Form **990**

Return of Organization Exempt From Income Tax

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

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

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

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning January 01 , 2024, and ending December 31 , 20 24

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

C Name of organization Better Giving Inc

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) 18 Cottekill Rd,

Room/suite

City or town, state or province, country, and ZIP or foreign postal code Rosendale, NY 12472

D Employer identification number 87-3758939

E Telephone number (845) 661-9552

G Gross receipts $ 1,959,155

F Name and address of principal officer: Chauncey St John
18 Cottekill Rd, Rosendale, NY 12472

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

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions.

H(c) Group exemption number

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

J Website: https://better.giving

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 2021

M State of legal domicile: DE

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
See Schedule O.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	3
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	2
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	131,146	1,946,066
	9	Program service revenue (Part VIII, line 2g)	0	0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	13,089
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	131,146	1,959,155
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	26,259	1,161,203
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	260,876
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) 13,546		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,287	225,944
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	27,546	1,648,023
	19	Revenue less expenses. Subtract line 18 from line 12	103,600	311,132

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	118,293	454,304
	21	Total liabilities (Part X, line 26)	0	0
	22	Net assets or fund balances. Subtract line 21 from line 20	118,293	454,304

Part II Signature Block

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

Sign Here

Signature of officer | Date 11/25/2025

Chauncey St John, President

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name			Firm's EIN	
Firm's address			Phone no.	

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

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission:

See Schedule O.

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

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 1,161,203 including grants of $ 1,161,203) (Revenue $ 0)

See Schedule O.

4b (Code:) (Expenses $ 138,405 including grants of $ 0) (Revenue $ 0)

See Schedule O.

4c (Code:) (Expenses $ 92,270 including grants of $ 0) (Revenue $ 0)

See Schedule O .

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

(Expenses $ 0 including grants of $ 0) (Revenue $ 0)

4e Total program service expenses 1,391,878

Part IV Checklist of Required Schedules

		Line	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	✔	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	✔	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		✔
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		✔
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		✔
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		✔
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		✔
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		✔
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		✔
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		✔
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a		✔
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b	✔	
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		✔
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		✔
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		✔
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		✔
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		✔
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		✔
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		✔
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✔
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	✔	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15	✔	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV.*	16		✔
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions	17		✔
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		✔
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		✔
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		✔
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	✔	

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	☐	☑
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	☐	☑
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a	☐	☑
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	☐	☐
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	☐	☐
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	☐	☐
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a	☐	☑
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b	☐	☑
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26	☐	☑
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27	☐	☑
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a	☐	☑
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b	☐	☑
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c	☐	☑
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29	☑	☐
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30	☐	☑
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31	☐	☑
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32	☐	☑
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	☐	☑
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	☐	☑
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	☐	☑
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	☐	☐
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36	☐	☑
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37	☐	☑
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	☑	☐

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

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

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	☐	☐
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a	☐	☑
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*		3b	☐	☐
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	☐	☑
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	☐	☑
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	☐	☑
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c	☐	☐
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a	☐	☑
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b	☐	☐
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a	☐	☑
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	☐	☐
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	☐	☑
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	☐	☑
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	☐	☑
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g	☐	☑
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h	☐	☑
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8	☐	☐
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a	☐	☐
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b	☐	☐
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a	☐	☐
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note:** See the instructions for additional information the organization must report on Schedule O.		13a	☐	☐
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a	☐	☑
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*		14b	☐	☐
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		15	☐	☑
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		16	☐	☑
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.		17	☐	☐

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

Check if Schedule O contains a response or note to any line in this Part VI . . . ☑

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . **1a** 3 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent . **1b** 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	☐	☑
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3	☐	☑
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	☐	☑
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	☐	☑
6	Did the organization have members or stockholders?	6	☐	☑
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	☐	☑
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	☐	☑
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	☑	☐
b	Each committee with authority to act on behalf of the governing body?	8b	☑	☐
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9	☐	☑

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☑ Another's website ☑ Upon request ☐ Other *(explain on Schedule O)*

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

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

Chauncey St John, 18 Cottekill Rd, Rosendale, NY, 12472, (845) 661-9552

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 dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(1) Chauncey St John President	60 0	☐	☐	✔	☐	☐	☐	144,344	0	0
(2) Timothy Stirrup Treasurer	40 0	☐	☐	✔	☐	☐	☐	90,740	0	0
(3) Pallav Vora Secretary	10 0	☐	☐	✔	☐	☐	☐	25,792	0	0
(4)		☐	☐	☐	☐	☐	☐			
(5)		☐	☐	☐	☐	☐	☐			
(6)		☐	☐	☐	☐	☐	☐			
(7)		☐	☐	☐	☐	☐	☐			
(8)		☐	☐	☐	☐	☐	☐			
(9)		☐	☐	☐	☐	☐	☐			
(10)		☐	☐	☐	☐	☐	☐			
(11)		☐	☐	☐	☐	☐	☐			
(12)		☐	☐	☐	☐	☐	☐			
(13)		☐	☐	☐	☐	☐	☐			
(14)		☐	☐	☐	☐	☐	☐			

