CHILD DEVELOPMENT, OR HEALTHCARE). THE GOAL OF THIS STAGE IS TO GET YOUNG ADULTS WORKFORCE READY. THE TRAINING SIMULATES THE WORKPLACE AND REINFORCES EMPLOYER EXPECTATIONS. HOPE BUILDERS BELIEVES THAT SKILLS TRAINING MUST ALSO INCLUDE COACHING AND MENTORING TO ADDRESS THE UNDERLYING BARRIERS TO SUCCESSFUL EMPLOYMENT. EACH TRAINING ACADEMY INCLUDES LIFE SKILLS TRAINING, CASE MANAGEMENT, BASIC SKILL ENRICHMENT, EMPLOYMENT READINESS, AND TECHNICAL SKILLS. TRAINEES RECEIVE A WEEKLY \$100 STIPEND AND HAVE ACCESS TO TRANSPORTATION AND CHILDCARE VOUCHERS, AS NEEDED. WORKFORCE READINESS IS ASSESSED WEEKLY. THOSE WHO HAVE NOT YET MET REQUIRED LEVEL OR WHO EXPERIENCE A SET BACK

4c (Code:) (Expenses \$ 1,443,098. including grants of \$) (Revenue \$) CAREER BUILDER: THE CAREER BUILDER STAGE INCLUDES THE YOUNG ADULTS WHO HAVE SUCCESSFULLY MET WORKFORCE READINESS STANDARDS AND ARE NOW TAKING STEPS TO ENTER THE WORKFORCE. WORKFORCE READY CANDIDATES WORK CLOSELY WITH STAFF TO SECURE A QUALITY JOB WITHIN A CAREER PATHWAY. THROUGH HBCC, EMPLOYERS WHO CAN OFFER A PATHWAY TO A LIVING WAGE ARE RECRUITED AND MATCHED WITH WORKFORCE READY CANDIDATES. HBCC FOCUSES ON SUPPORTING EMPLOYERS WITH A PIPELINE OF ADEQUATE AND RELIABLE WORKFORCE. A CAREER BUILDER WHO COMPLETES THIS STAGE MUST AGREE TO THE HOPE BUILDER PLEDGE AND RENEW THEIR COMMITMENT TO BECOMING A HOPE BUILDER.

HOPE BUILDER: THE HOPE BUILDER STAGE INCLUDES THOSE YOUNG ADULTS, WHO HAVE PROVEN THAT THEY HAVE DEVELOPED THE SKILLS NEEDED TO REMAIN IN A

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 3,887,963.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefits, and Schedule O completion.

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 []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No columns. Includes rows for employee counts (2a), tax returns (2b), unrelated business income (3a), foreign accounts (4a), prohibited transactions (5a-5c), charitable contributions (6a-6b), deductible contributions (7a-7h), donor advised funds (8-9), 501(c)(7) organizations (10), 501(c)(12) organizations (11), 4947(a)(1) trusts (12a-12b), 501(c)(29) health insurers (13a-13c), tanning services (14a-14b), parachute payments (15), excise tax (16), and 501(c)(21) organizations (17).

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (14), 1b (14), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b, 11a (X), 11b, 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
ZAJID COVA - 714-543-5105
801 N. BROADWAY, SANTA ANA, CA 92701

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) SHAWNA SMITH GOTREAU SECRETARY | 40.00 5.00 | X | | X | | | | 183,481. | 0. | 2,752. |
| (2) CHRISTA SHEEHAN FORMER DEPUTY DIRECTOR | 40.00 | | | | | X | | 179,615. | 0. | 2,267. |
| (3) AMBER S. RIZKALLA EMPLOYEE | 40.00 | | | | X | | | 136,246. | 0. | 6,594. |
| (4) LAURA STAGNER EMPLOYEE | 40.00 | | | | X | | | 107,028. | 0. | 5,180. |
| (5) ZAJID COVA CONTROLLER | 40.00 | X | | X | | | | 104,900. | 0. | 5,077. |
| (6) ALEX CALABRESE VICE CHAIR | 1.00 | X | | X | | | | 0. | 0. | 0. |
| (7) CARLOS GONZALEZ CHAIR | 1.00 | X | | X | | | | 0. | 0. | 0. |
| (8) JEFFREY RANDOLPH DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (9) JON STORBECK DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (10) LISA WEAVER DIRECTOR | 1.00 40.00 | X | | | | | | 0. | 0. | 0. |
| (11) MARIA ELENA PERALES DIRECTOR | 1.00 40.00 | X | | | | | | 0. | 0. | 0. |
| (12) MIKE CAWLINA DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (13) MIKE SMITH TREASURER | 1.00 | X | | X | | | | 0. | 0. | 0. |
| (14) OLIVA LINDSAY DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (15) TARA COWELL DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (16) TIM BLETT DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (17) ELIZABETH MIRZA DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |

Part VIII Statement of Revenue

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

| | | | | (A) | (B) | (C) | (D) | |
|--|---|------------------------------|----------------------|---------------|------------------------------------|----------------------------|--|--|
| | | | | Total revenue | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under sections 512 - 514 | |
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a Federated campaigns | 1a | | | | | | |
| | b Membership dues | 1b | | | | | | |
| | c Fundraising events | 1c | 636,415. | | | | | |
| | d Related organizations | 1d | | | | | | |
| | e Government grants (contributions) | 1e | 1,075,765. | | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f | 1,803,083. | | | | | |
| | g Noncash contributions included in lines 1a-1f | 1g | \$ 300. | | | | | |
| | h Total. Add lines 1a-1f | | | 3,515,263. | | | | |
| | Program Service Revenue | 2 a FUNDED CURRICULUM | Business Code | 611600 | 216,463. | 216,463. | | |
| b INCOME FROM SUBSIDIARY | | | 611600 | 73,987. | 73,987. | | | |
| c | | | | | | | | |
| d | | | | | | | | |
| e | | | | | | | | |
| f All other program service revenue | | | 513190 | | | | | |
| g Total. Add lines 2a-2f | | | | 290,450. | | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | | 213,198. | 213,198. | | | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | | | |
| | 5 Royalties | | | | | | | |
| | 6 a Gross rents | 6a | (i) Real | 1,775. | | | | |
| | | | (ii) Personal | | | | | |
| | | | | | | | | |
| | b Less: rental expenses | 6b | | 0. | | | | |
| | c Rental income or (loss) | 6c | | 1,775. | | | | |
| | d Net rental income or (loss) | | | 1,775. | 1,775. | | | |
| | 7 a Gross amount from sales of assets other than inventory | 7a | (i) Securities | | | | | |
| | | | (ii) Other | | | | | |
| | | | | | | | | |
| | b Less: cost or other basis and sales expenses | 7b | | | | | | |
| | c Gain or (loss) | 7c | | | | | | |
| d Net gain or (loss) | | | | | | | | |
| 8 a Gross income from fundraising events (not including \$ 636,415. of contributions reported on line 1c). See Part IV, line 18 | 8a | | | | | | | |
| | | | | | | | | |
| | | | 0. | | | | | |
| b Less: direct expenses | 8b | | 0. | | | | | |
| c Net income or (loss) from fundraising events | | | 0. | | | | | |
| 9 a Gross income from gaming activities. See Part IV, line 19 | 9a | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| b Less: direct expenses | 9b | | | | | | | |
| c Net income or (loss) from gaming activities | | | | | | | | |
| 10 a Gross sales of inventory, less returns and allowances | 10a | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| b Less: cost of goods sold | 10b | | | | | | | |
| c Net income or (loss) from sales of inventory | | | | | | | | |
| Miscellaneous Revenue | 11 a | Business Code | | | | | | |
| | b | | | | | | | |
| | c | | | | | | | |
| | d All other revenue | | | | | | | |
| | e Total. Add lines 11a-11d | | | | | | | |
| 12 Total revenue. See instructions | | | | 4,020,686. | 505,423. | 0. | 0. | |

Part IX Statement of Functional Expenses

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

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | | | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | 448,085. | 448,085. | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 711,271. | 495,641. | 87,648. | 127,982. |
| 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 3,229,289. | 2,250,293. | 397,938. | 581,058. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 Other employee benefits | | | | |
| 10 Payroll taxes | | | | |
| 11 Fees for services (nonemployees): | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | | | | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) | 475,397. | 125,393. | 330,273. | 19,731. |
| 12 Advertising and promotion | 214,578. | 58,282. | 9,936. | 146,360. |
| 13 Office expenses | | | | |
| 14 Information technology | 41,870. | 38,388. | 2,946. | 536. |
| 15 Royalties | | | | |
| 16 Occupancy | 294,316. | 262,426. | 24,526. | 7,364. |
| 17 Travel | | | | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | | | | |
| 20 Interest | 21,355. | | 21,355. | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 74,393. | 71,804. | 2,191. | 398. |
| 23 Insurance | 40,998. | 17,339. | 23,499. | 160. |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) | | | | |
| a PROGRAM SUPPLIES & RELA | 80,009. | 76,444. | | 3,565. |
| b PRINTING & OFFICE SUPPL | 46,944. | 43,783. | 3,161. | |
| c SPECIAL EVENTS | 35,243. | | | 35,243. |
| d OTHER EXPENSES | 10,700. | 85. | 1,669. | 8,946. |
| e All other expenses | | | | |
| 25 Total functional expenses. Add lines 1 through 24e | 5,724,448. | 3,887,963. | 905,142. | 931,343. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) | | | | |

Part X Balance Sheet

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

| | | (A) | | (B) |
|--|--|-----------------------|------------|-------------|
| | | Beginning of year | | End of year |
| Assets | 1 Cash - non-interest-bearing | 428,093. | 1 | 405,599. |
| | 2 Savings and temporary cash investments | 0. | 2 | |
| | 3 Pledges and grants receivable, net | 1,552,299. | 3 | 1,224,915. |
| | 4 Accounts receivable, net | 447,004. | 4 | 266,542. |
| | 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | 1,832. | 8 | 4,449. |
| | 9 Prepaid expenses and deferred charges | | 9 | |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 2,608,925. | | |
| | b Less: accumulated depreciation | 10b 1,794,466. | | |
| | 11 Investments - publicly traded securities | 880,334. | 10c | 814,459. |
| | 12 Investments - other securities. See Part IV, line 11 | 3,087,592. | 11 | 3,019,327. |
| | 13 Investments - program-related. See Part IV, line 11 | | 12 | |
| | 14 Intangible assets | | 13 | |
| | 15 Other assets. See Part IV, line 11 | 2,119,318. | 14 | 1,758,732. |
| 16 Total assets. Add lines 1 through 15 (must equal line 33) | 8,516,472. | 15 | 7,494,023. | |
| 17 Accounts payable and accrued expenses | 519,616. | 16 | 429,151. | |
| 18 Grants payable | | 17 | | |
| 19 Deferred revenue | | 18 | | |
| 20 Tax-exempt bond liabilities | | 19 | | |
| 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 20 | | |
| 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 21 | | |
| 23 Secured mortgages and notes payable to unrelated third parties | | 22 | | |
| 24 Unsecured notes and loans payable to unrelated third parties | | 23 | | |
| 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | 299,541. | 24 | 834,869. | |
| 26 Total liabilities. Add lines 17 through 25 | 819,157. | 25 | 1,264,020. | |
| 26 Total liabilities. Add lines 17 through 25 | | 26 | | |
| Net Assets or Fund Balances | Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33. | | | |
| | 27 Net assets without donor restrictions | 5,366,209. | 27 | 4,910,072. |
| | 28 Net assets with donor restrictions | 2,331,106. | 28 | 1,319,931. |
| | Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33. | | | |
| | 29 Capital stock or trust principal, or current funds | | 29 | |
| | 30 Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| | 31 Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| | 32 Total net assets or fund balances | 7,697,315. | 32 | 6,230,003. |
| 33 Total liabilities and net assets/fund balances | 8,516,472. | 33 | 7,494,023. | |

Part XI Reconciliation of Net Assets

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

| | | | |
|----|--|----|-------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 4,020,686. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 5,724,448. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -1,703,762. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 7,697,315. |
| 5 | Net unrealized gains (losses) on investments | 5 | 236,450. |
| 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 | 6,230,003. |

Part XII Financial Statements and Reporting

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

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

Form 990 (2024)

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

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

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities, whether or not the business is regularly carried on; 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows include: 14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)); 15 Public support percentage from 2023 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization; b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization; 17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization; b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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

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

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2023 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

19b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 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

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

| Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
|---------------------------------|--|----------------|-----------------------------|
| 1 | Net short-term capital gain | 1 | |
| 2 | Recoveries of prior-year distributions | 2 | |
| 3 | Other gross income (see instructions) | 3 | |
| 4 | Add lines 1 through 3. | 4 | |
| 5 | Depreciation and depletion | 5 | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | |
| 7 | Other expenses (see instructions) | 7 | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | |

| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
|----------------------------------|---|----------------|-----------------------------|
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | |
| a | Average monthly value of securities | 1a | |
| b | Average monthly cash balances | 1b | |
| c | Fair market value of other non-exempt-use assets | 1c | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | |
| e | Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>): | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | |
| 3 | Subtract line 2 from line 1d. | 3 | |
| 4 | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | 4 | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | |
| 6 | Multiply line 5 by 0.035. | 6 | |
| 7 | Recoveries of prior-year distributions | 7 | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | |

| Section C - Distributable Amount | | | Current Year |
|----------------------------------|---|---|--------------|
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | |
| 2 | Enter 0.85 of line 1. | 2 | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | |
| 4 | Enter greater of line 2 or line 3. | 4 | |
| 5 | Income tax imposed in prior year | 5 | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | 6 | |
| 7 | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). | | |

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

| Section D - Distributions | | Current Year |
|---------------------------|--|--------------|
| 1 | Amounts paid to supported organizations to accomplish exempt purposes | 1 |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | 2 |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | 3 |
| 4 | Amounts paid to acquire exempt-use assets | 4 |
| 5 | Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) | 5 |
| 6 | Other distributions (describe in Part VI). See instructions. | 6 |
| 7 | Total annual distributions. Add lines 1 through 6. | 7 |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. | 8 |
| 9 | Distributable amount for 2024 from Section C, line 6 | 9 |
| 10 | Line 8 amount divided by line 9 amount | 10 |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2024 | (iii) Distributable Amount for 2024 |
|---|---|--|---|
| 1 | Distributable amount for 2024 from Section C, line 6 | | |
| 2 | Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions. | | |
| 3 | Excess distributions carryover, if any, to 2024 | | |
| a | From 2019 | | |
| b | From 2020 | | |
| c | From 2021 | | |
| d | From 2022 | | |
| e | From 2023 | | |
| f | Total of lines 3a through 3e | | |
| g | Applied to under distributions of prior years | | |
| h | Applied to 2024 distributable amount | | |
| i | Carryover from 2019 not applied (see instructions) | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | |
| 4 | Distributions for 2024 from Section D, line 7: \$ | | |
| a | Applied to underdistributions of prior years | | |
| b | Applied to 2024 distributable amount | | |
| c | Remainder. Subtract lines 4a and 4b from line 4. | | |
| 5 | Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. | | |
| 6 | Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. | | |
| 7 | Excess distributions carryover to 2025. Add lines 3j and 4c. | | |
| 8 | Breakdown of line 7: | | |
| a | Excess from 2020 | | |
| b | Excess from 2021 | | |
| c | Excess from 2022 | | |
| d | Excess from 2023 | | |
| e | Excess from 2024 | | |

Part VI

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

Multiple horizontal lines for supplemental information.

