

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)

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2024 calendar year, or tax year beginning, and ending

B Check if applicable: C Name of organization THE BROWN LEDGE FOUNDATION, INC. D Employer identification number ** - *** 1055 E Telephone number 802-862-2442 G Gross receipts \$ 5,492,400 F Name and address of principal officer: HILARY CHIANG (AS OF JUNE) PO BOX 862 COLCHESTER VT 05446 H(a) Is this a group return for subordinates? H(b) Are all subordinates included? I Tax-exempt status: J Website: WWW.BROWNLEDGE.ORG K Form of organization: L Year of formation: 1996 M State of legal domicile: VT

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Briefly describe the organization's mission... 2 Check this box... 3 Number of voting members... 4 Number of independent voting members... 5 Total number of individuals employed... 6 Total number of volunteers... 7a Total unrelated business revenue... 7b Net unrelated business taxable income... 8 Contributions and grants... 9 Program service revenue... 10 Investment income... 11 Other revenue... 12 Total revenue... 13 Grants and similar amounts paid... 14 Benefits paid... 15 Salaries... 16a Professional fundraising fees... 16b Total fundraising expenses... 17 Other expenses... 18 Total expenses... 19 Revenue less expenses... 20 Total assets... 21 Total liabilities... 22 Net assets or fund balances.

Part II Signature Block

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

Sign Here: Signature of officer HILARY CHIANG (AS OF JUNE) EXECUTIVE DIRECTOR Date Preparer's name RANDALL L. SARGENT, CPA Preparer's signature Date Check self-employed PTIN Firm's name JMM & ASSOCIATES, PC Firm's EIN ** - *** 0081 Firm's address COLCHESTER, VT 05446 Phone no. 802-655-5665

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

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: 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 [X] No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. 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 \$ 2,148,414 including grants of \$ 273,803) (Revenue \$ 1,990,565) BROWN LEDGE IS A RESIDENTIAL CAMP FOR GIRLS AGES 10-17 LOCATED ON MALLETTS BAY OF LAKE CHAMPLAIN IN NORTHERN VERMONT. WE ARE KNOWN FOR OUR FREEDOM OF CHOICE PHILOSOPHY, OUR EXCELLENT INSTRUCTION IN OUR ACTIVITIES, AND A LIVELY COMMUNITY THAT FOSTERS INDEPENDENT LIVING AND PERSONAL GROWTH.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$) N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) N/A

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

4e Total program service expenses 2,148,414

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements for various schedules (A through H).

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	X	
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		X
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
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		X
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		X
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		X
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		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
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		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
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		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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		
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		X
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		X
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.	X	

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		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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	104		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X
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			X
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			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
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			X
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			X
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			X
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			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
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			X
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 instructions and file Form 4720, Schedule N.	15			X
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			X
17	Section 501(c)(21) organizations. Did the trust, 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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (7); 1b Enter the number of voting members included on line 1a, above, who are independent (7); 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? (X); 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? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 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? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 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. (X)

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b 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 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 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 (X); b Other officers or key employees of the organization (X); 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? (X); 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NONE
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 [X] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records.

SHANNON ELFORD
COLCHESTER

PO BOX 862

VT 05446

802-253-4822

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 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 (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ABBY LOVSHIN-SMITH (UNTIL DECEMBER)	40.00									
EXECUTIVE DIRECTOR	0.00			X			92,644	0	37,805	
(2) HILARY CHIANG (AS OF JUNE)	40.00									
EXECUTIVE DIRECTOR	0.00			X			53,797	0	7,546	
(3) HILLARY AMSTER	2.00									
PRESIDENT	0.00	X		X			0	0	0	
(4) JACKIE MELTZER	2.00									
VICE PRESIDENT	0.00	X		X			0	0	0	
(5) JEFF BUCKMAN	2.00									
TREASURER	0.00	X		X			0	0	0	
(6) JEAN BARTLETT	2.00									
SECRETARY	0.00	X		X			0	0	0	
(7) DIDI ROMLEY	2.00									
DIRECTOR	0.00	X					0	0	0	
(8) DAVID TITLE	2.00									
DIRECTOR	0.00	X					0	0	0	
(9) MARI MCDONALD	2.00									
DIRECTOR	0.00	X					0	0	0	
(10) ALEX MCCLURE (UNTIL MARCH)	2.00									
DIRECTOR	0.00	X					0	0	0	
(11) HILARY CHIANG (UNTIL JANUARY)	2.00									
DIRECTOR	0.00	X					0	0	0	