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(15)		☐	☐	☐	☐	☐	☐			
(16)		☐	☐	☐	☐	☐	☐			
(17)		☐	☐	☐	☐	☐	☐			
(18)		☐	☐	☐	☐	☐	☐			
(19)		☐	☐	☐	☐	☐	☐			
(20)		☐	☐	☐	☐	☐	☐			
(21)		☐	☐	☐	☐	☐	☐			
(22)		☐	☐	☐	☐	☐	☐			
(23)		☐	☐	☐	☐	☐	☐			
(24)		☐	☐	☐	☐	☐	☐			
(25)		☐	☐	☐	☐	☐	☐			
1b Subtotal								260,876	0	0
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								260,876	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 1

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

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

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

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,946,066				
	g	Noncash contributions included in lines 1a–1f	1g	$ 49,754				
	h	**Total.** Add lines 1a–1f			1,946,066			
Program Service Revenue			Business Code					
	2a				0	0	0	0
	b				0	0	0	0
	c				0	0	0	0
	d				0	0	0	0
	e				0	0	0	0
	f	All other program service revenue			0	0	0	0
	g	**Total.** Add lines 2a–2f			0			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			13,089	0	0	0
	4	Income from investment of tax-exempt bond proceeds			0	0	0	0
	5	Royalties			0	0	0	0
			(i) Real	(ii) Personal				
	6a	Gross rents (6a)	0	0				
	b	Less: rental expenses (6b)	0	0				
	c	Rental income or (loss) (6c)	0	0				
	d	Net rental income or (loss)			0	0	0	0
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory (7a)	0	0				
	b	Less: cost or other basis and sales expenses (7b)	0	0				
	c	Gain or (loss) (7c)	0	0				
	d	Net gain or (loss)			0	0	0	0
	8a	Gross income from fundraising events (not including $ 0 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		0	0
	9a	Gross income from gaming activities. See Part IV, line 19	9a	0				
	b	Less: direct expenses	9b	0				
	c	Net income or (loss) from gaming activities			0	0	0	0
	10a	Gross sales of inventory, less returns and allowances	10a	0				
	b	Less: cost of goods sold	10b	0				
	c	Net income or (loss) from sales of inventory			0	0	0	0
Miscellaneous Revenue			Business Code					
	11a				0	0	0	0
	b				0	0	0	0
	c				0	0	0	0
	d	All other revenue			0	0	0	0
	e	**Total.** Add lines 11a–11d			0			
	12	**Total revenue.** See instructions			1,959,155	0	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	897,021	897,021		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	264,182	264,182		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	260,876	90,740	170,136	
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				
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	213,717	139,935	60,236	13,546
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 Schedule O.)				
12 Advertising and promotion	5,332		5,332	
13 Office expenses	6,119		6,119	
14 Information technology				
15 Royalties				
16 Occupancy				
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 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	776		776	
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				
b				
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	1,648,023	1,391,878	242,599	13,546
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 ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			118,293	1	301,206
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b			10c	
	11	Investments—publicly traded securities				11	52,491
	12	Investments—other securities. See Part IV, line 11				12	100,607
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)			118,293	16	454,304
Liabilities	17	Accounts payable and accrued expenses				17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D				25	
	26	**Total liabilities.** Add lines 17 through 25			0	26	0
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ☑ and complete lines 27, 28, 32, and 33.**					
	27	Net assets without donor restrictions			118,293	27	454,304
	28	Net assets with donor restrictions				28	
		Organizations that do not follow FASB ASC 958, check here ☐ 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			118,293	32	454,304
	33	Total liabilities and net assets/fund balances			118,293	33	454,304

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	1,959,155
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,648,023
3	Revenue less expenses. Subtract line 2 from line 1	3	311,132
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	118,293
5	Net unrealized gains (losses) on investments	5	24,879
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	454,304

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain 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. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a	☐	☑
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. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	☐	☑
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.	2c	☐	☐
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a	☐	☑
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b	☐	☐

SCHEDULE A (Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2024
Open to Public Inspection

Name of the organization Better Giving Inc
Employer identification number 87-3758939

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations 0

g Provide the following information about the supported organization(s).