SCHEDULE D
(Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **TALLER SAN JOSE HOPE BUILDERS** Employer identification number **59-3816355**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|-------------------------|--|
| 1 Total number at end of year | | |
| 2 Aggregate value of contributions to (during year) | | |
| 3 Aggregate value of grants from (during year) | | |
| 4 Aggregate value at end of year | | |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included on line 2a | 2c |
| d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

4 Number of states where property subject to conservation easement is located _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 \$ _____

(ii) Assets included in Form 990, Part X \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$ _____

b Assets included in Form 990, Part X \$ _____

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) (Rev. 12-2024)

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

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

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

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

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

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | 3,087,592. | 2,726,969. | 2,465,526. | 2,811,516. | 1,333,887. |
| b Contributions | | | | | 1,000,000. |
| c Net investment earnings, gains, and losses | 331,735. | 360,623. | 261,443. | -345,990. | 477,629. |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | 3,019,327. | 3,087,592. | 2,726,969. | 2,465,526. | 2,811,516. |

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment 100.0000 %
 - b** Permanent endowment _____ %
 - c** Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations? | X | |
| (ii) Related organizations? | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

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

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | 1,065,583. | 518,888. | 546,695. |
| c Leasehold improvements | | 839,422. | 613,915. | 225,507. |
| d Equipment | | 703,920. | 661,663. | 42,257. |
| e Other | | | | |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) | | | | 814,459. |

Part VII Investments - Other Securities

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

| (a) Description | (b) Book value |
|---|----------------|
| (1) HOPE BUILDERS CAREER CONNECTIONS | 1,541,831. |
| (2) PROPERTIES HELD FOR RESALE | 8,000. |
| (3) PREPAID EXPENSES | 60,922. |
| (4) DEPOSITS | 13,500. |
| (5) ROU ASSETS | 123,279. |
| (6) UNBILLED REVENUE | 10,122. |
| (7) PREPAID ANNUAL EVENT EXPENSES | 1,078. |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)) | 1,758,732. |

Part X Other Liabilities

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

| 1. (a) Description of liability | (b) Book value |
|---|----------------|
| (1) Federal income taxes | |
| (2) PREPAID RENT | 1,000. |
| (3) ROU LEASE LIABILITY | 128,917. |
| (4) DEFERRED REVENUE | 104,952. |
| (5) LINE OF CREDIT | 600,000. |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) | 834,869. |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

**SCHEDULE E
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Schools

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or
Form 990-EZ, Part VI, line 48.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

TALLER SAN JOSE HOPE BUILDERS

Employer identification number

59-3816355

Part I

| | YES | NO |
|---|-----|----|
| 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? | X | |
| 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? | X | |
| 3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II | | X |
| SEE PART II | | |
| 4 Does the organization maintain the following: | | |
| a Records indicating the racial composition of the student body, faculty, and administrative staff? | X | |
| b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? | X | |
| c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | X | |
| d Copies of all material used by the organization or on its behalf to solicit contributions? | X | |
| If you answered "No" to any of the above, please explain. If you need more space, use Part II. | | |
| 5 Does the organization discriminate by race in any way with respect to: | | |
| a Students' rights or privileges? | | X |
| b Admissions policies? | | X |
| c Employment of faculty or administrative staff? | | X |
| d Scholarships or other financial assistance? | | X |
| e Educational policies? | | X |
| f Use of facilities? | | X |
| g Athletic programs? | | X |
| h Other extracurricular activities? | | X |
| If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. | | |
| 6a Does the organization receive any financial aid or assistance from a governmental agency? | X | |
| b Has the organization's right to such aid ever been revoked or suspended? | | X |
| If you answered "Yes" on either line 6a or line 6b, explain in Part II. | | |
| 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain in Part II | X | |

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

Schedule E (Form 990) (Rev. 12-2024)

Part II **Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.

LINE 3 - EXPLANATION OF NONDISCRIMINATION POLICY:

TALLER SAN JOSE DID NOT PUBLICIZE ITS RACIALLY NONDISCRIMINATORY POLICY IN THE PRINT OR BROADCAST MEDIA DURING THIS FISCAL YEAR. HOWEVER, IT DID INCLUDE ITS NONDISCRIMINATION POLICY ON ALL SOLICITATION AND APPLICATION MATERIALS. OUR REGISTRATION IS YEAR ROUND, AS CLASSES START EVERY FEW WEEKS. OF OUR ENROLLEES, ONLY 2% DESCRIBE THEMSELVES AS "WHITE, NOT HISPANIC OR LATINO", AND 71% OF OUR ENROLLEES SAY THEY HEARD ABOUT US FROM A FRIEND OR RELATIVE.

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

THE ORGANIZATION RECEIVED GOVERNMENT GRANTS FROM THE CITY OF ANAHEIM, CITY OF SANTA ANA, AND NORTH OC PUBLIC SAFETY TASK FORCE.

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

| | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events (add col. (a) through col. (c)) |
|--|---|---|--------------|------------------------|--|
| | | ANNUAL FALL EVENT CAMPAIGN (event type) | (event type) | NONE (total number) | |
| Revenue | 1 Gross receipts | 636,415. | | | 636,415. |
| | 2 Less: Contributions | 636,415. | | | 636,415. |
| | 3 Gross income (line 1 minus line 2) | | | | |
| Direct Expenses | 4 Cash prizes | | | | |
| | 5 Noncash prizes | | | | |
| | 6 Rent/facility costs | | | | |
| | 7 Food and beverages | | | | |
| | 8 Entertainment | | | | |
| | 9 Other direct expenses | | | | |
| | 10 Direct expense summary. Add lines 4 through 9 in column (d) | | | | |
| 11 Net income summary. Subtract line 10 from line 3, column (d) | | | | | |

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
b If "Yes," explain: _____

**SCHEDULE J
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization **TALLER SAN JOSE HOPE BUILDERS** Employer identification number **59-3816355**

Part I Questions Regarding Compensation

| | Yes | No |
|--|-----------|----------|
| 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) | | |
| b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | 1b | |
| 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? | 2 | |
| 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee | | |
| 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: | | |
| a Receive a severance payment or change-of-control payment? | 4a | X |
| b Participate in or receive payment from a supplemental nonqualified retirement plan? | 4b | X |
| c Participate in or receive payment from an equity-based compensation arrangement? | 4c | X |
| If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. | | |
| Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | | |
| 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: | | |
| a The organization? | 5a | X |
| b Any related organization? | 5b | X |
| If "Yes" on line 5a or 5b, describe in Part III. | | |
| 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: | | |
| a The organization? | 6a | X |
| b Any related organization? | 6b | X |
| If "Yes" on line 6a or 6b, describe in Part III. | | |
| 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III | 7 | X |
| 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III | 8 | X |
| 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? | 9 | |

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

Schedule J (Form 990) (Rev. 12-2024)

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
|---|------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| (1) SHAWNA SMITH GOTREAU SECRETARY | (i) | 183,481. | 0. | 0. | 2,752. | 0. | 186,233. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (2) CHRISTA SHEEHAN FORMER DEPUTY DIRECTOR | (i) | 179,615. | 0. | 0. | 2,267. | 0. | 181,882. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
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| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |

**SCHEDULE O
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization **TALLER SAN JOSE HOPE BUILDERS** Employer identification number **59-3816355**

**FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SKILLS TRAINING THAT MEETS THE NEEDS OF EMPLOYERS.**

**FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
IN READINESS ARE PROVIDED SUPPLEMENTAL SERVICES TO ADDRESS BARRIERS. A
TRAINEE WHO COMPLETES THIS STAGE MUST AGREE TO THE CAREER BUILDER
PLEDGE AND RENEW THEIR COMMITMENT TO BECOMING A HOPE BUILDER.**

**FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
CAREER PATHWAY. HBCC CONTINUES TO OFFER JOB RETENTION SUPPORT AFTER A
JOB PLACEMENT IS SECURED. THESE YOUNG ADULTS JOIN A COMMUNITY OF OTHER
SUCCESSFUL HOPE BUILDERS, WHO HAVE FOUND AND RETAINED A QUALITY JOB THE
KIND THAT PROVIDES A CAREER PATHWAY AND HAS LED TO LIVING-WAGE
EMPLOYMENT. HOPE BUILDERS CONSIDERS SIX MONTHS OF RETENTION IN A CAREER
PATHWAY, WITH A LIVING-WAGE SALARY, TO BE THE ULTIMATE MARKER OF
SUCCESS; RESEARCH TELLS US THAT WHEN SOMEONE IS EMPLOYED FOR SIX
MONTHS, THEY ARE MOST LIKELY TO REMAIN IN THE WORKFORCE. THROUGHOUT
THIS STAGE, STAFF FOLLOWS UP WITH BOTH THE EMPLOYED STUDENT AND THE
EMPLOYER AT SPECIFIC INTERVALS TO ENSURE EMPLOYMENT RETENTION. A HOPE
BUILDER CONTINUES THEIR JOURNEY OF GROWTH OUT IN THE COMMUNITY AND
THEIR COMMITMENT TO THE PROGRAM AS A SPOKESPERSON FOR HOPE BUILDERS.**

**FORM 990, PART VI, SECTION A, LINE 6:
THE ONLY MEMBER OF HOPE BUILDERS CAREER CONNECTIONS IS TALLER SAN JOSE HOPE
BUILDERS.**

**FORM 990, PART VI, SECTION A, LINE 7A:
MEMBERS MUST APPROVE:
1. ANY AMENDMENT TO THE ARTICLES OF INCORPORATION OR BYLAWS
2. APPOINTMENT OR REMOVAL OF THE EXECUTIVE DIRECTOR
3. APPOINTMENT OF UP TO THREE SISTER BOARD MEMBERS
4. DISSOLUTION OF THE CORPORATION
5. SALE OR TRANSFER OF SUBSTANTIALLY ALL THE ASSETS OF THE CORPORATION
6. ANY CHANGE TO THE STRUCTURE OR OPERATION THAT WOULD AFFECT ITS TAX
EXEMPT STATUS.**

**FORM 990, PART VI, SECTION A, LINE 7B:
MEMBERS MUST APPROVE:
1. ANY AMENDMENT TO THE ARTICLES OF INCORPORATION OR BYLAWS
2. APPOINTMENT OR REMOVAL OF THE EXECUTIVE DIRECTOR
3. APPOINTMENT OF UP TO THREE SISTER BOARD MEMBERS
4. DISSOLUTION OF THE CORPORATION
5. SALE OR TRANSFER OF SUBSTANTIALLY ALL THE ASSETS OF THE CORPORATION
6. ANY CHANGE TO THE STRUCTURE OR OPERATION THAT WOULD AFFECT ITS TAX
EXEMPT STATUS.**

**FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 IS PROVIDED ELECTRONICALLY TO ALL BOARD MEMBERS PRIOR TO
FILING, AND REVIEWED IN DETAIL BY THE FINANCE COMMITTEE.**

**FORM 990, PART VI, SECTION B, LINE 12C:
EACH MEMBER OF THE BOARD MUST COMPLETE A CONFLICT OF INTEREST FORM PRIOR TO**

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) (Rev. 12-2024)

| | |
|---|--|
| Name of the organization TALLER SAN JOSE HOPE BUILDERS | Employer identification number 59-3816355 |
|---|--|

ELECTION TO THE BOARD. EACH BOARD MEMBER MUST ALSO COMPLETE A CONFLICT OF INTEREST FORM ANNUALLY.

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

COMPENSATION THE LEADERSHIP TEAM IS APPROVED IN JUNE AS PART OF THE BUDGET PROCESS. COMPARATIVE COMPENSATION DATA IS PROVIDED TO THE BOARD AT THAT TIME. BONUS COMPENSATION IS APPROVED IN OCTOBER FOR THE LEADERSHIP TEAM.

COMPENSATION THE LEADERSHIP TEAM IS APPROVED IN JUNE AS PART OF THE BUDGET PROCESS. COMPARATIVE COMPENSATION DATA IS PROVIDED TO THE BOARD AT THAT TIME. BONUS COMPENSATION IS APPROVED IN OCTOBER FOR THE LEADERSHIP TEAM.