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 (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal							146,441		45,351	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							146,441		45,351	

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 0

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
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? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

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 0

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			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,240,425		
	g Noncash contributions included in lines 1a-1f	1g	\$ 11,218		
	h Total. Add lines 1a-1f		3,240,425		
Program Service Revenue	2a TUITION	Business Code 713990	1,990,565	1,990,565	
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f		1,990,565		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		155,207		155,207
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6a Gross rents	(i) Real 6a 9,000			
	b Less: rental expenses	6b			
	c Rental inc. or (loss)	6c 9,000			
	d Net rental income or (loss)		9,000		9,000
	7a Gross amount from sales of assets other than inventory	(i) Securities 7a			1,500
	b Less: cost or other basis and sales exps.	7b			
	c Gain or (loss)	7c		1,500	
	d Net gain or (loss)		1,500	1,500	
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a	51,885		
	b Less: direct expenses	8b	28,265		
	c Net income or (loss) from fundraising events		23,620		
9a Gross income from gaming activities. See Part IV, line 19	9a				
b Less: direct expenses	9b				
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	10a	34,685			
b Less: cost of goods sold	10b	35,955			
c Net income or (loss) from sales of inventory		-1,270		-1,270	
Miscellaneous Revenue	11a OTHER INCOME	Business Code 900099	9,133		9,133
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d		9,133		
12 Total revenue. See instructions		5,428,180	1,992,065	0	172,070

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	273,803	273,803		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	191,792	100,977	56,300	34,515
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	826,305	791,326	25,203	9,776
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,559	6,446		113
9 Other employee benefits	25,659	25,659		
10 Payroll taxes	63,307	53,875	6,964	2,468
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	1,800		1,800	
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees	10,167		10,167	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	15,907	2,978	12,510	419
12 Advertising and promotion	17,828	954	8,198	8,676
13 Office expenses	50,061	21,639	16,569	11,853
14 Information technology				
15 Royalties				
16 Occupancy	127,921	90,822	36,867	232
17 Travel	15,184	11,528	2,597	1,059
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	25,737	25,184	553	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	178,099	158,575	12,591	6,933
23 Insurance	79,840	52,359	27,481	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a PROGRAM EXPENSES	538,984	532,101	6,351	532
b ALUMNI	25,512	188	98	25,226
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	2,474,465	2,148,414	224,249	101,802
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)	
		Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing	187,782	1	138,455
	2	Savings and temporary cash investments	27,196	2	10,846
	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	13,385
	9	Prepaid expenses and deferred charges	24,380	9	29,083
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	5,947,508		
	10b	Less: accumulated depreciation	2,333,076	10c	3,614,432
	11	Investments—publicly traded securities	2,931,389	11	5,829,940
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	18,979	15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	6,575,811	16	9,636,141	
Liabilities	17	Accounts payable and accrued expenses	8,644	17	16,221
	18	Grants payable		18	
	19	Deferred revenue	147,582	19	118,560
	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	156,226	26	134,781
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	4,930,560	27	4,737,928
	28	Net assets with donor restrictions	1,489,025	28	4,763,432
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	6,419,585	32	9,501,360
33	Total liabilities and net assets/fund balances	6,575,811	33	9,636,141	

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	5,428,180
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,474,465
3	Revenue less expenses. Subtract line 2 from line 1	3	2,953,715
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,419,585
5	Net unrealized gains (losses) on investments	5	128,060
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	9,501,360

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	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.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
3b	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		

SCHEDULE A
(Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2024

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public
Inspection

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

Name of the organization THE BROWN LEDGE FOUNDATION, INC.	Employer identification number **-***1055
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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
 - 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?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(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

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

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

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

Section B. Total Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.); 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) 70.05%. Row 16: Public support percentage from 2023 Schedule A, Part III, line 15 89.07%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) 2%. Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17 1%.