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0	0	131,146	1,946,066	2,077,212
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 **Total.** Add lines 1 through 3	0	0	0	131,146	1,946,066	2,077,212
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)						0
6 **Public support.** Subtract line 5 from line 4						2,077,212

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	0	0	0	131,146	1,946,066	2,077,212
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	0	0	0	0	13,089	13,089
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0
11 **Total support.** Add lines 7 through 10						2,090,301

12 Gross receipts from related activities, etc. (see instructions) . . . 12 | 0

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) . . . 14 | %

15 Public support percentage from 2023 Schedule A, Part II, line 14 . . . 15 | %

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

Calendar year (or fiscal year beginning in)	**(a)** 2020	**(b)** 2021	**(c)** 2022	**(d)** 2023	**(e)** 2024	**(f)** Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . .						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2020	**(b)** 2021	**(c)** 2022	**(d)** 2023	**(e)** 2024	**(f)** Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c 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

15	Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16	Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2024** (line 10c, column (f), divided by line 13, column (f)) . . .	17	%
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 . . ☐

b **$33^1/_3$% 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? *If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1	☐	☐
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2	☐	☐
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a	☐	☐
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in **Part VI** when and how the organization made the determination.*	3b	☐	☐
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.*	3c	☐	☐
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a	☐	☐
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b	☐	☐
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c	☐	☐
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a	☐	☐
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	☐	☐
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c	☐	☐
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in **Part VI**.*	6	☐	☐
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7	☐	☐
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8	☐	☐
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in **Part VI**.*	9a	☐	☐
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI**.*	9b	☐	☐
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI**.*	9c	☐	☐
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a	☐	☐
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b	☐	☐

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 ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a governmental entity (see instructions).*

			Yes	No
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 (*explain in detail in **Part VI***):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

Section C—Distributable Amount				Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D—Distributions			**Current Year**
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required—*provide details in* ***Part VI***)	5	
6	Other distributions (*describe in* ***Part VI***). See instructions.	6	
7	**Total annual distributions.** Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (*provide details in* ***Part VI***). See instructions.	8	
9	Distributable amount for 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 2021 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 underdistributions of prior years			
h	Applied to 2024 distributable amount			
i	Carryover from 2018 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 2024.** 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 . . .			

Schedule B (Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2024

Name of the organization	Employer identification number
Better Giving Inc	87-3758939

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☑ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the $33\frac{1}{3}$% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (**1**) $5,000; or (**2**) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . $ 0

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization	Employer identification number
Better Giving Inc	87-3758939

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Seraphim Labs 68 Circular Road 02-01 Singapore, Singapore, Singapore 049422	$ 1,900,368	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
Better Giving Inc	87-3758939

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
		$	
		$	
		$	
		$	
		$	

Name of organization	Employer identification number
Better Giving Inc	87-3758939

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization: Better Giving Inc

Employer identification number: 87-3758939

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? ☐ Yes ☐ 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? ☐ Yes ☐ 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? ☐ Yes ☐ No

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)? ☐ Yes ☐ No

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 $

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					
b	Contributions					
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ________ %

b Permanent endowment ________ %

c Term endowment ________ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

			Yes	No
	(i) Unrelated organizations?	3a(i)	☐	☐
	(ii) Related organizations?	3a(ii)	☐	☐
b	If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	☐	☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

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

	Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a	Land				
b	Buildings				
c	Leasehold improvements				
d	Equipment				
e	Other				

Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))* . . . . . .

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 Cryptocurrency holdings	100,607	EOY Market Value
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, line 12, col. (B))*	100,607	

Part VIII Investments—Program Related

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

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

Part IX Other Assets

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

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

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	

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

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

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

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

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

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

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

Part XIII Supplemental Information

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

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization: Better Giving Inc

Employer identification number 87-3758939

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	Europe (Including Iceland and Greenland)	0	0	Grantmaking	Grantmaking	121,826
(2)	East Asia and the Pacific	0	0	Grantmaking	Grantmaking	48,873
(3)	North America	0	0	Grantmaking	Grantmaking	18,083
(4)	Middle East and North Africa	0	0	Grantmaking	Grantmaking	4,511
(5)	South America	0	0	Grantmaking	Grantmaking	1,998
(6)	South Asia	0	0	Grantmaking	Grantmaking	31,210
(7)	Sub-Saharan Africa	0	0	Grantmaking	Grantmaking	37,681
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Subtotal	0	0			264,182
b	Total from continuation sheets to Part I					
c	**Totals** (add lines 3a and 3b)	0	0			264,182

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			East Asia and the Pacific	Program support	48,873	Bank transfer			
(2)			Europe (Including Iceland and Greenland)	Program support	121,826	Bank transfer			
(3)			North America	Program support	18,083	Bank transfer			
(4)			South America	Program support	1,998	Bank transfer			
(5)			South Asia	Program support	31,210	Bank transfer			
(6)			Middle East and North Africa	Program support	4,511	Bank transfer			
(7)			Sub-Saharan Africa	Program support	37,681	Bank transfer			
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . ▶

3 Enter total number of other organizations or entities . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)* . . . . ☐ Yes ☑ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* . . . . . . ☐ Yes ☑ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)* . . . . ☐ Yes ☑ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)* . . . . ☐ Yes ☑ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)* . . . . ☐ Yes ☑ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)* . . . . ☐ Yes ☑ No