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

GOVERNING DOCUMENTS AND FORM 990S ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE. POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT PROCESS OR SELECTION PROCESS DURING THE TAX YEAR.

**SCHEDULE R
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **TALLER SAN JOSE HOPE BUILDERS** Employer identification number **59-3816355**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|--|-------------------------|---|---------------------|---------------------------|-------------------------------------|
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Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | (g) Section 512(b)(13) controlled entity? | |
|---|-------------------------|---|-------------------------------|---|-------------------------------------|--|----------|
| | | | | | | Yes | No |
| HOPE BUILDERS CAREER CONNECTIONS - 71-1024210, 801 N. BROADWAY, SANTA ANA, CA 92701 | CAREER BUILDING | CALIFORNIA | 501(C)(3) | LINE 12A, I | TALLER SAN JOSE HOPE BUILDERS | | X |
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) (Rev. 1-2025)

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproportionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|--|-------------------------|--|-------------------------------------|---|---------------------------------|--|---|----|---|---|----|--------------------------------|
| | | | | | | | Yes | No | | Yes | No | |
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership | (i) Section 512(b)(13) controlled entity? | |
|--|-------------------------|---|-------------------------------------|--|---------------------------------|--|--------------------------------|---|----|
| | | | | | | | | Yes | No |
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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

| | Yes | No |
|--|-----|----|
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | | X |
| b Gift, grant, or capital contribution to related organization(s) | | X |
| c Gift, grant, or capital contribution from related organization(s) | | X |
| d Loans or loan guarantees to or for related organization(s) | X | |
| e Loans or loan guarantees by related organization(s) | | X |
| f Dividends from related organization(s) | | X |
| g Sale of assets to related organization(s) | | X |
| h Purchase of assets from related organization(s) | | X |
| i Exchange of assets with related organization(s) | | X |
| j Lease of facilities, equipment, or other assets to related organization(s) | | X |
| k Lease of facilities, equipment, or other assets from related organization(s) | | X |
| l Performance of services or membership or fundraising solicitations for related organization(s) | X | |
| m Performance of services or membership or fundraising solicitations by related organization(s) | | X |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | | X |
| o Sharing of paid employees with related organization(s) | | X |
| p Reimbursement paid to related organization(s) for expenses | X | |
| q Reimbursement paid by related organization(s) for expenses | X | |
| r Other transfer of cash or property to related organization(s) | | X |
| s Other transfer of cash or property from related organization(s) | | X |

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

| (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved |
|--------------------------------------|-------------------------------|------------------------|--|
| (1) HOPE BUILDERS CAREER CONNECTIONS | L | 24,000. | CASH VALUE |
| (2) HOPE BUILDERS CAREER CONNECTIONS | P | 221,559. | CASH VALUE |
| (3) HOPE BUILDERS CAREER CONNECTIONS | Q | 433,531. | CASH VALUE |
| (4) HOPE BUILDERS CAREER CONNECTIONS | D | 1,541,831. | CASH VALUE |
| (5) | | | |
| (6) | | | |

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| Asset No. | Description | Date Acquired | Method | Life | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------|-------------------------------|---------------|--------|-------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| | BUILDINGS | | | | | | | | | | | | | | |
| 1 | BUILDING, 801 N. BROADWAY | 06/25/01 | SL | 39.00 | MM | 16 | 52,600. | | | | 52,600. | 19,783. | | 1,349. | 21,132. |
| 3 | BUILDING, 810 N. POINSETTIA | 01/04/02 | SL | 39.00 | MM | 16 | 781,682. | | | | 781,682. | 484,405. | | 20,043. | 504,448. |
| | * 990 PAGE 10 TOTAL BUILDINGS | | | | | | 834,282. | | | | 834,282. | 504,188. | | 21,392. | 525,580. |
| | LAND | | | | | | | | | | | | | | |
| 2 | LAND 801 N. BROADWAY | 06/25/01 | L | | | | 62,883. | | | | 62,883. | | | 0. | |
| 4 | LAND, 810 N. POINSETTIA | 01/04/02 | L | | | | 168,418. | | | | 168,418. | | | 0. | |
| | * 990 PAGE 10 TOTAL LAND | | | | | | 231,301. | | | | 231,301. | 0. | | 0. | 0. |
| | OTHER | | | | | | | | | | | | | | |
| 5 | IMPROVMENTS 801 N BDWY | 06/30/97 | SL | 15.00 | | 16 | 33,453. | | | | 33,453. | 33,453. | | 0. | 33,453. |
| 6 | IMPROVMENTS 801 N BDWY | 06/30/98 | SL | 15.00 | | 16 | 69,509. | | | | 69,509. | 69,509. | | 0. | 69,509. |
| 7 | IMPROVMENTS 801 N BDWY | 06/30/99 | SL | 15.00 | | 16 | 160,791. | | | | 160,791. | 160,791. | | 0. | 160,791. |
| 8 | EXTERIOR LIGHTING | 11/30/99 | SL | 15.00 | | 16 | 360. | | | | 360. | 360. | | 0. | 360. |
| 9 | ENTRY DOORS | 04/19/00 | SL | 15.00 | | 16 | 1,411. | | | | 1,411. | 1,411. | | 0. | 1,411. |
| 10 | A.C IMPROVEMENTS | 04/19/00 | SL | 5.00 | | 16 | 645. | | | | 645. | 645. | | 0. | 645. |
| 11 | IMPROVMENTS 801 N BDWY | 08/31/00 | SL | 39.00 | MM | 16 | 9,904. | | | | 9,904. | 6,060. | | 254. | 6,314. |
| 12 | ELECTRICAL UPGRADE | 09/22/04 | SL | 15.00 | | 16 | 7,310. | | | | 7,310. | 7,310. | | 0. | 7,310. |
| 13 | EXTERIOR PAINT | 09/20/04 | SL | 5.00 | | 16 | 11,000. | | | | 11,000. | 11,000. | | 0. | 11,000. |

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| Asset No. | Description | Date Acquired | Method | Life | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------|--|---------------|--------|-------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| 14 | MONUMENT SIGN | 03/05/05 | SL | 15.00 | | 16 | 4,435. | | | | 4,435. | 4,435. | | 0. | 4,435. |
| 15 | BALANCE OF ELECTRICAL WORK | 12/15/04 | SL | 15.00 | | 16 | 3,014. | | | | 3,014. | 3,014. | | 0. | 3,014. |
| 16 | TILE WORK ON OUTSIDE STEPS | 01/30/07 | SL | 15.00 | | 16 | 1,020. | | | | 1,020. | 1,020. | | 0. | 1,020. |
| 17 | PICNIC TABLES | 03/14/08 | SL | 15.00 | | 16 | 4,530. | | | | 4,530. | 4,526. | | 0. | 4,526. |
| 18 | PARKING LOT RESURFACE | 12/31/12 | SL | 5.00 | | 16 | 2,400. | | | | 2,400. | 2,400. | | 0. | 2,400. |
| 19 | CARPET INSTALLATION | 07/01/13 | SL | 10.00 | | 16 | 3,000. | | | | 3,000. | 3,000. | | 0. | 3,000. |
| 20 | CARPET FOR BROADWAY | 07/01/13 | SL | 10.00 | | 16 | 17,098. | | | | 17,098. | 17,087. | | 0. | 17,087. |
| 21 | BALANCE OF CARPET INSTALLATION | 07/06/13 | SL | 10.00 | | 16 | 3,568. | | | | 3,568. | 3,568. | | 0. | 3,568. |
| 22 | NEW A/C UNIT | 11/01/14 | SL | 12.00 | | 16 | 8,955. | | | | 8,955. | 7,208. | | 746. | 7,954. |
| 23 | NEW ROOF | 09/01/16 | SL | 20.00 | | 16 | 13,160. | | | | 13,160. | 5,176. | | 658. | 5,834. |
| 24 | NEW ROOF, MOBILIZATION, LOGISTICS, BID COLLECTION, M | 09/30/16 | SL | 20.00 | | 16 | 2,899. | | | | 2,899. | 1,122. | | 145. | 1,267. |
| 25 | VINYL FLOORING IN LARGE CLASSROOM AND 4 SMALLER ROOM | 07/31/16 | SL | 15.00 | | 16 | 6,769. | | | | 6,769. | 3,504. | | 451. | 3,955. |
| 26 | CHANGE ORDER TO NEW VINYL FLOOR - MOVE FURNITURE BACK | 09/30/16 | SL | 15.00 | | 16 | 900. | | | | 900. | 465. | | 60. | 525. |
| 27 | HVAC UNIT - 7.5 TON PACKAGE UNIT #1 FOR 2ND FLOOR - INCL | 01/03/19 | SL | 15.00 | | 16 | 13,075. | | | | 13,075. | 4,796. | | 872. | 5,668. |
| 28 | HVAC UNIT - 7.5 TON PACKAGE - UNIT #2 FOR 1ST FLOOR | 03/01/19 | SL | 15.00 | | 16 | 11,094. | | | | 11,094. | 3,947. | | 740. | 4,687. |
| 29 | CONDENSING UNIT | 01/03/19 | SL | 15.00 | | 16 | 3,673. | | | | 3,673. | 1,347. | | 245. | 1,592. |
| 30 | FUSED GLASS PANEL WINDOWS AT 801 | 03/21/19 | SL | 15.00 | | 16 | 36,100. | | | | 36,100. | 12,637. | | 2,407. | 15,044. |
| 31 | IRON FENCING | 03/31/19 | SL | 15.00 | | 16 | 8,540. | | | | 8,540. | 2,987. | | 569. | 3,556. |

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| Asset No. | Description | Date Acquired | Method | Life | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------|---|---------------|--------|-------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| 32 | IMPRVM'TS 810 N. POINSETTIA | 06/30/03 | SL | 39.00 | MM | 16 | 33,152. | | | | 33,152. | 17,855. | | 850. | 18,705. |
| 33 | CLASSROOM PROJECT COST/FINISHED 1/1/04 | 01/01/04 | SL | 39.00 | MM | 16 | 45,565. | | | | 45,565. | 23,940. | | 1,168. | 25,108. |
| 35 | AIR CONDITIONING | 10/04/04 | SL | 15.00 | | 16 | 3,645. | | | | 3,645. | 3,639. | | 0. | 3,639. |
| 36 | SOLAR PLOT PLAN | 01/01/16 | SL | 15.00 | | 16 | 300. | | | | 300. | 178. | | 20. | 198. |
| 37 | ROOF MOUNTED PV SOLAR DESIGN | 01/01/16 | SL | 15.00 | | 16 | 1,000. | | | | 1,000. | 579. | | 67. | 646. |
| 38 | PLANNING, PERMITS & FEES | 01/01/16 | SL | 15.00 | | 16 | 1,451. | | | | 1,451. | 822. | | 97. | 919. |
| 39 | ROOF SOLAR PROJECT | 01/01/16 | SL | 15.00 | | 16 | 54,610. | | | | 54,610. | 18,730. | | 3,641. | 22,371. |
| 40 | EPOXY FLOORS AT 810 | 11/01/15 | SL | 15.00 | | 16 | 3,878. | | | | 3,878. | 3,278. | | 259. | 3,537. |
| 41 | NEW AC COMPRESSOR AND COIL REPLACEMENT | 01/01/17 | SL | 15.00 | | 16 | 4,752. | | | | 4,752. | 2,370. | | 317. | 2,687. |
| 42 | EXTERIOR BUILDING LIGHTING FOR 801 | 07/01/18 | SL | 15.00 | | 16 | 1,277. | | | | 1,277. | 425. | | 85. | 510. |
| 43 | BAY ALARM EQUIPMENT INSTALL | 06/15/19 | SL | 15.00 | | 16 | 1,226. | | | | 1,226. | 417. | | 82. | 499. |
| 44 | FEZ IMPRVM'TS 810 N POINSETTIA | 04/29/02 | SL | 15.00 | | 16 | 2,285. | | | | 2,285. | 2,285. | | 0. | 2,285. |
| 45 | FEZ IMPRVM'TS 810 N POINSETTIA | 06/30/03 | SL | 39.00 | MM | 16 | 56,691. | | | | 56,691. | 42,628. | | 1,454. | 44,082. |
| 46 | I-K RENOVATION, 801 BDWY | 06/30/97 | SL | 5.00 | | 16 | 29,500. | | | | 29,500. | 27,260. | | 0. | 27,260. |
| 47 | SIDEWALK REPLACEMENT | 01/31/07 | SL | 39.00 | MM | 16 | 9,630. | | | | 9,630. | 4,331. | | 247. | 4,578. |
| 48 | PAD FOR PICNIC TABLES | 03/01/08 | SL | 39.00 | MM | 16 | 5,000. | | | | 5,000. | 2,186. | | 128. | 2,314. |
| 49 | SPACE PLANNING & BLDG DRAWINGS-ANAHEIM | 04/01/16 | SL | 15.00 | | 16 | 5,300. | | | | 5,300. | 2,902. | | 353. | 3,255. |
| 50 | CUP AND BUILDING PERMITS - ANAHEIM | 04/01/16 | SL | 15.00 | | 16 | 5,572. | | | | 5,572. | 3,063. | | 371. | 3,434. |