- 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 [X].
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 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
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? <i>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.</i>		
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? <i>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.</i>		
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)? <i>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).</i>		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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 each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>			
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? <i>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.</i>			
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? <i>If "Yes" or "No," provide details in Part VI.</i>			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
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 2024 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required—explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2024		
a	From 2019		
b	From 2020		
c	From 2021		
d	From 2022		
e	From 2023		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2024 distributable amount		
i	Carryover from 2019 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2024 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2024 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2025. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2020		
b	Excess from 2021		
c	Excess from 2022		
d	Excess from 2023		
e	Excess from 2024		

SCHEDULE D (Form 990) (Rev. December 2024) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE BROWN LEDGE FOUNDATION, INC.

Employer identification number

-*1055

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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... Yes No, 6 Did the organization inform all grantees... Yes No.

Part II Conservation Easements

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

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution, 3 Number of conservation easements modified, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy..., 6 Staff and volunteer hours..., 7 Amount of expenses..., 8 Does each conservation easement..., 9 In Part XIII, describe how the organization reports...

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.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report..., 1b If the organization elected, as permitted under FASB ASC 958, to report..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain...

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?

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?
b If "Yes," explain the arrangement in Part XIII and complete the following table.
c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

Part V Endowment Funds

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 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 57.22%
c Term endowment 42.78%
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:
(i) Unrelated organizations?
(ii) Related organizations?
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

Table with 2 columns: Yes, No. Rows: 3a(i) Unrelated organizations?, 3a(ii) Related organizations?, 3b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment

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

Table with 5 columns: Description of property, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 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.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include (1) Financial derivatives, (2) Closely held equity interests, (3) Other (A-H), and Total.

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.

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows (1) through (9) and Total.

Part IX Other Assets

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

Table with 2 columns: (a) Description, (b) Book value. Rows (1) through (9) and Total.

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.

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes (1) Federal income taxes, and Total.

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a shaded area for calculations.

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a shaded area for calculations.

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.

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS
ENDOWMENT ASSETS ARE INVESTED IN A MANNER THAT IS INTENDED TO PRODUCE SUFFICIENT EARNINGS TO MEET THE ORGANIZATION'S CURRENT AND FUTURE OPERATIONAL NEEDS.

**SCHEDULE G
(Form 990)**

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

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19; or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

THE BROWN LEDGE FOUNDATION, INC.

Employer identification number

-*1055

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of nongovernment grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Total

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

.....
.....
.....
.....
.....

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

Table with 5 columns: (a) Event #1, (b) Event #2, (c) Other events, (d) Total events. Rows include Revenue (Gross receipts, Less: Contributions, Gross income) and Direct Expenses (Cash prizes, Noncash prizes, Rent/facility costs, Food and beverages, Entertainment, Other direct expenses, Direct expense summary, Net income summary).

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

Table with 5 columns: (a) Bingo, (b) Pull tabs/instant bingo/progressive bingo, (c) Other gaming, (d) Total gaming. Rows include Revenue (Gross revenue) and Direct Expenses (Cash prizes, Noncash prizes, Rent/facility costs, Other direct expenses, Volunteer labor, Direct expense summary, Net gaming income summary).

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

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain:

SCHEDULE I (Form 990)

(Rev. December 2024)

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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE BROWN LEDGE FOUNDATION, INC.

Employer identification number

-*1055

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?
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.

Table with 8 columns: (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. Rows 1-9.