Part V Supplemental Information

Part and Line Number: **Part I - Line 2**

Better Giving uses standardized due-diligence procedures before making any foreign grants. These include verifying the recipient organization’s legal status, charitable purpose, governance, and non-U.S. activities. All grants are made as unrestricted general-support grants, not earmarked for specific activities. Better Giving requires recipients to provide confirmation of receipt of funds, and it monitors compliance through electronic correspondence, public reporting, and periodic review of the organization’s continued good standing. The organization does not maintain foreign offices, employees, or intermediaries, and does not exercise expenditure responsibility. Grant agreements include standard requirements for lawful charitable use of funds.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047
2024
Open to Public Inspection

Name of the organization: Better Giving Inc
Employer identification number: 87-3758939

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
See supplemental information							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . 74

3 Enter total number of other organizations listed in the line 1 table . . . 0

Part IV Supplemental Information

Part and Line Number: **Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments**

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
1	7000 Languages 6 Liberty Square, Nashua, NH 03060	81-2947369	501(c)(3)	$1,037	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
2	Alex's Lemonade Stand Foundation 111 Presidential Boulevard, Bala Cynwyd, PA 19004	56-2496146	501(c)(3)	$8,490	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
3	Animal Ethics 4200 PARK BLVD, Oakland, CA 10521	46-1062870	501(c)(3)	$17,322	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
4	Anna's Pals 53 Addington Road, Boston, MA 02132	47-5204938	501(c)(3)	$1,009	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
5	Basin Foundation 580 Main Street, Carbondale, CO 81623	88-1993149	501(c)(3)	$1,000	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
6	Big Dog Ranch Rescue 14444 Okeechobee Boulevard, Loxahatchee Groves, FL 33470	26-3184971	501(c)(3)	$5,388	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
7	Biodiversity Group 10980 West Rudasill Road, Tucson, AZ 85743	20-3091062	501(c)(3)	$7,052	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(h) Purpose of grant or assistance: Program Support					
8	Blue Frontier 1530 P NW St, Washington, DC 20005	14-1861309	501(c)(3)	$38,770	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
9	Buckminster Fuller Institute 2261 Market Street, San Francisco, CA 94114	95-3273023	501(c)(3)	$1,008	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
10	Circle of Care for families of children with cancer 144 Danbury Rd, Wilton, CT 06897	26-2224475	501(c)(3)	$7,424	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
11	Coalition for Engaged Education 3131 Olympic Boulevard, Santa Monica, CA 90404	95-4515019	501(c)(3)	$2,004	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
12	CORE Community Organized Relief Effort 910 North Hill Street, Los Angeles, CA 90028	27-1703237	501(c)(3)	$45,491	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
13	Dreams for Schools 16381 Scientific, Irvine, CA 92886	36-4683422	501(c)(3)	$100	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
14	Earth Codes Observatory 2395 Sacramento Street, San Francisco, CA 94115	84-3357747	501(c)(3)	$1,091	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
15	Empower Through Health 13723 1st Ave NW, Seattle, WA 98177	82-4208158	501(c)(3)	$3,198	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
16	Ensemble Mik Nawooj PO BOX 72412, Oakland, CA 94612	46-1336221	501(c)(3)	$13,903	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
17	Fence at the Top PO Box 1399, Rohnert Park, CA 94927	20-8966997	501(c)(3)	$18,180	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
18	For a Day Foundation 12 Desbrosses Street, New York, NY 10013	64-0928748	501(c)(3)	$46,806	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
19	Friends of City Dogs Cleveland 1475 Warren Road, Cleveland, OH 44107	84-5003484	501(c)(3)	$13,737	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
20	Friendship Christian School 3160 Old Atlanta Rd, Suwanee, GA 30024	13-1837418	501(c)(3)	$9,277	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
21	Fully Liberated Youth 1312 17th Street, Denver, CO 80202	85-4272767	501(c)(3)	$6,423	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
22	Global Brigades 220 2nd Avenue South, Seattle, WA 93720	37-1551109	501(c)(3)	$2,314	$0