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| Asset No. | Description | Date Acquired | Method | Life | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------|---|---------------|--------|-------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| 51 | MOBILIZATION & MATERIALS - ANAHEIM | 04/01/16 | SL | 15.00 | | 16 | 7,000. | | | | 7,000. | 3,855. | | 467. | 4,322. |
| 52 | TENANT IMPROVEMENTS - ANAHEIM | 04/01/16 | SL | 15.00 | | 16 | 24,816. | | | | 24,816. | 13,650. | | 1,654. | 15,304. |
| 53 | BLUEPRINTS - ANAHEIM | 04/01/16 | SL | 15.00 | | 16 | 153. | | | | 153. | 87. | | 10. | 97. |
| 54 | CITY PERMIT FEES - ANAHEIM | 04/01/16 | SL | 15.00 | | 16 | 1,297. | | | | 1,297. | 706. | | 86. | 792. |
| 55 | TENANT IMPROVEMENTS - ANAHEIM | 04/01/16 | SL | 15.00 | | 16 | 20,000. | | | | 20,000. | 10,995. | | 1,333. | 12,328. |
| 56 | TI ON NEW ANAHEIM LOCATION | 04/01/16 | SL | 15.00 | | 16 | 30,000. | | | | 30,000. | 16,508. | | 2,000. | 18,508. |
| 57 | TI ON NEW ANAHEIM LOCATION | 04/01/16 | SL | 15.00 | | 16 | 35,000. | | | | 35,000. | 19,237. | | 2,333. | 21,570. |
| 58 | SIGNAGE FOR ANAHEIM SITE | 04/01/16 | SL | 15.00 | | 16 | 8,734. | | | | 8,734. | 4,814. | | 582. | 5,396. |
| 59 | HARDWARE/ NETWORK CABLE RUN FOR 100 HARBOR BLVD | 04/01/16 | SL | 15.00 | | 16 | 10,259. | | | | 10,259. | 5,643. | | 684. | 6,327. |
| 60 | TI ON NEW ANAHEIM LOCATION | 04/01/16 | SL | 15.00 | | 16 | 15,000. | | | | 15,000. | 8,242. | | 1,000. | 9,242. |
| 61 | TI IMPROVEMENT REIMBURSEMENT | 06/30/16 | SL | 15.00 | | 16 | -85,000. | | | | -85,000. | | | 0. | |
| 62 | TI ON NEW ANAHEIM LOCATION | 06/30/16 | SL | 15.00 | | 16 | 28,528. | | | | 28,528. | 15,204. | | 1,902. | 17,106. |
| 63 | TI ON NEW ANAHEIM LOCATION | 06/30/16 | SL | 15.00 | | 16 | 1,940. | | | | 1,940. | 1,038. | | 129. | 1,167. |
| 64 | REMOVAL AND INSTALLATION OF CEILING FAN AT 801 | 09/30/16 | SL | 15.00 | | 16 | 755. | | | | 755. | 384. | | 50. | 434. |
| 65 | ABC CLASSROOM - BUILDING OUT NEW COUNTERTOP | 10/31/16 | SL | 15.00 | | 16 | 1,700. | | | | 1,700. | 867. | | 113. | 980. |
| 66 | INSTALLATION OF HVAC DAMPERS, THERMOSTATS 801 | 01/01/17 | SL | 15.00 | | 16 | 2,870. | | | | 2,870. | 1,434. | | 191. | 1,625. |
| 71 | NEW SERVERS - HARDWARE | 03/01/13 | SL | 5.00 | | 16 | 26,256. | | | | 26,256. | 26,256. | | 0. | 26,256. |
| 72 | NEW SERVERS - HARDWARE | 03/01/13 | SL | 5.00 | | 16 | 21,785. | | | | 21,785. | 21,785. | | 0. | 21,785. |

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|-----------|--|---------------|--------|------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| 73 | NEW SERVERS - HARDWARE | 03/01/13 | SL | 5.00 | | 16 | 5,241. | | | | 5,241. | 5,241. | | 0. | 5,241. |
| 74 | SHORETEL SERVER UPGRADE - PROJECT CHANGE ORDER | 04/01/13 | SL | 5.00 | | 16 | 327. | | | | 327. | 327. | | 0. | 327. |
| 75 | NEW BW PHONE SERVER & DISKS | 04/01/13 | SL | 5.00 | | 16 | 2,262. | | | | 2,262. | 2,262. | | 0. | 2,262. |
| 76 | VOICEMAIL SERVER UPGRADE | 04/01/13 | SL | 5.00 | | 16 | 2,399. | | | | 2,399. | 2,399. | | 0. | 2,399. |
| 77 | RACK REBUILD | 04/01/13 | SL | 5.00 | | 16 | 936. | | | | 936. | 936. | | 0. | 936. |
| 78 | NEW SERVER - INSTALLATION | 04/01/13 | SL | 5.00 | | 16 | 2,976. | | | | 2,976. | 2,976. | | 0. | 2,976. |
| 79 | UPDATE SHORETEL SYSTEM TO V12.3 | 07/01/13 | SL | 5.00 | | 16 | 1,148. | | | | 1,148. | 1,148. | | 0. | 1,148. |
| 80 | EXTRA SITE LICENSE | 09/01/13 | SL | 5.00 | | 16 | 696. | | | | 696. | 696. | | 0. | 696. |
| 81 | DESKTOPS & WIRELESS PROJECT | 12/01/13 | SL | 5.00 | | 16 | 40,118. | | | | 40,118. | 39,450. | | 0. | 39,450. |
| 82 | DESKTOPS & WIRELESS PROJECT | 12/01/13 | SL | 5.00 | | 16 | 5,525. | | | | 5,525. | 5,433. | | 0. | 5,433. |
| 83 | DESKTOPS & WIRELESS PROJECT | 12/01/13 | SL | 5.00 | | 16 | 14,459. | | | | 14,459. | 14,218. | | 0. | 14,218. |
| 84 | HP SAS 600 INTERNAL HARD DRIVE | 08/01/14 | SL | 5.00 | | 16 | 1,102. | | | | 1,102. | 1,102. | | 0. | 1,102. |
| 85 | NETWORK MOVE | 12/01/14 | SL | 5.00 | | 16 | 3,584. | | | | 3,584. | 3,584. | | 0. | 3,584. |
| 86 | ANAHEIM SERVER | 04/01/16 | SL | 5.00 | | 16 | 9,448. | | | | 9,448. | 9,448. | | 0. | 9,448. |
| 87 | ANAHEIM VOICEMAIL SERVER | 04/01/16 | SL | 5.00 | | 16 | 451. | | | | 451. | 451. | | 0. | 451. |
| 88 | ANAHEIM SERVER | 04/01/16 | SL | 5.00 | | 16 | 2,802. | | | | 2,802. | 2,802. | | 0. | 2,802. |
| 89 | 25 LENOVO LAPTOPS FOR ANAHEIM | 11/01/15 | SL | 5.00 | | 16 | 18,627. | | | | 18,627. | 18,627. | | 0. | 18,627. |
| 90 | 3 LENOVO THINKPAD YOGA LAPTOPS | 12/01/15 | SL | 5.00 | | 16 | 2,490. | | | | 2,490. | 2,283. | | 0. | 2,283. |

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| Asset No. | Description | Date Acquired | Method | Life | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------|---|---------------|--------|------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| 91 | VOICEMAIL SERVER - 1600 MOVED TO 801 2018 | 05/01/17 | SL | 5.00 | | 16 | 1,706. | | | | 1,706. | 1,706. | | 0. | 1,706. |
| 92 | BATTERY BACKUP | 07/01/17 | SL | 5.00 | | 16 | 875. | | | | 875. | 875. | | 0. | 875. |
| 93 | NEW 801 SERVER (AFINITY INSTALLED ON 12/03/2018) | 12/03/18 | SL | 5.00 | | 16 | 11,413. | | | | 11,413. | 11,413. | | 0. | 11,413. |
| 94 | NEW 801 HP 2620-48-POE LAYER 3 SWITCH | 12/03/18 | SL | 5.00 | | 16 | 2,320. | | | | 2,320. | 2,320. | | 0. | 2,320. |
| 95 | LATERAL FILE | 05/10/00 | SL | 5.00 | | 16 | 366. | | | | 366. | 366. | | 0. | 366. |
| 96 | 3 4-DRWR FILING CABINETS | 08/21/00 | SL | 5.00 | | 16 | 547. | | | | 547. | 547. | | 0. | 547. |
| 97 | DESK CHAIRS/ARMCHAIRS | 09/06/00 | SL | 5.00 | | 16 | 509. | | | | 509. | 509. | | 0. | 509. |
| 98 | SAFE | 10/25/00 | SL | 5.00 | | 16 | 236. | | | | 236. | 236. | | 0. | 236. |
| 99 | DESK/BOOKCASE | 02/28/01 | SL | 5.00 | | 16 | 669. | | | | 669. | 669. | | 0. | 669. |
| 100 | 24 PORT SWITCH FOR PHONE SYSTEM | 04/11/07 | SL | 5.00 | | 16 | 1,072. | | | | 1,072. | 1,072. | | 0. | 1,072. |
| 101 | DEPOSIT ON PHONE SYSTEM | 04/23/07 | SL | 5.00 | | 16 | 10,000. | | | | 10,000. | 10,000. | | 0. | 10,000. |
| 102 | ROUTER UPGRADES, ETC FOR PHONES | 05/11/07 | SL | 5.00 | | 16 | 2,677. | | | | 2,677. | 2,677. | | 0. | 2,677. |
| 103 | LINE RESEARCH, CABLES FOR PHONE SYSTEM | 05/18/07 | SL | 5.00 | | 16 | 1,161. | | | | 1,161. | 1,161. | | 0. | 1,161. |
| 104 | BALANCE OF PHONE SYSTEM | 06/07/07 | SL | 5.00 | | 16 | 12,872. | | | | 12,872. | 12,872. | | 0. | 12,872. |
| 105 | EXTRA PHONE EXTENSION | 07/12/07 | SL | 5.00 | | 16 | 536. | | | | 536. | 536. | | 0. | 536. |
| 106 | UPGRADE ROUTERS FOR T-1 | 08/30/07 | SL | 5.00 | | 16 | 2,217. | | | | 2,217. | 2,217. | | 0. | 2,217. |
| 107 | PHONE SYSTEM FOR 820 POINSETTIA | 10/24/07 | SL | 5.00 | | 16 | 6,955. | | | | 6,955. | 6,955. | | 0. | 6,955. |
| 108 | FURNITURE AT 820 BUILDING | 10/31/07 | SL | 5.00 | | 16 | 3,000. | | | | 3,000. | 3,000. | | 0. | 3,000. |

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| Asset No. | Description | Date Acquired | Method | Life | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------|--|---------------|--------|-------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| 109 | FURNITURE AT 820 BUILDING | 10/31/07 | SL | 5.00 | | 16 | 1,000. | | | | 1,000. | 1,000. | | 0. | 1,000. |
| 110 | RESCUITATION DUMMY | 03/02/10 | SL | 5.00 | | 16 | 4,090. | | | | 4,090. | 4,090. | | 0. | 4,090. |
| 111 | STUDENT TABLES FOR CLASSROOM 2 | 04/06/10 | SL | 5.00 | | 16 | 4,868. | | | | 4,868. | 4,868. | | 0. | 4,868. |
| 112 | NEW EXTENSIONS AND LICENSES | 09/01/13 | SL | 5.00 | | 16 | 3,531. | | | | 3,531. | 3,531. | | 0. | 3,531. |
| 113 | TRAINING TABLE FOR CONFERENCE ROOM | 08/01/14 | SL | 5.00 | | 16 | 3,137. | | | | 3,137. | 3,130. | | 0. | 3,130. |
| 114 | SMARTTV FOR 801 CONFERENCE ROOM - TO ANAHEIM 2018 | 03/01/15 | SL | 5.00 | | 16 | 2,800. | | | | 2,800. | 2,800. | | 0. | 2,800. |
| 115 | DEPOSIT ON PHONE EQUIPMENT - ANAHEIM | 04/01/16 | SL | 5.00 | | 16 | 4,519. | | | | 4,519. | 4,519. | | 0. | 4,519. |
| 116 | 801 RECEPTION AREA WORKSTATION | 12/01/15 | SL | 5.00 | | 16 | 3,840. | | | | 3,840. | 3,840. | | 0. | 3,840. |
| 117 | FURNITURE FOR 801 2ND FLOOR CAREER OFFICES | 12/01/15 | SL | 5.00 | | 16 | 2,413. | | | | 2,413. | 2,413. | | 0. | 2,413. |
| 118 | MEDICAL/CLASSROOM/OFFICE - FURN. & EQUIP | 04/01/16 | SL | 5.00 | | 16 | 20,500. | | | | 20,500. | 20,500. | | 0. | 20,500. |
| 119 | FIXTURE-DONOR WALL AT 801 N. HARBOR | 04/30/16 | SL | 5.00 | | 16 | 25,592. | | | | 25,592. | 25,592. | | 0. | 25,592. |
| 120 | BLINDS FOR 100 HARBOR | 09/30/16 | SL | 5.00 | | 16 | 2,919. | | | | 2,919. | 2,919. | | 0. | 2,919. |
| 122 | XEROX WORKCENTRE 5955 COPIER FOR ANAHEIM OFFICE | 02/11/19 | SL | 5.00 | | 16 | 5,926. | | | | 5,926. | 5,926. | | 0. | 5,926. |
| 123 | CABINETS AND SUPPLIES FOR MCA | 03/01/08 | SL | 10.00 | | 16 | 37,500. | | | | 37,500. | 37,500. | | 0. | 37,500. |
| 124 | SIMPSON HARDWARE AND TOOLS | 06/06/12 | SL | 5.00 | | 16 | 2,000. | | | | 2,000. | 2,000. | | 0. | 2,000. |
| 125 | CHAIRS | 08/01/14 | SL | 5.00 | | 16 | 2,500. | | | | 2,500. | 2,467. | | 0. | 2,467. |
| 126 | TWO FREEZERS | 08/01/14 | SL | 5.00 | | 16 | 2,000. | | | | 2,000. | 1,958. | | 0. | 1,958. |
| 127 | CUBICLES AT 1600 - KEPT 2 CUBLICES AT 801 | 09/01/14 | SL | 5.00 | | 16 | 2,000. | | | | 2,000. | 1,966. | | 0. | 1,966. |