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 SCHOLARSHIPS	55	273,803			
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS
 ALL SCHOLARSHIP APPLICATIONS ARE AVAILABLE IN NOVEMBER AND ARE DUE TO THE
 SCHOLARSHIP COMMITTEE IN FEBRUARY. ALL SCHOLARSHIPS ARE APPROVED BY THE
 SCHOLARSHIP COMMITTEE THAT CONSISTS OF FIVE MEMBERS.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

THE BROWN LEDGE FOUNDATION, INC.

Employer identification number

-*1055

FORM 990 - ORGANIZATION'S MISSION

BROWN LEDGE IS A NON-PROFIT CAMP THAT EXISTS TO DEVELOP COMMUNITY, SELF-DISCIPLINE, RESPONSIBILITY AND ACHIEVEMENT IN GIRLS AND YOUNG WOMEN, THROUGH SELF-DIRECTED PARTICIPATION IN VARIED ACTIVITIES IN A HIGH QUALITY SUMMER PROGRAM.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE 990 IS REVIEWED INTERNALLY WITH THE EXECUTIVE DIRECTOR AND OPERATIONS COORDINATOR AND THE BOARD IS PROVIDED WITH THE PUBLIC DOCUMENT AFTER FILING.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE BOARD MEETS ON AN ANNUAL BASIS TO EVALUATE THE EXECUTIVE DIRECTOR'S COMPENSATION AND TO AWARD PERFORMANCE BASED BONUSES.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

Form **4562**

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

2024

Attachment
Sequence No. **179**

Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

THE BROWN LEDGE FOUNDATION, INC.

Identifying number

-*1055

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,220,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	3,050,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2023 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	92,337

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2024	17	85,759
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2024 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	178,096
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2024)