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
23	HipHopForChange 515 55th Street, Oakland, CA 94609	46-3005727	501(c)(3)	$1,668	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
24	Imagine Worldwide 575 Market Street, San Francisco, CA 94105	82-0990106	501(c)(3)	$8,492	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
25	Innocence Project Of Texas 300 Burnett Street, Fort Worth, TX 76102	20-5992659	501(c)(3)	$13,925	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
26	International Rescue Committee 122 East 42nd Street, New York, NY 56007	13-5660870	501(c)(3)	$100	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
27	International Womens Writing Guild 22 Parsonage Street, Providence, RI 02903	13-2964947	501(c)(3)	$899	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
28	Island Beach Access 197 Langley Loop, Langley, WA 98260	46-2963797	501(c)(3)	$1,014	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
29	Kingdom Culture Ministries 6500 Northwest Drive, Mesquite, TX 75150	58-2498655	501(c)(3)	$1,000	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(h) Purpose of grant or assistance: Program Support					
30	Lemur Conservation Foundation 42500 73RD AVE E, Myakka City, FL 34251	59-3359549	501(c)(3)	$100	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
31	Lets F Cancer 9854 National Blvd, Los Angeles, CA 90034	98-0699811	501(c)(3)	$3,644	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
32	Life Extension Advocacy Foundation 3805 Estella Street, Seaford, NY 11783	46-5328762	501(c)(3)	$844	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
33	Marrvelous Pet Rescues 68 Silver Springs Drive, Key Largo, FL 33037	26-0662699	501(c)(3)	$1,057	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
34	Miami Gay and Lesbian Film Festival 6360 Northeast 4th Court, Miami, FL 33138	65-0830266	501(c)(3)	$8,493	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
35	Mosaic Center for Spiritual Formation P.O. Box 430128, Houston, TX 77243	87-1665772	501(c)(3)	$100	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
36	Nova Ukraine 125 University Avenue, Palo Alto, CA 94305	46-5335435	501(c)(3)	$28,451	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
37	Ocean Web Alliance 7210 Manatee Ave W Ste 1046, Bradenton, FL 34209	87-3286414	501(c)(3)	$8,796	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
38	Ogallala Life Conservation 1512 S Austin St, Amarillo, TX 79102	88-1041801	501(c)(3)	$23,301	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
39	Oliver Patch Project 6505 Southwest 55th Lane, Miami, FL 33155	85-4222759	501(c)(3)	$2,878	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
40	PH8 Foundation 4362 EAGLE ST, Los Angeles, CA 90022	47-5112098	501(c)(3)	$18,108	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
41	Project Hawaii 16-578 Old Volcano Road, Keaau, HI 96749	32-0308897	501(c)(3)	$10,311	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
42	ReCommon PO Box 434, Rollinsville, CO 80474	87-2471795	501(c)(3)	$1,008	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
43	Refugee Girls Need You 468 CORINTHIA DR, MILPITAS, CA 95035	99-1837042	501(c)(3)	$18,752	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
44	Romanian League in Defense of Animals 2041 East St Ste 1373, Concord, CA 94520	32-0176929	501(c)(3)	$17,607	$0

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
45	Save The Waves Coalition 3500 California 1, Davenport, CA 95017	36-4515216	501(c)(3)	$1,754	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
46	SENS Foundation 110 Pioneer Way, Mountain View, CA 94041	94-3473864	501(c)(3)	$473	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
47	Shelter Transport Animal Rescue Team 4521 Van Nuys Boulevard, Los Angeles, CA 91617	45-4258426	501(c)(3)	$57,981	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
48	Silvermine Guild of Artists 1037 Silvermine Road, New Canaan, CT 06840	06-0674168	501(c)(3)	$7,503	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
49	Simbi Community Development 414 BRANNAN ST, San Francisco, CA 95130	86-1594541	501(c)(3)	$1,035	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
50	Spirit DAO 5718 45th Ave N, Kenneth City, FL 33709	99-1308806	501(c)(3)	$488	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
51	Street Youth Ministry of Austin 2026 Guadalupe Street, Austin, TX 78705	46-1449556	501(c)(3)	$100	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(h) Purpose of grant or assistance: Program Support					
52	Teachers Like Me 4128 Tracy Ave, Kansas City, MO 64110	85-1594627	501(c)(3)	$20,369	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
53	Technovation Rwanda 700 El Camino Real #1120 Suite 120, Menlo Park, CA 94025	20-8386654	501(c)(3)	$18,658	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
54	Territorio de Zaguates 420 Montgomery Street, San Francisco, CA 94104	81-4423251	501(c)(3)	$19,302	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
55	The Benjamin Franklin Society Library 2431 Sable Avenue, Orlando, FL 32738	46-0928860	501(c)(3)	$1,052	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
56	The Cat Rescue LV 4022 W Red Coach Ave, N Las Vegas, NV 89031	87-4128654	501(c)(3)	$2,879	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
57	The Wayuu Taya Foundation 225 Broadway, New York, NY 10007	37-1449493	501(c)(3)	$8,544	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
58	Theblockc 3737 Troost Avenue, Kansas City, MO 64109	43-0971728	501(c)(3)	$7,444	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
59	Third Wave Volunteers Inc 3566 Vista Ct, Miami, FL 33133	82-3731839	501(c)(3)	$16,032	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
60	Ventura Land Trust 3451 Foothill Rd, Ventura, CA 93003	01-0769456	501(c)(3)	$1,362	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
61	Walk Church 8625 South Spencer Street, Las Vegas, NV 89123	46-3500167	501(c)(3)	$104,718	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
62	Warrior GMR Foundation 411 East Highway 67, Duncanville, TX 75137	86-2938484	501(c)(3)	$20,657	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
63	Waveny LifeCare Network 3 Farm Road, New Canaan, CT 06840	06-1558520	501(c)(3)	$7,417	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
64	Why Should I Believe 354 CASCADE DR NW, Marietta, GA 30061	45-2673162	501(c)(3)	$1,072	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
65	Women's Empowerment International PO BOX 501406, San Diego, CA 92150	41-2172771	501(c)(3)	$4,862	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
66	SELF 1612 K Street Northwest, Washington, DC 20006	52-1701564	501(c)(3)	$104,618	$0