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| Asset No. | Description | Date Acquired | Method | Life | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------|--|---------------|--------|------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| 128 | LOCKERS - WORD & BROWN | 09/01/14 | SL | 5.00 | | 16 | 1,500. | | | | 1,500. | 1,475. | | 0. | 1,475. |
| 131 | 10 WOOD AND CLOTH CUBICLES | 06/30/18 | SL | 5.00 | | 16 | 7,500. | | | | 7,500. | 7,500. | | 0. | 7,500. |
| 132 | SJW - SLIDING TABLE | 06/13/00 | SL | 5.00 | | 16 | 703. | | | | 703. | 703. | | 0. | 703. |
| 133 | SJW - VACUMN | 06/30/00 | SL | 5.00 | | 16 | 149. | | | | 149. | 149. | | 0. | 149. |
| 134 | TECH STORAGE UNIT | 04/11/02 | SL | 5.00 | | 16 | 2,990. | | | | 2,990. | 2,990. | | 0. | 2,990. |
| 135 | TECH SECURITY SYSTEM | 03/12/03 | SL | 5.00 | | 16 | 6,626. | | | | 6,626. | 6,626. | | 0. | 6,626. |
| 136 | CHAIRS & TABLES | 02/09/04 | SL | 5.00 | | 16 | 5,309. | | | | 5,309. | 5,309. | | 0. | 5,309. |
| 137 | CHAIRS & TABLES | 03/03/04 | SL | 5.00 | | 16 | 706. | | | | 706. | 706. | | 0. | 706. |
| 138 | CHAIRS & TABLES | 03/03/04 | SL | 5.00 | | 16 | 5,478. | | | | 5,478. | 5,478. | | 0. | 5,478. |
| 139 | GREEN JOBS SETUP | 08/11/06 | SL | 5.00 | | 16 | 34,000. | | | | 34,000. | 34,000. | | 0. | 34,000. |
| 140 | POINSETTIA OFFICE AREA WORKSTATION | 12/01/15 | SL | 5.00 | | 16 | 4,681. | | | | 4,681. | 4,681. | | 0. | 4,681. |
| 141 | QTY 4 COMPOUND MITER SAWS WITH STANDS | 07/06/17 | SL | 5.00 | | 16 | 3,461. | | | | 3,461. | 3,461. | | 0. | 3,461. |
| 142 | WHEELER REX: TREADING MACHINE SIDEKICK III | 07/01/19 | SL | 5.00 | | 16 | 1,709. | | | | 1,709. | 1,709. | | 0. | 1,709. |
| 143 | BLACKBAUD SFTWR | 07/21/00 | SL | 5.00 | | 16 | 2,152. | | | | 2,152. | 2,152. | | 0. | 2,152. |
| 144 | TSJ RAISERS EDGE SFTWR | 08/28/02 | SL | 5.00 | | 16 | 1,598. | | | | 1,598. | 1,598. | | 0. | 1,598. |
| 145 | QUICKBOOKS ENTERPRISE EDITION | 12/19/07 | SL | 5.00 | | 16 | 2,775. | | | | 2,775. | 2,775. | | 0. | 2,775. |
| 146 | IN DEMAND - OCA TESTING | 07/02/08 | SL | 5.00 | | 16 | 1,141. | | | | 1,141. | 1,141. | | 0. | 1,141. |
| 147 | IN DEMAND - OCA TESTING OFFICE 2007 | 03/23/10 | SL | 5.00 | | 16 | 1,725. | | | | 1,725. | 1,725. | | 0. | 1,725. |

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| Asset No. | Description | Date Acquired | Method | Life | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------|--|---------------|--------|-------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| 148 | COMMUNITY TECHKNOWLEDGE/ APRICOT | 03/01/14 | SL | 5.00 | | 16 | 23,854. | | | | 23,854. | 23,854. | | 0. | 23,854. |
| 149 | AFINETY - OFFICE 365 | 08/01/14 | SL | 5.00 | | 16 | 7,000. | | | | 7,000. | 7,000. | | 0. | 7,000. |
| 150 | AFINETY - OFFICE 365 | 12/01/14 | SL | 5.00 | | 16 | 3,052. | | | | 3,052. | 3,052. | | 0. | 3,052. |
| 152 | WELLS FARGO COPIER LEASE | 06/30/18 | SL | 5.00 | | 16 | 70,547. | | | | 70,547. | 70,547. | | 0. | 70,547. |
| 153 | GMC TRUCK - BOX TRUCK | 07/31/99 | SL | 5.00 | | 16 | 18,421. | | | | 18,421. | 18,422. | | 0. | 18,422. |
| 156 | CHROMEBOOK LAPTOPS | 08/01/20 | SL | 5.00 | | 16 | 15,312. | | | | 15,312. | 11,993. | | 3,062. | 15,055. |
| 157 | EQUIPMENT | 02/29/20 | SL | 5.00 | | 16 | 2,328. | | | | 2,328. | 2,019. | | 309. | 2,328. |
| 158 | DONATED COMPUTERS, PROJECTORS, MONITORS, SWITCH | 08/31/17 | SL | 5.00 | | 16 | 2,039. | | | | 2,039. | 1,608. | | 0. | 1,608. |
| 159 | 15 LENOVO THINKPAD E15 15.6" | 09/01/20 | SL | 5.00 | | 16 | 11,662. | | | | 11,662. | 8,940. | | 2,332. | 11,272. |
| 160 | 50 ACER CHROMEBOOKS 15.6" | 01/01/21 | SL | 5.00 | | 16 | 19,214. | | | | 19,214. | 13,450. | | 3,843. | 17,293. |
| 161 | APPLE 13-INCH MACBOOK PRO - SPACE GRAY | 07/01/21 | SL | 5.00 | | 16 | 1,653. | | | | 1,653. | 993. | | 331. | 1,324. |
| 162 | 40 DELL LATITUDE 3520 INTEL CORE I5-1135G7 | 10/01/21 | SL | 5.00 | | 16 | 56,594. | | | | 56,594. | 31,127. | | 11,319. | 42,446. |
| 163 | 801 PARKING LOT SEALS | 10/31/21 | SL | 15.00 | | 16 | 1,452. | | | | 1,452. | 259. | | 97. | 356. |
| 164 | ACCESS CONTROL SYSTEMS AND SMART UPS | 07/01/22 | SL | 15.00 | | 16 | 6,000. | | | | 6,000. | 800. | | 400. | 1,200. |
| 165 | PROXIMITY CARD PRINTER | 07/01/22 | SL | 15.00 | | 16 | 2,024. | | | | 2,024. | 270. | | 135. | 405. |
| 166 | ACCESS CONTROL SYSTEMS AND SMART UPS | 07/01/22 | SL | 15.00 | | 16 | 8,019. | | | | 8,019. | 1,070. | | 535. | 1,605. |
| 167 | ACCESS CONTROL SYSTEMS AND SMART UPS | 07/01/22 | SL | 15.00 | | 16 | 8,580. | | | | 8,580. | 1,144. | | 572. | 1,716. |
| 168 | CAMERAS AND INTERCOM | 09/01/22 | SL | 5.00 | | 16 | 3,087. | | | | 3,087. | 1,132. | | 617. | 1,749. |

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| Asset No. | Description | Date Acquired | Method | Life | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------------------|--|---------------|--------|------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| 169 | CAMERAS AND INTERCOM | 09/01/22 | SL | 5.00 | | 16 | 2,381. | | | | 2,381. | 873. | | 476. | 1,349. |
| 170 | CAMERAS AND INTERCOM | 09/01/22 | SL | 5.00 | | 16 | 1,379. | | | | 1,379. | 506. | | 276. | 782. |
| 171 | 6 DELL LATITUDE 3540 LAPTOPS | 08/14/23 | SL | 5.00 | | 16 | 9,994. | | | | 9,994. | 1,832. | | 1,999. | 3,831. |
| 172 | 25 QTY ACER CHROMEBOOK LAPTOPS: 25 QTY CARRYING CAS | 01/01/24 | SL | 5.00 | | 16 | 10,498. | | | | 10,498. | 1,050. | | 2,100. | 3,150. |
| 173 | 6 DELL LATITUDE 3540 LAPTOPS | 04/29/24 | SL | 5.00 | | 16 | 6,130. | | | | 6,130. | 204. | | 1,226. | 1,430. |
| 174 | QTY 4 CHROMEBOOK LAPTOPS FOR STAFF | 01/01/25 | SL | 5.00 | | 16 | 4,422. | | | | 4,422. | | | 442. | 442. |
| 175 | 10 QTY: CHROMEBOOK | 04/30/25 | SL | 5.00 | | 16 | 4,097. | | | | 4,097. | | | 137. | 137. |
| | * 990 PAGE 10 TOTAL OTHER | | | | | | 1,543,339. | | | | 1,543,339. | 1,270,227. | | 59,028. | 1,329,255. |
| | * GRAND TOTAL 990 PAGE 10 DEPR | | | | | | 2,608,922. | | | | 2,608,922. | 1,774,415. | | 80,420. | 1,854,835. |
| CURRENT YEAR ACTIVITY | | | | | | | | | | | | | | | |
| | BEGINNING BALANCE | | | | | | 2,600,403. | | | 0. | 2,600,403. | 1,774,415. | | | 1,854,256. |
| | ACQUISITIONS | | | | | | 8,519. | | | 0. | 8,519. | 0. | | | 579. |
| | DISPOSITIONS/RETIRED | | | | | | 0. | | | 0. | 0. | 0. | | | 0. |
| | ENDING BALANCE | | | | | | 2,608,922. | | | 0. | 2,608,922. | 1,774,415. | | | 1,854,835. |
| | ENDING ACCUM DEPR | | | | | | | | | | | 1,854,835. | | | |
| | ENDING BOOK VALUE | | | | | | | | | | | 754,087. | | | |

California Exempt Organization Annual Information Return

Calendar Year 2024 or fiscal year beginning (mm/dd/yyyy) 07/01/2024, and ending (mm/dd/yyyy) 06/30/2025

Corporation/Organization name TALLER SAN JOSE HOPE BUILDERS California corporation number 2799610

Additional information. See instructions. FEIN 59-3816355

Street address (suite or room) 801 N. BROADWAY PMB no.

City SANTA ANA State CA ZIP code 92701

Foreign country name Foreign province/state/country Foreign postal code

Form section with questions A through O regarding return type, accounting method, and organizational changes.

Part I Complete Part I unless not required to file this form. See General Information B and C.

Table with 4 columns: Description, Line number, Amount, and Balance. Rows include Receipts and Revenues (lines 1-8), Expenses (lines 9-10), and Payments (lines 11-16).

Sign Here 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 taxpayer) is based on all information of which preparer has any knowledge.

Paid Preparer's Use Only Preparer's signature, Title (CONTROLLER), Date (05/12/26), Firm's name (RJI INTERNATIONAL CPAS), and address (18012 SKY PARK CIRCLE, SUITE 200 IRVINE, CA 92614).

May the FTB discuss this return with the preparer shown above? See instructions [X] Yes [] No

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

428951 01-14-25

| | | | | | | |
|------------------------------------|----|--|---|----|-----------|----|
| Receipts from Other Sources | 1 | Gross sales or receipts from all business activities. See instructions | • | 1 | | 00 |
| | 2 | Interest | • | 2 | 118,511 | 00 |
| | 3 | Dividends | • | 3 | 94,687 | 00 |
| | 4 | Gross rents | • | 4 | 1,775 | 00 |
| | 5 | Gross royalties | • | 5 | | 00 |
| | 6 | Gross amount received from sale of assets (See instructions) | • | 6 | | 00 |
| | 7 | Other income. Attach schedule | • | 7 | 290,450 | 00 |
| | 8 | Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1 | • | 8 | 505,423 | 00 |
| | 9 | Contributions, gifts, grants, and similar amounts paid. Attach schedule | • | 9 | 448,085 | 00 |
| | 10 | Disbursements to or for members. | • | 10 | | 00 |
| | 11 | Compensation of officers, directors, and trustees. Attach schedule | • | 11 | 711,270 | 00 |
| | 12 | Other salaries and wages | • | 12 | 3,229,289 | 00 |
| | 13 | Interest | • | 13 | 21,355 | 00 |
| | 14 | Taxes | • | 14 | | 00 |
| | 15 | Rents | • | 15 | 294,316 | 00 |
| | 16 | Depreciation and depletion (See instructions) | • | 16 | 74,394 | 00 |
| | 17 | Other expenses and disbursements. Attach schedule | • | 17 | 945,739 | 00 |
| | 18 | Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9 | • | 18 | 5,724,448 | 00 |

| Schedule L Balance Sheet | Beginning of taxable year | | End of taxable year | |
|--|---------------------------|-----------|---------------------|-----------|
| | (a) | (b) | (c) | (d) |
| Assets | | | | |
| 1 Cash | | 428,093 | • | 405,599 |
| 2 Net accounts receivable | | 447,004 | • | 266,542 |
| 3 Net notes receivable | | | • | |
| 4 Inventories | | 1,832 | • | 4,449 |
| 5 Federal and state government obligations | | | • | |
| 6 Investments in other bonds | | | • | |
| 7 Investments in stock | | | • | |
| 8 Mortgage loans | | | • | |
| 9 Other investments. Attach schedule * | | 3,087,592 | • | 3,019,327 |
| 10 a Depreciable assets | 2,600,407 | | 2,608,925 | |
| b Less accumulated depreciation | 1,720,073 | 880,334 | 1,794,466 | 814,459 |
| 11 Land | | | • | |
| 12 Other assets. Attach schedule STMT 6 | | 3,671,617 | • | 2,983,647 |
| 13 Total assets | | 8,516,472 | | 7,494,023 |
| Liabilities and net worth | | | | |
| 14 Accounts payable | | 519,616 | • | 429,151 |
| 15 Contributions, gifts, or grants payable | | | • | |
| 16 Bonds and notes payable | | | • | |
| 17 Mortgages payable | | | • | |
| 18 Other liabilities. Attach schedule STMT 7 | | 299,541 | | 834,869 |
| 19 Capital stock or principal fund | | | • | |
| 20 Paid-in or capital surplus. Attach reconciliation | | | • | |
| 21 Retained earnings or income fund | | 7,697,315 | • | 6,230,003 |
| 22 Total liabilities and net worth | | 8,516,472 | | 7,494,023 |