DAA

THERE ARE NO AMOUNTS FOR PAGE 2

-*1055

Federal Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Sec Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Prior MACRS:											
11	TACK	3/31/97	4,300				4,300	7	HY S/L	4,300	0
13	SADDLES	3/31/97	3,600				3,600	5	HY S/L	3,600	0
16	BRIDLES	3/31/97	150				150	7	HY S/L	150	0
18	FLYING JR BOAT (2)	3/31/97	10,000				10,000	7	HY S/L	10,000	0
27	SAIL BOATS (3)	3/31/97	7,000				7,000	7	HY S/L	7,000	0
29	CANOES (8)	3/31/97	800				800	7	HY S/L	800	0
34	TENNIS COURTS	3/31/97	25,000				25,000	15	HY S/L	25,000	0
35	COURT FENCING	5/01/97	2,637				2,637	7	HY S/L	2,637	0
36	COURT DRAINAGE	5/01/97	4,450				4,450	15	HY S/L	4,450	0
56	SEWER SYSTEM	3/31/97	212,600				212,600	40	MMS/L	142,398	5,315
57	BUILDINGS	3/31/97	310,800				310,800	40	MMS/L	208,165	7,770
58	CABIN-ROOFING	4/10/97	4,400				4,400	40	MMS/L	2,938	110
59	HORSE JUMP	6/10/97	2,538				2,538	7	HY S/L	2,538	0
60	DINING ROOM RENOVATION	6/10/00	21,717				21,717	40	MMS/L	12,782	543
61	STORAGE SHED	6/01/98	1,399				1,399	40	MMS/L	894	35
62	DINING ROOM CHAIRS	6/15/98	839				839	7	HY S/L	839	0
63	SADDLES	6/15/98	2,955				2,955	7	HY S/L	2,955	0
74	DINING ROOM	3/10/99	4,941				4,941	40	MMS/L	3,070	124
75	POWER UPGRADE	7/10/99	71,938				71,938	40	MMS/L	44,012	1,798
76	BUILDING IMPROVEMENTS	6/15/99	17,272				17,272	40	MMS/L	10,600	432
77	DINING ROOM	6/01/01	925,388				925,388	40	MMS/L	521,903	23,134
78	NEW ROOF	4/27/00	4,995				4,995	40	MMS/L	2,963	125
79	NEW ROOF	9/13/00	9,950				9,950	40	MMS/L	5,798	249
81	OVERHEAD DOOR	10/26/00	1,490				1,490	15	HY S/L	1,490	0
87	REROOF THREE CABINS	6/01/01	3,700				3,700	40	MMS/L	2,092	93
91	DRY HYDRANT	1/01/02	17,019				17,019	15	HY S/L	17,019	0
93	DINING TABLES	6/01/01	20,026				20,026	7	HY S/L	20,026	0
94	DINING CHAIRS	6/01/01	1,651				1,651	7	HY S/L	1,651	0
95	RANGE, GRIDDLE & HOOD	6/01/01	14,706				14,706	7	HY S/L	14,706	0
96	DISHWASHER & HOOD	6/01/01	19,071				19,071	7	HY S/L	19,071	0
97	DISH TABLE	6/01/01	4,071				4,071	7	HY S/L	4,071	0
98	PROOFING BOX	6/01/01	1,730				1,730	7	HY S/L	1,730	0
99	WALK-IN COOLER	6/01/01	8,718				8,718	7	HY S/L	8,718	0
100	POT SINK	6/01/01	1,244				1,244	7	HY S/L	1,244	0
101	VEGETABLE SINK	6/01/01	410				410	7	HY S/L	410	0
102	SERVING COUNTERS	6/01/01	4,120				4,120	7	HY S/L	4,120	0
103	WORK TABLE	6/01/01	259				259	7	HY S/L	259	0
104	POT RACK	6/01/01	337				337	7	HY S/L	337	0
105	MISC. HARDWARE	6/01/01	822				822	7	HY S/L	822	0
106	SHELVING	6/01/01	784				784	7	HY S/L	784	0
107	FREEZER - HOBART	6/01/01	3,250				3,250	7	HY S/L	3,250	0
110	UTILITY CARTS	6/01/01	736				736	7	HY S/L	736	0
111	TELEPHONE NETWORK	11/20/00	1,924				1,924	7	HY S/L	1,924	0
117	WOMEN'S BATH	6/01/02	85,631				85,631	40	MMS/L	46,119	2,141
120	ELECTRICAL UPGRADE	6/10/02	9,420				9,420	40	MMS/L	5,080	236
121	STORAGE SHED	8/01/02	1,299				1,299	40	MMS/L	688	32
122	TENNIS COURTS ROLLER	6/01/02	1,700				1,700	7	HY S/L	1,700	0
124	SEWER HOOKUP	6/01/02	2,474				2,474	7	HY S/L	2,474	0
125	CAMPER BATHHOUSE	6/10/04	348,833				348,833	40	MMS/L	170,422	8,720
126	THEATRE BUILDING	10/10/03	32,511				32,511	40	MMS/L	16,698	813
128	TENNIS COURT FENCE	6/10/03	1,370				1,370	7	HY S/L	1,370	0
130	THEATRE EQUIPMENT	6/15/03	12,722				12,722	7	HY S/L	12,722	0
131	CHAIRS (30)	6/15/03	1,304				1,304	7	HY S/L	1,304	0
135	BUILDING ADDITION - BATH	6/01/04	16,610				16,610	40	MMS/L	8,112	415
136	DIVING BOARD & STAND	6/01/04	8,114				8,114	7	HY S/L	8,114	0
140	THEATRE LIGHT GRID SUSPENSION	6/01/04	9,531				9,531	10	HY S/L	9,531	0
142	BROOK STABILIZATION	6/01/04	4,402				4,402	15	HY S/L	4,402	0
143	CABIN ROOFING	9/01/04	7,184				7,184	40	MMS/L	3,469	179
146	JUNIOR SAILBOAT - ROCKY	6/01/05	2,000				2,000	7	HY S/L	2,000	0
147	JUNIOR SAILBOAT - BULLWINKLE	6/01/05	2,000				2,000	7	HY S/L	2,000	0
150	WATER CONECTION	6/01/06	21,715				21,715	40	MMS/L	9,524	543
152	KUBOTA TRACTOR	6/13/06	13,401				13,401	7	HY S/L	13,401	0
153	WATER HOOK-UP FD#2	7/01/06	43,768				43,768	40	MMS/L	19,102	1,094
156	MATTRESS AND BOX SPRINGS	6/15/06	3,413				3,413	7	HY S/L	3,413	0
158	DRINKING WATER SYSTEM	1/24/07	2,200				2,200	7	HY S/L	275	0
162	LARGE RIDING RING - FOOTING	6/01/07	22,600				22,600	7	HY S/L	22,600	0
165	ELECTRICAL SVC UPGRADE	6/01/07	12,716				12,716	40	MMS/L	5,259	318
166	DINING HALL/OTHER	6/01/07	16,744				16,744	40	MMS/L	6,928	418