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
67	Rizoma Field School 2254 W 113TH ST, CHICAGO, IL 60643	-	501(c)(3)	$14,742	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
68	Munay Wasi 381 Oak Ridge Road, Ellenville, NY 12428	-	501(c)(3)	$5,825	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
69	Planting Justice 3463 San Pablo Avenue, Oakland, CA 94603	27-0334905	501(c)(3)	$1,008	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
70	Marine Megafauna Foundation 7750 Okeechobee Boulevard, Miami, FL 33411	46-0645082	501(c)(3)	$15,159	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
71	Jeremiah's Voice 1001 East Hebron Parkway, Carrollton, TX 75010	82-2136169	501(c)(3)	$1,020	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
72	ISLES Inc 10 Wood Street, Trenton, NJ 08618	22-2350832	501(c)(3)	$24,467	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					
73	GSG Missions Inc 1908 NW WILLOW DR, Grain Valley, MO 64029	84-4307639	501(c)(3)	$1,056	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(h) Purpose of grant or assistance: Program Support					
74	Give Refugees A Chance 685 Figueroa Street, Eugene, OR 97402	84-1952931	501(c)(3)	$3,852	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Program Support					

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization	Employer identification number
Better Giving Inc	87-3758939

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art	☐			
2	Art—Historical treasures	☐			
3	Art—Fractional interests	☐			
4	Books and publications	☐			
5	Clothing and household goods	☐			
6	Cars and other vehicles	☐			
7	Boats and planes	☐			
8	Intellectual property	☐			
9	Securities—Publicly traded	☐			
10	Securities—Closely held stock	☐			
11	Securities—Partnership, LLC, or trust interests	☐			
12	Securities—Miscellaneous	☐			
13	Qualified conservation contribution—Historic structures	☐			
14	Qualified conservation contribution—Other	☐			
15	Real estate—Residential	☐			
16	Real estate—Commercial	☐			
17	Real estate—Other	☐			
18	Collectibles	☐			
19	Food inventory	☐			
20	Drugs and medical supplies	☐			
21	Taxidermy	☐			
22	Historical artifacts	☐			
23	Scientific specimens	☐			
24	Archeological artifacts	☐			
25	Other (Digital assets - cryptocurrency)	☑	24	49,754	FMV at date received via exchange quotes; proceeds liquidated and granted to designated nonprofits
26	Other ( )	☐			
27	Other ( )	☐			
28	Other ( )	☐			

29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement	29	0

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

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

Part and Line Number: **Part1 Line32b**

We use an exchange to liquidate the crypto assets to cash (Circle)

SCHEDULE O (Form 990)	Supplemental Information to Form 990 or 990-EZ	2024

Name of the Organization	EIN
Better Giving Inc	87-3758939

Part and Line Number: **Header - Amended Reason**

I would like to update my mission statement and programs to be more descriptive.

Part and Line Number: **Part I Line 1**

Better Giving is a nonprofit dedicated to expanding financial access, digital giving capacity, and long-term sustainability for organizations of every size and mission. We provide free, high-converting online donation processing and support all major gift typesincluding card, ACH, stock, DAF, and cryptoso nonprofits can accept more contributions with less friction and no platform fees. Our integrated savings accounts and professionally managed Sustainability Fund help teams build reserves, strengthen financial stability, and grow future capacity. We reduce administrative burdens through automated tax receipts, unified reporting, donor tools, and simple embeddable forms. As a member-powered commons, we offer transparent, equitable infrastructure and fiscal sponsorship for international nonprofits. Our mission is to help nonprofits raise more today, grow funds for tomorrow, and keep more resources focused on charitable impact.

Part and Line Number: **Part III Line 1**

Better Giving provides free, high-converting donation processing that allows nonprofits to accept credit/debit, ACH, stock, DAF, and crypto contributions without platform fees. Our platform helps organizations raise more by optimizing donor flows, providing recurring giving tools, and enabling simple website embeds that reduce friction and increase completion rates. We automate tax receipts, consolidate donor reporting, and streamline administrative tasks to reduce operational burden. We support thousands of nonprofits in building sustainable revenue through integrated savings options and a professionally managed Sustainability Fund, helping teams grow reserves and strengthen long-term financial stability. As a nonprofit ourselves, we operate as a member-powered commons, offering transparent, accessible fundraising infrastructure to organizations of any size, including fiscal sponsorship support for international nonprofits.