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

| | | | | | |
|---|---|------------|--|---|------------|
| 1 Net income per books | • | -1,703,762 | 7 Income recorded on books this year not included in this return. Attach schedule | • | |
| 2 Federal income tax | • | | 8 Deductions in this return not charged against book income this year. Attach schedule | • | |
| 3 Excess of capital losses over capital gains | • | | 9 Total. Add line 7 and line 8 | | |
| 4 Income not recorded on books this year. Attach schedule | • | | 10 Net income per return. Subtract line 9 from line 6 | | -1,703,762 |
| 5 Expenses recorded on books this year not deducted in this return. Attach schedule | • | | | | |
| 6 Total. Add line 1 through line 5 | | -1,703,762 | | | |

* SEE STATEMENT

CA 199 COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES STATEMENT 3

| NAME AND ADDRESS | TITLE AND AVERAGE HRS WORKED/WK | COMPENSATION |
|--|------------------------------------|--------------|
| SHAWNA SMITH GOTREAU 801 N. BROADWAY SANTA ANA, CA 92701 | SECRETARY 40.00 | 183,481. |
| CHRISTA SHEEHAN 801 N. BROADWAY SANTA ANA, CA 92701 | FORMER DEPUTY DIRECTOR 40.00 | 179,615. |
| AMBER S. RIZKALLA 801 N. BROADWAY SANTA ANA, CA 92701 | EMPLOYEE 40.00 | 136,246. |
| LAURA STAGNER 801 N. BROADWAY SANTA ANA, CA 92701 | EMPLOYEE 40.00 | 107,028. |
| ZAJID COVA 801 N. BROADWAY SANTA ANA, CA 92701 | CONTROLLER 40.00 | 104,900. |
| ALEX CALABRESE 801 N. BROADWAY SANTA ANA, CA 92701 | VICE CHAIR 1.00 | 0. |
| CARLOS GONZALEZ 801 N. BROADWAY SANTA ANA, CA 92701 | CHAIR 1.00 | 0. |
| JEFFREY RANDOLPH 801 N. BROADWAY SANTA ANA, CA 92701 | DIRECTOR 1.00 | 0. |
| JON STORBECK 801 N. BROADWAY SANTA ANA, CA 92701 | DIRECTOR 1.00 | 0. |
| LISA WEAVER 801 N. BROADWAY SANTA ANA, CA 92701 | DIRECTOR 1.00 | 0. |
| MARIA ELENA PERALES 801 N. BROADWAY SANTA ANA, CA 92701 | DIRECTOR 1.00 | 0. |

| | | |
|---|-------------------------|----------|
| MIKE CAWLINA 801 N. BROADWAY SANTA ANA, CA 92701 | DIRECTOR 1.00 | 0. |
| MIKE SMITH 801 N. BROADWAY SANTA ANA, CA 92701 | TREASURER 1.00 | 0. |
| OLIVA LINDSAY 801 N. BROADWAY SANTA ANA, CA 92701 | DIRECTOR 1.00 | 0. |
| SR. EILEEN MCNERNEY 801 N. BROADWAY SANTA ANA, CA 92701 | FORMER EMERITUS 1.00 | 0. |
| TARA COWELL 801 N. BROADWAY SANTA ANA, CA 92701 | DIRECTOR 1.00 | 0. |
| TIM BLETT 801 N. BROADWAY SANTA ANA, CA 92701 | DIRECTOR 1.00 | 0. |
| VINCE MCGUINNESS, JR. 801 N. BROADWAY SANTA ANA, CA 92701 | FORMER DIRECTOR 1.00 | 0. |
| ELIZABETH MIRZA 801 N. BROADWAY SANTA ANA, CA 92701 | DIRECTOR 1.00 | 0. |
| ANNETTE MORGAN 801 N. BROADWAY SANTA ANA, CA 92701 | DIRECTOR 1.00 | 0. |
| TOTAL TO FORM 199, PART II, LINE 11 | | 711,270. |

| CA 199 | OTHER EXPENSES | STATEMENT 4 |
|-------------------------------------|----------------|-------------|
| DESCRIPTION | | AMOUNT |
| PROGRAM SUPPLIES & RELA | | 80,009. |
| PRINTING & OFFICE SUPPL | | 46,944. |
| SPECIAL EVENTS | | 35,243. |
| OTHER EXPENSES | | 10,700. |
| OTHER PROFESSIONAL FEES | | 475,397. |
| ADVERTISING AND PROMOTION | | 214,578. |
| INFORMATION TECHNOLOGY | | 41,870. |
| INSURANCE | | 40,998. |
| TOTAL TO FORM 199, PART II, LINE 17 | | 945,739. |

| CA 199 | OTHER INVESTMENTS | STATEMENT | 5 |
|---------------------------------------|-------------------|--------------|-------------|
| DESCRIPTION | | BEG. OF YEAR | END OF YEAR |
| OTHER PUBLICLY TRADED SECURITIES | | 3,087,592. | 3,019,327. |
| TOTAL TO FORM 199, SCHEDULE L, LINE 9 | | 3,087,592. | 3,019,327. |

| CA 199 | OTHER ASSETS | STATEMENT | 6 |
|--|--------------|--------------|-------------|
| DESCRIPTION | | BEG. OF YEAR | END OF YEAR |
| PLEDGES AND GRANTS RECEIVABLE | | 1,552,299. | 1,224,915. |
| HOPE BUILDERS CAREER CONNECTIONS | | 1,729,802. | 1,541,831. |
| PROPERTIES HELD FOR RESALE | | 8,000. | 8,000. |
| PREPAID EXPENSES | | 31,281. | 60,922. |
| DEPOSITS | | 16,000. | 13,500. |
| ROU ASSETS | | 251,093. | 123,279. |
| UNBILLED REVENUE | | 83,142. | 10,122. |
| PREPAID ANNUAL EVENT EXPENSES | | 0. | 1,078. |
| TOTAL TO FORM 199, SCHEDULE L, LINE 12 | | 3,671,617. | 2,983,647. |

| CA 199 | OTHER LIABILITIES | STATEMENT | 7 |
|--|-------------------|--------------|-------------|
| DESCRIPTION | | BEG. OF YEAR | END OF YEAR |
| PREPAID RENT | | 775. | 1,000. |
| ROU LEASE LIABILITY | | 258,898. | 128,917. |
| DEFERRED REVENUE | | 39,868. | 104,952. |
| LINE OF CREDIT | | 0. | 600,000. |
| TOTAL TO FORM 199, SCHEDULE L, LINE 18 | | 299,541. | 834,869. |

Attach to Form 100 or Form 100W.

FORM 199

FEIN 59-3816355

Corporation name

California corporation number

TALLER SAN JOSE HOPE BUILDERS

2799610

Part I Election To Expense Certain Property Under IRC Section 179

| | | |
|--|-------------------------------------|-------------------------|
| 1 Maximum deduction under IRC Section 179 for California | 1 | \$25,000 |
| 2 Total cost of IRC Section 179 property placed in service | 2 | |
| 3 Threshold cost of IRC Section 179 property before reduction in limitation | 3 | \$200,000 |
| 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- | 4 | |
| 5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0- | 5 | |
| (a) Description of property | (b) Cost (business use only) | (c) Elected cost |
| 6 | | |
| 7 Listed property (elected IRC Section 179 cost) | 7 | |
| 8 Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7 | 8 | |
| 9 Tentative deduction. Enter the smaller of line 5 or line 8 | 9 | |
| 10 Carryover of disallowed deduction from prior taxable years | 10 | |
| 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 | 11 | |
| 12 IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11 | 12 | |
| 13 Carryover of disallowed deduction to 2025. Add line 9 and line 10, less line 12 | 13 | |

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

| (a) Description of property | (b) Date acquired (mm/dd/yyyy) | (c) Cost or other basis | (d) Depreciation allowed or allowable in earlier years | (e) Depreciation method | (f) Life or rate | (g) Depreciation for this year | (h) Additional first year depreciation |
|--|--------------------------------|-------------------------|--|-------------------------|------------------|--------------------------------|--|
| 14 | | | | | | | |
| SEE STATEMENT | 8 | 2,693,922. | 1,774,415. | | | | |
| 15 Add the amounts in column (g) and column (h). The total of column (h) may not exceed \$2,000. See instructions for line 14, column (h) | 15 | | | | | 80,420 | |

Part III Summary

| | | | |
|---|----------------------------------|----|--------|
| 16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g) | <input checked="" type="radio"/> | 16 | 80,420 |
| 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22 | <input checked="" type="radio"/> | 17 | 80,420 |
| 18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) | <input checked="" type="radio"/> | 18 | 0 |

Part IV Amortization

| (a) Description of property | (b) Date acquired (mm/dd/yyyy) | (c) Cost or other basis | (d) Amortization allowed or allowable in earlier years | (e) R&TC Section (see instructions) | (f) Period or percentage | (g) Amortization for this year |
|---|----------------------------------|-------------------------|--|-------------------------------------|--------------------------|--------------------------------|
| 19 | | | | | | |
| 20 Total. Add the amounts in column (g) | 20 | | | | | |
| 21 Total amortization claimed for federal purposes from federal Form 4562, line 44 | 21 | | | | | |
| 22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12 | <input checked="" type="radio"/> | 22 | | | | |

| CA 3885 | | DEPRECIATION | | | | STATEMENT 8 | |
|-----------------------------------|--------------------|------------------|---------------|--------|-------|-------------------|-------|
| ASSET NO./ DESCRIPTION | DATE IN SERVICE | COST OR BASIS | PRIOR DEPR | METHOD | LIFE | DEPRE- CIATION | BONUS |
| 1 BUILDING, 801 N. BROADWAY | 06/25/01 | 52,600. | 19,783. | SL | 39.00 | 1,349. | |
| 2 LAND 801 N. BROADWAY | 06/25/01 | 62,883. | | L | | 0. | |
| 3 BUILDING, 810 N. POINSETTIA | 01/04/02 | 781,682. | 484,405. | SL | 39.00 | 20,043. | |
| 4 LAND, 810 N. POINSETTIA | 01/04/02 | 168,418. | | L | | 0. | |
| 5 IMPROVMENTS 801 N BDWY | 06/30/97 | 33,453. | 33,453. | SL | 15.00 | 0. | |
| 6 IMPROVMENTS 801 N BDWY | 06/30/98 | 69,509. | 69,509. | SL | 15.00 | 0. | |
| 7 IMPROVMENTS 801 N BDWY | 06/30/99 | 160,791. | 160,791. | SL | 15.00 | 0. | |
| 8 EXTERIOR LIGHTING | 11/30/99 | 360. | 360. | SL | 15.00 | 0. | |
| 9 ENTRY DOORS | 04/19/00 | 1,411. | 1,411. | SL | 15.00 | 0. | |
| 10 A.C IMPROVEMENTS | 04/19/00 | 645. | 645. | SL | 5.00 | 0. | |
| 11 IMPROVMENTS 801 N BDWY | 08/31/00 | 9,904. | 6,060. | SL | 39.00 | 254. | |
| 12 ELECTRICAL UPGRADE | 09/22/04 | 7,310. | 7,310. | SL | 15.00 | 0. | |
| 13 EXTERIOR PAINT | 09/20/04 | 11,000. | 11,000. | SL | 5.00 | 0. | |
| 14 MONUMENT SIGN | 03/05/05 | 4,435. | 4,435. | SL | 15.00 | 0. | |
| 15 BALANCE OF ELECTRICAL WORK | 12/15/04 | 3,014. | 3,014. | SL | 15.00 | 0. | |
| 16 TILE WORK ON OUTSIDE STEPS | 01/30/07 | 1,020. | 1,020. | SL | 15.00 | 0. | |
| 17 PICNIC TABLES | 03/14/08 | 4,530. | 4,526. | SL | 15.00 | 0. | |
| 18 PARKING LOT RESURFACE | 12/31/12 | 2,400. | 2,400. | SL | 5.00 | 0. | |
| 19 CARPET INSTALLATION | 07/01/13 | 3,000. | 3,000. | SL | 10.00 | 0. | |
| 20 CARPET FOR BROADWAY | 07/01/13 | 17,098. | 17,087. | SL | 10.00 | 0. | |
| 21 BALANCE OF CARPET INSTALLATION | 07/06/13 | 3,568. | 3,568. | SL | 10.00 | 0. | |
| 22 NEW A/C UNIT | 11/01/14 | 8,955. | 7,208. | SL | 12.00 | 746. | |
| 23 NEW ROOF | 09/01/16 | 13,160. | 5,176. | SL | 20.00 | 658. | |