-*1055

Federal Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv	Meth	Prior	Current	
170	REBUILD STUDIO	12/31/08	38,741			38,741	40	MMS/L	14,557	969	
174	DINING ROOM	10/13/09	31,665			31,665	40	MMS/L	11,250	792	
175	BATHHOUSE	8/27/09	1,154			1,154	40	MMS/L	416	29	
176	POINT HOUSE	7/17/09	13,569			13,569	40	MMS/L	4,903	339	
178	THEATRE VENT	12/02/09	1,161			1,161	40	MMS/L	407	29	
179	RIDING EQUIPMENT	7/01/09	4,647			4,647	7	HY S/L	4,647	0	
181	HOBIE 16	7/01/09	9,000			9,000	7	HY S/L	9,000	0	
184	BUILDING IMPROVEMENTS	7/01/10	22,129			22,129	40	MMS/L	7,445	553	
185	SKI BOAT	7/01/10	19,850			19,850	7	HY S/L	19,850	0	
186	LAUNDRY DRYER	7/01/10	2,915			2,915	5	HY S/L	2,915	0	
188	CHRIS CRAFT LANCER 23'	8/01/11	11,000			11,000	7	HY S/L	11,000	0	
	Sold/Scrapped: 12/31/24										
189	WATER CONNECTION	7/01/11	37,474			37,474	40	MMS/L	11,672	937	
191	LIGHTS - THEATRE	7/01/11	1,984			1,984	7	HY S/L	1,984	0	
192	ANNEX CABIN	7/01/11	24,861			24,861	40	MMS/L	7,745	622	
193	SANITATION IMPROVEMENT	7/01/11	16,351			16,351	40	MMS/L	5,093	409	
194	ADDITION	7/01/11	25,724			25,724	40	MMS/L	8,012	643	
195	HORSE BARN REFURBISH	7/01/12	177,098			177,098	40	MMS/L	50,730	4,427	
196	GROVE CABIN	12/31/12	724			724	40	MMS/L	200	18	
197	THEATRE LIGHTING	7/01/12	105,497			105,497	40	MMS/L	30,219	2,638	
198	ANNEX CABIN	7/01/12	10,083			10,083	40	MMS/L	2,889	252	
199	SANITATION IMPROVEMENT	7/01/12	2,871			2,871	40	MMS/L	823	72	
200	IMPROVEMENTS	4/09/12	35,025			35,025	40	MMS/L	10,253	876	
202	SWIM DOCK	6/22/13	15,000			15,000	7	HY S/L	15,000	0	
	Sold/Scrapped: 12/31/24										
203	J24 SAILBOAT & TRAILER	7/24/13	5,500			5,500	7	HY S/L	5,500	0	
205	THEATRE RIGGING	7/23/13	17,064			17,064	7	HY S/L	17,064	0	
206	VIDEO EQUIP LIGHT GRID	12/03/13	17,200			17,200	7	HY S/L	17,200	0	
207	NEW GROVE CABINS	7/01/13	99,483			99,483	40	MMS/L	26,011	2,487	
208	ANNEX CABINS	7/01/13	175,706			175,706	40	MMS/L	45,940	4,393	
209	SANITARY	7/01/13	63,725			63,725	40	MMS/L	16,414	1,593	
210	THEATRE/DANCE CABIN	7/01/13	6,405			6,405	40	MMS/L	1,674	160	
211	BATH HOUSE	11/17/14	2,455			2,455	40	MMS/L	560	61	
212	BUILDING IMPROVEMENTS	10/02/14	22,819			22,819	40	MMS/L	5,253	570	
213	NEW ENGINE # 188	8/07/15	13,519			13,519	7	HY S/L	13,519	0	
214	SANITARY	7/01/15	15,960			15,960	40	MMS/L	3,375	399	
215	ELECTRICAL SVC UPGRADE	7/01/15	4,775			4,775	40	MMS/L	1,010	119	
217	BUILDING IMPROVEMENTS	7/01/15	84,400			84,400	40	MMS/L	17,847	2,110	
218	COMPUTER	11/19/15	1,895			1,895	5	HY S/L	1,895	0	
220	MEN'S BATH	7/01/16	95,132			95,132	40	MMS/L	17,738	2,378	
221	BUILDING IMPROVEMENTS	7/01/16	129,904			129,904	40	MMS/L	24,222	3,247	
222	EQUIPMENT	7/01/16	106			106	5	HY S/L	106	0	
			<u>3,803,970</u>			<u>3,803,970</u>			<u>1,947,297</u>	<u>85,759</u>	