Part and Line Number: **Part III Line 4(a)**

Program: Donation Processing, Compliance, and Grants Administration. Better Giving operates a nonprofit fundraising and financial infrastructure platform designed to make charitable giving more accessible, secure, and effective for organizations of all sizes. As our primary program service, we receive charitable contributions directly from donors, process these gifts across multiple payment types, maintain donor intent, and administer the full compliance and documentation required before issuing grants to the intended beneficiary nonprofits. This includes accepting and processing credit and debit cards, ACH transfers, employer-matched gifts, and increasingly complex non-traditional assets such as cryptocurrency and publicly traded securities. Our program ensures donor contributions are received, verified, and distributed accurately, enabling nonprofits to access funding efficiently and with reduced administrative overhead. We perform due diligence to confirm the charitable status and eligibility of recipient organizations, maintain anti-fraud safeguards, and manage settlement processes that would otherwise be costly or technically burdensome for many nonprofits—particularly small and mid-sized organizations lacking financial infrastructure or specialized expertise. Better Giving also automates tax receipts, maintains donor records, and provides unified reporting that simplifies financial reconciliation for both donors and recipient organizations. By centralizing these processes, the program reduces inefficiencies, eliminates the need for nonprofits to maintain multiple vendor relationships, and lowers the risk of administrative errors or compliance gaps. A core component of this program is our ability to facilitate stock and crypto gifts, which have historically been difficult or inaccessible for many nonprofits. We manage asset receipt, liquidation, valuation, and grantmaking in accordance with IRS regulations, ensuring that nonprofits can benefit from larger or tax-advantaged gifts without taking on the operational or legal burden of handling these assets themselves. As a nonprofit, Better Giving offers these services free of platform fees, making advanced fundraising infrastructure accessible to organizations regardless of budget or technical capacity. This model enables more charitable dollars to reach mission-driven work and levels the playing field for smaller organizations competing for donations in a digital environment. Through this program, Better Giving supports a wide range of nonprofit missions by delivering grants to qualified charitable recipients around the world, expanding access to funding, and improving the sustainability and efficiency of nonprofit fundraising. Expenses reported here represent the grants distributed to beneficiary organizations as well as the operational, administrative, and technological infrastructure necessary to manage donation intake, compliance, and grantmaking activities.

Part and Line Number: **Part III Line 4(b)**

Program: Financial Growth Services for Nonprofits (Savings & Investment Fund). Better Giving provides nonprofits with accessible, low-cost financial growth services designed to strengthen long-term stability, build healthy reserves, and expand organizational capacity. This program includes two integrated offerings: an FDIC-insured Savings option for short- and medium-term reserves, and a professionally managed Sustainability Fund designed to support long-term growth for mission-driven organizations. Together, these services form a comprehensive financial empowerment program that enables nonprofits of all sizes to steward resources responsibly, operate with greater confidence, and support future mission priorities. Through our Savings program, nonprofits can hold idle or unallocated funds in interest-bearing accounts that help preserve purchasing power and reduce financial vulnerability. Many small and mid-sized organizations lack access to straightforward, nonprofit-specific savings tools or face administrative hurdles in opening and managing multiple accounts. Better Giving simplifies this process by providing a centralized, user-friendly structure in which organizations can allocate funds for reserves, upcoming program needs, or general stability. Funds held in Savings are FDIC-insured up to applicable limits, ensuring that organizations can maintain secure and risk-appropriate reserves without additional administrative work. Our Sustainability Fund supports nonprofits seeking long-term financial growth by offering access to a pooled investment vehicle managed by professional advisors. Many nonprofits—especially those without large endowments or investment committees—lack the expertise or resources required to participate in diversified investment strategies. This program removes those barriers by providing an accessible pathway to long-term growth, with clear reporting, prudent oversight, and an emphasis on helping organizations build durable financial resilience. While investment results are not guaranteed, the Fund is structured to give nonprofits an opportunity to grow reserves over time so they can better weather economic fluctuations, pursue multi-year projects, and sustain mission-critical operations. Both the Savings and Sustainability Fund programs are integrated directly into Better Giving's platform, allowing nonprofits to track contributions, grant inflows, reserve allocations, and investment balances in a unified environment. We provide reporting tools, statements, and administrative support to ease back-office burden and reduce the need for additional vendors or financial intermediaries. By simplifying the management of both liquid reserves and long-term funds, this program empowers nonprofits to make informed financial decisions while maintaining compliance and transparency. As a nonprofit ourselves, Better Giving provides these financial growth services without platform or fund-management fees, and has no minimum requirements, ensuring equitable access for organizations regardless of size, budget, or prior financial sophistication. This program strengthens the nonprofit sector by democratizing access to financial stewardship tools traditionally available only to larger organizations, thereby allowing charities to focus more resources on mission while building long-term security and capacity. Expenses reported here reflect the operational, administrative, and technological infrastructure required to provide these services.