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| 24 | NEW ROOF, MOBILIZATION, LOGISTICS, BID COLLECTION, MEETINGS | 09/30/16 | 2,899. | 1,122. | SL | 20.00 | 145. |
| 25 | VINYL FLOORING IN LARGE CLASSROOM AND 4 SMALLER ROOMS | 07/31/16 | 6,769. | 3,504. | SL | 15.00 | 451. |
| 26 | CHANGE ORDER TO NEW VINYL FLOOR - MOVE FURNITURE BACK | 09/30/16 | 900. | 465. | SL | 15.00 | 60. |
| 27 | HVAC UNIT - 7.5 TON PACKAGE UNIT #1 FOR 2ND FLOOR - INCLUDES THERMOS | 01/03/19 | 13,075. | 4,796. | SL | 15.00 | 872. |
| 28 | HVAC UNIT - 7.5 TON PACKAGE - UNIT #2 FOR 1ST FLOOR | 03/01/19 | 11,094. | 3,947. | SL | 15.00 | 740. |
| 29 | CONDENSING UNIT | 01/03/19 | 3,673. | 1,347. | SL | 15.00 | 245. |
| 30 | FUSED GLASS PANEL WINDOWS AT 801 | 03/21/19 | 36,100. | 12,637. | SL | 15.00 | 2,407. |
| 31 | IRON FENCING | 03/31/19 | 8,540. | 2,987. | SL | 15.00 | 569. |
| 32 | IMPRVM'TS 810 N. POINSETTIA | 06/30/03 | 33,152. | 17,855. | SL | 39.00 | 850. |
| 33 | CLASSROOM PROJECT COST/FINISHED 1/1/04 | 01/01/04 | 45,565. | 23,940. | SL | 39.00 | 1,168. |
| 35 | AIR CONDITIONING | 10/04/04 | 3,645. | 3,639. | SL | 15.00 | 0. |
| 36 | SOLAR PLOT PLAN | 01/01/16 | 300. | 178. | SL | 15.00 | 20. |
| 37 | ROOF MOUNTED PV SOLAR DESIGN | 01/01/16 | 1,000. | 579. | SL | 15.00 | 67. |
| 38 | PLANNING, PERMITS & FEES | 01/01/16 | 1,451. | 822. | SL | 15.00 | 97. |
| 39 | ROOF SOLAR PROJECT | 01/01/16 | 54,610. | 18,730. | SL | 15.00 | 3,641. |
| 40 | EPOXY FLOORS AT 810 | 11/01/15 | 3,878. | 3,278. | SL | 15.00 | 259. |
| 41 | NEW AC COMPRESSOR AND COIL REPLACEMENT | 01/01/17 | 4,752. | 2,370. | SL | 15.00 | 317. |
| 42 | EXTERIOR BUILDING LIGHTING FOR 801 | 07/01/18 | 1,277. | 425. | SL | 15.00 | 85. |
| 43 | BAY ALARM EQUIPMENT INSTALL | 06/15/19 | 1,226. | 417. | SL | 15.00 | 82. |
| 44 | FEZ IMPRVM'TS 810 N POINSETTIA | 04/29/02 | 2,285. | 2,285. | SL | 15.00 | 0. |
| 45 | FEZ IMPRVM'TS 810 N POINSETTIA | 06/30/03 | 56,691. | 42,628. | SL | 39.00 | 1,454. |
| 46 | I-K RENOVATION, 801 BDWY | 06/30/97 | 29,500. | 27,260. | SL | 5.00 | 0. |
| 47 | SIDEWALK REPLACEMENT | 01/31/07 | 9,630. | 4,331. | SL | 39.00 | 247. |
| 48 | PAD FOR PICNIC TABLES | 03/01/08 | 5,000. | 2,186. | SL | 39.00 | 128. |
| 49 | SPACE PLANNING & BLDG DRAWINGS-ANAHEIM | 04/01/16 | 5,300. | 2,902. | SL | 15.00 | 353. |
| 50 | CUP AND BUILDING PERMITS - ANAHEIM | 04/01/16 | 5,572. | 3,063. | SL | 15.00 | 371. |
| 51 | MOBILIZATION & MATERIALS - ANAHEIM | 04/01/16 | 7,000. | 3,855. | SL | 15.00 | 467. |

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| 52 | TENANT IMPROVEMENTS - ANAHEIM | | | | | |
| | 04/01/16 | 24,816. | 13,650. | SL | 15.00 | 1,654. |
| 53 | BLUEPRINTS - ANAHEIM | | | | | |
| | 04/01/16 | 153. | 87. | SL | 15.00 | 10. |
| 54 | CITY PERMIT FEES - ANAHEIM | | | | | |
| | 04/01/16 | 1,297. | 706. | SL | 15.00 | 86. |
| 55 | TENANT IMPROVEMENTS - ANAHEIM | | | | | |
| | 04/01/16 | 20,000. | 10,995. | SL | 15.00 | 1,333. |
| 56 | TI ON NEW ANAHEIM LOCATION | | | | | |
| | 04/01/16 | 30,000. | 16,508. | SL | 15.00 | 2,000. |
| 57 | TI ON NEW ANAHEIM LOCATION | | | | | |
| | 04/01/16 | 35,000. | 19,237. | SL | 15.00 | 2,333. |
| 58 | SIGNAGE FOR ANAHEIM SITE | | | | | |
| | 04/01/16 | 8,734. | 4,814. | SL | 15.00 | 582. |
| 59 | HARDWARE/ NETWORK CABLE RUN FOR 100 HARBOR BLVD | | | | | |
| | 04/01/16 | 10,259. | 5,643. | SL | 15.00 | 684. |
| 60 | TI ON NEW ANAHEIM LOCATION | | | | | |
| | 04/01/16 | 15,000. | 8,242. | SL | 15.00 | 1,000. |
| 61 | TI IMPROVEMENT REIMBURSEMENT | | | | | |
| | 06/30/16 | 0. | | SL | 15.00 | 0. |
| 62 | TI ON NEW ANAHEIM LOCATION | | | | | |
| | 06/30/16 | 28,528. | 15,204. | SL | 15.00 | 1,902. |
| 63 | TI ON NEW ANAHEIM LOCATION | | | | | |
| | 06/30/16 | 1,940. | 1,038. | SL | 15.00 | 129. |
| 64 | REMOVAL AND INSTALLATION OF CEILING FAN AT 801 | | | | | |
| | 09/30/16 | 755. | 384. | SL | 15.00 | 50. |
| 65 | ABC CLASSROOM - BUILDING OUT NEW COUNTERTOP | | | | | |
| | 10/31/16 | 1,700. | 867. | SL | 15.00 | 113. |
| 66 | INSTALLATION OF HVAC DAMPERS, THERMOSTATS 801 | | | | | |
| | 01/01/17 | 2,870. | 1,434. | SL | 15.00 | 191. |
| 71 | NEW SERVERS - HARDWARE | | | | | |
| | 03/01/13 | 26,256. | 26,256. | SL | 5.00 | 0. |
| 72 | NEW SERVERS - HARDWARE | | | | | |
| | 03/01/13 | 21,785. | 21,785. | SL | 5.00 | 0. |
| 73 | NEW SERVERS - HARDWARE | | | | | |
| | 03/01/13 | 5,241. | 5,241. | SL | 5.00 | 0. |
| 74 | SHORETEL SERVER UPGRADE - PROJECT CHANGE ORDER | | | | | |
| | 04/01/13 | 327. | 327. | SL | 5.00 | 0. |
| 75 | NEW BW PHONE SERVER & DISKS | | | | | |
| | 04/01/13 | 2,262. | 2,262. | SL | 5.00 | 0. |
| 76 | VOICEMAIL SERVER UPGRADE | | | | | |
| | 04/01/13 | 2,399. | 2,399. | SL | 5.00 | 0. |
| 77 | RACK REBUILD | | | | | |
| | 04/01/13 | 936. | 936. | SL | 5.00 | 0. |
| 78 | NEW SERVER - INSTALLATION | | | | | |
| | 04/01/13 | 2,976. | 2,976. | SL | 5.00 | 0. |
| 79 | UPDATE SHORETEL SYSTEM TO V12.3 | | | | | |
| | 07/01/13 | 1,148. | 1,148. | SL | 5.00 | 0. |
| 80 | EXTRA SITE LICENSE | | | | | |
| | 09/01/13 | 696. | 696. | SL | 5.00 | 0. |
| 81 | DESKTOPS & WIRELESS PROJECT | | | | | |
| | 12/01/13 | 40,118. | 39,450. | SL | 5.00 | 0. |
| 82 | DESKTOPS & WIRELESS PROJECT | | | | | |
| | 12/01/13 | 5,525. | 5,433. | SL | 5.00 | 0. |

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| 83 | DESKTOPS & WIRELESS PROJECT | | | | | | |
| | 12/01/13 | 14,459. | 14,218. | SL | 5.00 | 0. | |
| 84 | HP SAS 600 INTERNAL HARD DRIVE | | | | | | |
| | 08/01/14 | 1,102. | 1,102. | SL | 5.00 | 0. | |
| 85 | NETWORK MOVE | | | | | | |
| | 12/01/14 | 3,584. | 3,584. | SL | 5.00 | 0. | |
| 86 | ANAHEIM SERVER | | | | | | |
| | 04/01/16 | 9,448. | 9,448. | SL | 5.00 | 0. | |
| 87 | ANAHEIM VOICEMAIL SERVER | | | | | | |
| | 04/01/16 | 451. | 451. | SL | 5.00 | 0. | |
| 88 | ANAHEIM SERVER | | | | | | |
| | 04/01/16 | 2,802. | 2,802. | SL | 5.00 | 0. | |
| 89 | 25 LENOVO LAPTOPS FOR ANAHEIM | | | | | | |
| | 11/01/15 | 18,627. | 18,627. | SL | 5.00 | 0. | |
| 90 | 3 LENOVO THINKPAD YOGA LAPTOPS | | | | | | |
| | 12/01/15 | 2,490. | 2,283. | SL | 5.00 | 0. | |
| 91 | VOICEMAIL SERVER - 1600 MOVED TO 801 2018 | | | | | | |
| | 05/01/17 | 1,706. | 1,706. | SL | 5.00 | 0. | |
| 92 | BATTERY BACKUP | | | | | | |
| | 07/01/17 | 875. | 875. | SL | 5.00 | 0. | |
| 93 | NEW 801 SERVER (AFINITY INSTALLED ON 12/03/2018) | | | | | | |
| | 12/03/18 | 11,413. | 11,413. | SL | 5.00 | 0. | |
| 94 | NEW 801 HP 2620-48-POE LAYER 3 SWITCH | | | | | | |
| | 12/03/18 | 2,320. | 2,320. | SL | 5.00 | 0. | |
| 95 | LATERAL FILE | | | | | | |
| | 05/10/00 | 366. | 366. | SL | 5.00 | 0. | |
| 96 | 3 4-DRWR FILING CABINETS | | | | | | |
| | 08/21/00 | 547. | 547. | SL | 5.00 | 0. | |
| 97 | DESK CHAIRS/ARMCHAIRS | | | | | | |
| | 09/06/00 | 509. | 509. | SL | 5.00 | 0. | |
| 98 | SAFE | | | | | | |
| | 10/25/00 | 236. | 236. | SL | 5.00 | 0. | |
| 99 | DESK/BOOKCASE | | | | | | |
| | 02/28/01 | 669. | 669. | SL | 5.00 | 0. | |
| 100 | 24 PORT SWITCH FOR PHONE SYSTEM | | | | | | |
| | 04/11/07 | 1,072. | 1,072. | SL | 5.00 | 0. | |
| 101 | DEPOSIT ON PHONE SYSTEM | | | | | | |
| | 04/23/07 | 10,000. | 10,000. | SL | 5.00 | 0. | |
| 102 | ROUTER UPGRADES, ETC FOR PHONES | | | | | | |
| | 05/11/07 | 2,677. | 2,677. | SL | 5.00 | 0. | |
| 103 | LINE RESEARCH, CABLES FOR PHONE SYSTEM | | | | | | |
| | 05/18/07 | 1,161. | 1,161. | SL | 5.00 | 0. | |
| 104 | BALANCE OF PHONE SYSTEM | | | | | | |
| | 06/07/07 | 12,872. | 12,872. | SL | 5.00 | 0. | |
| 105 | EXTRA PHONE EXTENSION | | | | | | |
| | 07/12/07 | 536. | 536. | SL | 5.00 | 0. | |
| 106 | UPGRADE ROUTERS FOR T-1 | | | | | | |
| | 08/30/07 | 2,217. | 2,217. | SL | 5.00 | 0. | |
| 107 | PHONE SYSTEM FOR 820 POINSETTIA | | | | | | |
| | 10/24/07 | 6,955. | 6,955. | SL | 5.00 | 0. | |
| 108 | FURNITURE AT 820 BUILDING | | | | | | |
| | 10/31/07 | 3,000. | 3,000. | SL | 5.00 | 0. | |
| 109 | FURNITURE AT 820 BUILDING | | | | | | |
| | 10/31/07 | 1,000. | 1,000. | SL | 5.00 | 0. | |