Other Depreciation:

9	LAND	3/31/97	220,769			220,769	0	-- Land	0	0
223	Website 2015	1/01/16	32,397			32,397	5	MO S/L	32,397	0
224	Sewer Pump	10/20/17	1,112			1,112	10	MO S/L	685	112
225	Skunk Junction Cabins	7/26/17	17,058			17,058	40	MO S/L	2,736	427
226	Electrical Work - Grove	4/06/17	2,206			2,206	10	MO S/L	1,489	221
227	Hangout & Outback Staff Cabins	7/26/17	14,852			14,852	40	MO S/L	2,383	371
228	Vista Cabin	7/26/17	50,260			50,260	40	MO S/L	8,062	1,257
229	16' Peterboro Boat	6/15/17	3,000			3,000	7	MO S/L	2,821	179
230	10 Beds (5 bunks)	7/07/17	2,100			2,100	7	MO S/L	1,950	150
231	Hot Water Heater	8/08/17	8,750			8,750	10	MO S/L	5,615	875
232	Beehive	5/09/18	84,862			84,862	40	MO S/L	12,022	2,122
233	New Website	5/04/18	24,300			24,300	5	MO S/L	24,300	0
234	Dining Room Roof	4/19/18	56,815			56,815	20	MO S/L	16,098	2,840
235	Hans and Eva Cabin	7/16/18	18,238			18,238	40	MO S/L	2,470	456
236	Cabin Work 18-16; 18-20	12/21/18	34,474			34,474	40	MO S/L	4,309	862
237	New Sailboats	10/18/18	15,636			15,636	7	MO S/L	11,541	2,234
238	Convection Oven	6/08/18	7,995			7,995	10	MO S/L	4,464	799
239	Roadside Renovations	7/25/19	66,266			66,266	40	MO S/L	7,317	1,657
241	Bathroom Renovations	6/27/19	41,400			41,400	20	MO S/L	9,315	2,070
242	Director's Cabin Roof and Porch Work	9/03/19	44,760			44,760	20	MO S/L	9,698	2,238
243	Gator Side by Side	6/11/19	6,100			6,100	5	MO S/L	5,592	508
244	Program Recreational Area Upgrades	12/31/19	36,116			36,116	20	MO S/L	7,223	1,806
245	Road Improvements and Drainage	6/26/19	7,725			7,725	7	MO S/L	4,966	1,104
246	Infirmary	4/29/20	4,610			4,610	40	MO S/L	423	115