Part and Line Number: **Part III Line 4(c)**

Program: Fiscal Sponsorship. Better Giving provides fiscal sponsorship services that enable mission-aligned charitable initiatives—particularly international nonprofits and emerging community projects—to receive U.S. tax-deductible contributions and access compliant, transparent financial management without needing to establish their own U.S. 501(c)(3) entity. This program expands access to the U.S. philanthropic landscape, lowers administrative and regulatory barriers for smaller or non-U.S. organizations, and ensures that charitable projects around the world can benefit from resources, donors, and opportunities that would otherwise be inaccessible. As part of this program, Better Giving conducts due diligence to confirm that sponsored organizations and sponsored activities meet IRS requirements for charitable purpose, public benefit, and allowable use of funds. We oversee gift acceptance, maintain donor records, and ensure that funds received for sponsored partners are used exclusively for their stated charitable activities. This includes compliance measures related to expenditure responsibility, anti-money-laundering controls, organizational verification, and ongoing monitoring. For international nonprofits, our fiscal sponsorship program serves as a gateway to U.S. philanthropy, allowing supporters to give tax-deductible donations while ensuring that funds are stewarded responsibly and distributed in accordance with U.S. charitable standards. Many international organizations—especially those operating in developing regions or without access to sophisticated financial infrastructure—lack the ability to receive U.S. charitable contributions directly. By sponsoring these organizations, Better Giving bridges that gap, expanding the reach of global charitable work and ensuring that high-impact initiatives can connect with donors who care deeply about their missions. For domestic initiatives, Better Giving's fiscal sponsorship program provides a home for new, emerging, or project-based charitable efforts that have not yet established their own nonprofit entity. Rather than navigating the lengthy and complex process of forming and maintaining a standalone 501(c)(3), sponsored projects receive administrative support, donation processing, fund management, and access to Better Giving's broader charitable infrastructure. This allows project leaders to focus on program execution, community engagement, and direct impact while we handle the administrative responsibilities that ensure compliance and accountability. All fiscal sponsorship partners receive access to Better Giving's donation platform, including support for ACH, card, stock, and crypto contributions; automated tax documentation; unified reporting; and grant disbursement. Funds are held and managed in accordance with IRS rules for sponsored projects, and disbursements are made only for approved charitable purposes. Our team provides clear documentation, transparent financial records, and ongoing review to ensure that sponsored organizations and projects maintain appropriate stewardship and alignment with their charitable objectives. As a nonprofit ourselves, Better Giving provides fiscal sponsorship without platform fees, removing financial barriers that often prevent small or emerging initiatives from participating in compliant U.S. fundraising. This program strengthens global and local charitable ecosystems by expanding access, reducing administrative burden, and supporting organizations that need a sponsor in order to pursue meaningful mission-driven work. Expenses reported here include program administration, compliance oversight, partner support, and grant distributions made on behalf of sponsored organizations and projects.

Part and Line Number: **Part VI Line 11(a)**

Distribute via shared permission link with time for review and feedback prior to filing, include relevant backup details and accounting to validate inputs.

Part and Line Number: **Part VI Line 12(c)**

Quarterly reviews and board meetings

Part and Line Number: **Part VI Line 15**

Benchmarked comparable salaries using industry research, discussed and documented internally

Part and Line Number: **Part VI Line 19**

Yes, upon request and through Candid Guidestar where we are Platinum Rated

Part and Line Number: **Part VIII - Line 1**

During 2024, Better Giving received grant funds from Seraphim Labs, which had previously held funds as agent/custodian for numerous individual donors impacted by the Terra blockchain collapse. As the owner of Seraphim Labs, Chauncey St. John confirms that Seraphim's grants to Better Giving represented aggregated donor funds from individuals intended for charitable regranting to the originally designated nonprofits. Better Giving treated these receipts as pass-through contributions from individual donors to support designated qualified nonprofits, rather than a single donor establishing foundation-like support.

Form **8453-TE**

Department of the Treasury
Internal Revenue Service

Tax Exempt Entity Declaration and Signature for Electronic Filing

For calendar year 2024, or tax year beginning ______________ , 2024, and ending ______________ , 20 ______

For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP
Go to *www.irs.gov/Form8453TE* for the latest information.

OMB No. 1545-0047

2024

Name of filer	EIN or SSN

Part I Type of Return and Return Information

Check the box for the type of return being filed with Form 8453-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a,** or **10a** below, and the amount on that line of the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b,** or **10b,** whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

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

Part II Declaration of Officer or Person Subject to Tax

11a ☐ I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

b ☐ If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that ☐ I am an officer of the above named entity or ☐ I am the person subject to tax with respect to (name of entity) ______________________________ , (EIN) ______________ ,

and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund.

Sign Here

Chauncey St John

Signature of officer or person subject to tax	Date	Title, if applicable

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only					
	ERO's signature	Date	Check if also paid preparer ☐	Check if self-employed ☐	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code				EIN
					Phone no.

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only					
	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ☐	PTIN
	Firm's name			Firm's EIN	
	Firm's address			Phone no.	