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| 110 | RESCUITATION DUMMY | | | | | | |
| | 03/02/10 | 4,090. | 4,090. | SL | 5.00 | 0. | |
| 111 | STUDENT TABLES FOR CLASSROOM 2 | | | | | | |
| | 04/06/10 | 4,868. | 4,868. | SL | 5.00 | 0. | |
| 112 | NEW EXTENSIONS AND LICENSES | | | | | | |
| | 09/01/13 | 3,531. | 3,531. | SL | 5.00 | 0. | |
| 113 | TRAINING TABLE FOR CONFERENCE ROOM | | | | | | |
| | 08/01/14 | 3,137. | 3,130. | SL | 5.00 | 0. | |
| 114 | SMARTTV FOR 801 CONFERENCE ROOM - TO ANAHEIM 2018 | | | | | | |
| | 03/01/15 | 2,800. | 2,800. | SL | 5.00 | 0. | |
| 115 | DEPOSIT ON PHONE EQUIPMENT - ANAHEIM | | | | | | |
| | 04/01/16 | 4,519. | 4,519. | SL | 5.00 | 0. | |
| 116 | 801 RECEPTION AREA WORKSTATION | | | | | | |
| | 12/01/15 | 3,840. | 3,840. | SL | 5.00 | 0. | |
| 117 | FURNITURE FOR 801 2ND FLOOR CAREER OFFICES | | | | | | |
| | 12/01/15 | 2,413. | 2,413. | SL | 5.00 | 0. | |
| 118 | MEDICAL/CLASSROOM/OFFICE - FURN. & EQUIP | | | | | | |
| | 04/01/16 | 20,500. | 20,500. | SL | 5.00 | 0. | |
| 119 | FIXTURE-DONOR WALL AT 801 N. HARBOR | | | | | | |
| | 04/30/16 | 25,592. | 25,592. | SL | 5.00 | 0. | |
| 120 | BLINDS FOR 100 HARBOR | | | | | | |
| | 09/30/16 | 2,919. | 2,919. | SL | 5.00 | 0. | |
| 122 | XEROX WORKCENTRE 5955 COPIER FOR ANAHEIM OFFICE | | | | | | |
| | 02/11/19 | 5,926. | 5,926. | SL | 5.00 | 0. | |
| 123 | CABINETS AND SUPPLIES FOR MCA | | | | | | |
| | 03/01/08 | 37,500. | 37,500. | SL | 10.00 | 0. | |
| 124 | SIMPSON HARDWARE AND TOOLS | | | | | | |
| | 06/06/12 | 2,000. | 2,000. | SL | 5.00 | 0. | |
| 125 | CHAIRS | | | | | | |
| | 08/01/14 | 2,500. | 2,467. | SL | 5.00 | 0. | |
| 126 | TWO FREEZERS | | | | | | |
| | 08/01/14 | 2,000. | 1,958. | SL | 5.00 | 0. | |
| 127 | CUBICLES AT 1600 - KEPT 2 CUBICLES AT 801 | | | | | | |
| | 09/01/14 | 2,000. | 1,966. | SL | 5.00 | 0. | |
| 128 | LOCKERS - WORD & BROWN | | | | | | |
| | 09/01/14 | 1,500. | 1,475. | SL | 5.00 | 0. | |
| 131 | 10 WOOD AND CLOTH CUBICLES | | | | | | |
| | 06/30/18 | 7,500. | 7,500. | SL | 5.00 | 0. | |
| 132 | SJW - SLIDING TABLE | | | | | | |
| | 06/13/00 | 703. | 703. | SL | 5.00 | 0. | |
| 133 | SJW - VACUMN | | | | | | |
| | 06/30/00 | 149. | 149. | SL | 5.00 | 0. | |
| 134 | TECH STORAGE UNIT | | | | | | |
| | 04/11/02 | 2,990. | 2,990. | SL | 5.00 | 0. | |
| 135 | TECH SECURITY SYSTEM | | | | | | |
| | 03/12/03 | 6,626. | 6,626. | SL | 5.00 | 0. | |
| 136 | CHAIRS & TABLES | | | | | | |
| | 02/09/04 | 5,309. | 5,309. | SL | 5.00 | 0. | |
| 137 | CHAIRS & TABLES | | | | | | |
| | 03/03/04 | 706. | 706. | SL | 5.00 | 0. | |
| 138 | CHAIRS & TABLES | | | | | | |
| | 03/03/04 | 5,478. | 5,478. | SL | 5.00 | 0. | |
| 139 | GREEN JOBS SETUP | | | | | | |
| | 08/11/06 | 34,000. | 34,000. | SL | 5.00 | 0. | |

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| 140 | POINSETTIA OFFICE AREA WORKSTATION | 12/01/15 | 4,681. | 4,681. | SL | 5.00 | 0. |
| 141 | QTY 4 COMPOUND MITER SAWS WITH STANDS | 07/06/17 | 3,461. | 3,461. | SL | 5.00 | 0. |
| 142 | WHEELER REX: TREADING MACHINE SIDEKICK III | 07/01/19 | 1,709. | 1,709. | SL | 5.00 | 0. |
| 143 | BLACKBAUD SFTWR | 07/21/00 | 2,152. | 2,152. | SL | 5.00 | 0. |
| 144 | TSJ RAISERS EDGE SFTWR | 08/28/02 | 1,598. | 1,598. | SL | 5.00 | 0. |
| 145 | QUICKBOOKS ENTERPRISE EDITION | 12/19/07 | 2,775. | 2,775. | SL | 5.00 | 0. |
| 146 | IN DEMAND - OCA TESTING | 07/02/08 | 1,141. | 1,141. | SL | 5.00 | 0. |
| 147 | IN DEMAND - OCA TESTING OFFICE 2007 | 03/23/10 | 1,725. | 1,725. | SL | 5.00 | 0. |
| 148 | COMMUNITY TECHKNOWLEDGE/ APRICOT | 03/01/14 | 23,854. | 23,854. | SL | 5.00 | 0. |
| 149 | AFINETY - OFFICE 365 | 08/01/14 | 7,000. | 7,000. | SL | 5.00 | 0. |
| 150 | AFINETY - OFFICE 365 | 12/01/14 | 3,052. | 3,052. | SL | 5.00 | 0. |
| 152 | WELLS FARGO COPIER LEASE | 06/30/18 | 70,547. | 70,547. | SL | 5.00 | 0. |
| 153 | GMC TRUCK - BOX TRUCK | 07/31/99 | 18,421. | 18,422. | SL | 5.00 | 0. |
| 156 | CHROMEBOOK LAPTOPS | 08/01/20 | 15,312. | 11,993. | SL | 5.00 | 3,062. |
| 157 | EQUIPMENT | 02/29/20 | 2,328. | 2,019. | SL | 5.00 | 309. |
| 158 | DONATED COMPUTERS, PROJECTORS, MONITORS, SWITCHES - RESTRICTED TO CL | 08/31/17 | 2,039. | 1,608. | SL | 5.00 | 0. |
| 159 | 15 LENOVO THINKPAD E15 15.6" | 09/01/20 | 11,662. | 8,940. | SL | 5.00 | 2,332. |
| 160 | 50 ACER CHROMEBOOKS 15.6" | 01/01/21 | 19,214. | 13,450. | SL | 5.00 | 3,843. |
| 161 | APPLE 13-INCH MACBOOK PRO - SPACE GRAY | 07/01/21 | 1,653. | 993. | SL | 5.00 | 331. |
| 162 | 40 DELL LATITUDE 3520 INTEL CORE I5-1135G7 | 10/01/21 | 56,594. | 31,127. | SL | 5.00 | 11,319. |
| 163 | 801 PARKING LOT SEALS | 10/31/21 | 1,452. | 259. | SL | 15.00 | 97. |
| 164 | ACCESS CONTROL SYSTEMS AND SMART UPS | 07/01/22 | 6,000. | 800. | SL | 15.00 | 400. |
| 165 | PROXIMITY CARD PRINTER | 07/01/22 | 2,024. | 270. | SL | 15.00 | 135. |
| 166 | ACCESS CONTROL SYSTEMS AND SMART UPS | 07/01/22 | 8,019. | 1,070. | SL | 15.00 | 535. |
| 167 | ACCESS CONTROL SYSTEMS AND SMART UPS | 07/01/22 | 8,580. | 1,144. | SL | 15.00 | 572. |
| 168 | CAMERAS AND INTERCOM | 09/01/22 | 3,087. | 1,132. | SL | 5.00 | 617. |
| 169 | CAMERAS AND INTERCOM | 09/01/22 | 2,381. | 873. | SL | 5.00 | 476. |

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| 170 | CAMERAS AND INTERCOM | | | | | |
| | 09/01/22 | 1,379. | 506. | SL | 5.00 | 276. |
| 171 | 6 DELL LATITUDE 3540 LAPTOPS | | | | | |
| | 08/14/23 | 9,994. | 1,832. | SL | 5.00 | 1,999. |
| 172 | 25 QTY ACER CHROMEBOOK LAPTOPS: 25 QTY CARRYING CASES, 25 QTY GOOGLE | | | | | |
| | 01/01/24 | 10,498. | 1,050. | SL | 5.00 | 2,100. |
| 173 | 6 DELL LATITUDE 3540 LAPTOPS | | | | | |
| | 04/29/24 | 6,130. | 204. | SL | 5.00 | 1,226. |
| 174 | QTY 4 CHROMEBOOK LAPTOPS FOR STAFF | | | | | |
| | 01/01/25 | 4,422. | | SL | 5.00 | 442. |
| 175 | 10 QTY: CHROMEBOOK | | | | | |
| | 04/30/25 | 4,097. | | SL | 5.00 | 137. |
| TOTAL TO FORM 3885 | | <u>2,693,922.</u> | <u>1,774,415.</u> | | | <u>80,420.</u> |

TAXABLE YEAR
2024

California e-file Return Authorization for Exempt Organizations

FORM
8453-EO

| | |
|--------------------------------------|--------------------|
| Exempt Organization name | Identifying number |
| TALLER SAN JOSE HOPE BUILDERS | 59-3816355 |

Part I Electronic Return Information (whole dollars only)

| | | |
|--|---|------------------|
| 1 Total gross receipts or unrelated business taxable income (Form 199, line 4 or Form 109, line 5) | 1 | 4,020,686 |
| 2 Total gross income or total tax (Form 199, line 8 or Form 109, line 14) | 2 | 4,020,686 |
| 3 Refund (Form 109, line 26) | 3 | |
| 4 Balance due or Total amount due (Form 199, line 16 or Form 109, line 29) | 4 | |

Part II Settle Your Account Electronically for Taxable Year 2024

5 Direct deposit of refund (Form 109 only.)

6 Electronic funds withdrawal **6a** Amount **6b** Withdrawal date (mm/dd/yyyy)

Part III Schedule of Estimated Tax Payments for Taxable Year 2025 (These are **not** installment payments for the current amount the exempt organization owes.)

| | First Payment | Second Payment | Third Payment | Fourth Payment |
|-------------------|---------------|----------------|---------------|----------------|
| 7 Amount | | | | |
| 8 Withdrawal Date | | | | |

Part IV Banking Information (Have you verified the exempt organization's banking information?)

9 Routing number _____

10 Account number _____ 11 Type of account: Checking Savings

Part V Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, box 5, I declare that the bank account specified in Part IV for the direct deposit refund agrees with the authorization stated on my return. If I check Part II, box 6, I authorize an electronic funds withdrawal for the amount listed on line 6a and any estimated payment amounts listed on Part III, line 7 from the bank account specified in Part IV.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2024 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's tax liability, the exempt organization will remain liable for the tax liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay or the date when the refund was sent.**

Sign Here _____ **CONTROLLER**

Signature of officer Date Title

Part VI Declaration of Electronic Return Originator (ERO) and Paid Preparer.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB. I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2024 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

| | | | | | |
|------------------|---|---|---|---|--|
| ERO | ERO's signature | Date | Check if also paid preparer <input checked="" type="checkbox"/> | Check if self-employed <input type="checkbox"/> | ERO's PTIN P00965403 |
| Must Sign | Firm's name (or yours if self-employed) and address | RJI INTERNATIONAL CPAS 18012 SKY PARK CIRCLE, SUITE 200 IRVINE, CA | | | Firm's FEIN 33-0953262 ZIP code 92614 |

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

| | | | | |
|--------------------------------|---|-------------|---|----------------------|
| Paid Preparer Must Sign | Paid preparer's signature | Date | Check if self-employed <input type="checkbox"/> | Paid preparer's PTIN |
| | Firm's name (or yours if self-employed) and address | Firm's FEIN | | |
| | | ZIP code | | |

**ANNUAL REGISTRATION RENEWAL FEE REPORT
TO ATTORNEY GENERAL OF CALIFORNIA**
Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-307, and 310

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

MAIL TO:
Registry of Charities and Fundraisers
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814

WEBSITE ADDRESS:
www.oag.ca.gov/charities

TALLER SAN JOSE HOPE BUILDERS

Name of Organization

List all DBAs and names the organization uses or has used

801 N. BROADWAY

Address (Number and Street)

SANTA ANA, CA 92701

City or Town, State, and ZIP Code

714-543-5105

Telephone Number

E-mail Address

Check if:

- Change of address
 Amended report
 Organization requests email notifications

State Charity Registration Number 131974

Corporation or Organization No. 2799610

Federal Employer ID No. 59-3816355

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, and 310)
Make Check Payable to Department of Justice

| Total Revenue | Fee | Total Revenue | Fee | Total Revenue | Fee |
|---------------------------------|------|--------------------------------------|-------|---|---------|
| Less than \$50,000 | \$25 | Between \$250,001 and \$1 million | \$100 | Between \$20,000,001 and \$100 million | \$800 |
| Between \$50,000 and \$100,000 | \$50 | Between \$1,000,001 and \$5 million | \$200 | Between \$100,000,001 and \$500 million | \$1,000 |
| Between \$100,001 and \$250,000 | \$75 | Between \$5,000,001 and \$20 million | \$400 | Greater than \$500 million | \$1,200 |

PART A - ACTIVITIES

For your most recent full accounting period (beginning 07/01/2024 ending 06/30/2025) list:

Total Revenue (including noncash contributions) \$ 4,020,686 Noncash Contributions \$ 300 Total Assets \$ 7,494,023
Program Expenses \$ 3,887,963 Total Expenses \$ 5,724,448

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

| | Yes | No |
|--|-----|----|
| 1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest? | | X |
| 2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds? | | X |
| 3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? | | X |
| 4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used? | | X |
| 5. During this reporting period, did the organization receive any governmental funding? SEE STATEMENT 9 | X | |
| 6. During this reporting period, did the organization hold a raffle for charitable purposes? | | X |
| 7. Does the organization conduct a vehicle donation program? | | X |
| 8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period? | X | |
| 9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets? | | X |

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.

ZAJID COVA

CONTROLLER

Signature of Authorized Agent

Printed Name

Title

Date

WORKFORCE DEVELOPMENT STAFF ANALYST
714.765.4312
BREYES@ANAHEIM.NET

CITY OF ANAHEIM
ANAHEIM WORKFORCE CONNECTION
CONTRACT #: CALIFORNIANSFORALL YOUTH JOB CORPS:2024-CYWDP-120A-MACC
BLANCA REYES
WORKFORCE DEVELOPMENT STAFF ANALYST
714.765.4312
BREYES@ANAHEIM.NET