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Federal Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
247	Annex Improvement	11/10/20	12,551			12,551	40 MO S/L	994	313
248	Health Center	12/10/20	36,189			36,189	40 MO S/L	2,790	904
249	Health Center	9/03/21	40,812			40,812	40 MO S/L	2,381	1,020
250	Ski Boat and Trailer	5/15/22	20,000			20,000	7 MO S/L	4,762	2,857
251	Diving Dock	6/01/22	17,990			17,990	7 MO S/L	4,069	2,570
252	Dining Room Chairs	6/01/22	6,539			6,539	7 MO S/L	1,479	934
253	Kitchen Stand Mixer	6/01/22	5,262			5,262	7 MO S/L	1,190	752
254	Riding Rings	12/31/22	17,000			17,000	7 MO S/L	2,429	2,428
255	Director's Cabin Bathroom Refresh	1/01/22	8,473			8,473	20 MO S/L	847	424
256	Barn Horse Shavings Bin Refresh	1/01/22	10,638			10,638	20 MO S/L	1,064	532
257	Cabin Roofs and Misc. Improvements	1/01/22	8,992			8,992	20 MO S/L	899	450
258	Drainage and Excavating Dining Room	5/09/22	18,420			18,420	20 MO S/L	1,535	921
259	Additional Plumbing in Fishbowl	6/08/22	12,078			12,078	20 MO S/L	956	604
260	Point House Refresh	6/01/22	27,046			27,046	20 MO S/L	2,141	1,352
261	Cabin Floors	6/01/22	35,400			35,400	20 MO S/L	2,803	1,770
262	Triple Decker Cabin Refresh	6/01/22	39,475			39,475	20 MO S/L	3,125	1,974
263	Cabin Roofs and Clubhouse Roof	6/01/22	6,253			6,253	20 MO S/L	495	313
264	Leveling of 2 Cabins	6/01/22	6,237			6,237	20 MO S/L	494	312
265	Refresh of Fishbowl and Cooks Cabin	6/01/22	12,705			12,705	20 MO S/L	1,006	635
266	Camper Bathroom Refresh	6/01/22	15,456			15,456	20 MO S/L	1,224	772
267	Tennis Court Poles	6/01/22	19,790			19,790	20 MO S/L	1,567	989
268	New Kitchen Floor in Dining Room	6/01/22	5,125			5,125	20 MO S/L	406	256
270	Theater Remodel	6/01/24	161,767			161,767	20 MO S/L	0	4,718
271	Ford F-150	4/01/23	19,395			19,395	5 MO S/L	2,909	3,879
272	Staff Cabin Refresh	6/01/23	29,098			29,098	20 MO S/L	849	1,455
273	New Canoe and Ski Dock	6/01/23	41,740			41,740	7 MO S/L	3,478	5,963
274	Sraff Cabin Remodel	6/01/23	40,024			40,024	20 MO S/L	1,167	2,002
275	Headquarters Remodel	6/01/23	81,934			81,934	20 MO S/L	2,390	4,096
276	Electrical Work in Theater	6/01/23	28,521			28,521	20 MO S/L	832	1,426
277	Rain Water Excavation	6/01/23	11,984			11,984	20 MO S/L	350	599
278	Arts and Crafts Remodel	6/01/23	168,506			168,506	20 MO S/L	4,915	8,425
279	Cabin Roofs	6/01/23	9,000			9,000	20 MO S/L	263	450
280	Picnic Tables	12/31/23	800			800	7 MO S/L	0	114
281	Roof and Underpinnings	6/01/24	26,055			26,055	20 MO S/L	0	760
282	Staff Cabin Add-On	6/01/24	34,380			34,380	20 MO S/L	0	1,003
283	Freezer Room	6/01/24	56,785			56,785	20 MO S/L	0	1,656
284	RIB Boat and Trailer	6/01/24	14,900			14,900	5 MO S/L	0	1,738
285	Lenny (Horse)	6/01/24	3,600			3,600	7 MO S/L	0	300
286	SAILING DOCK	6/01/24	42,699			42,699	7 MO S/L	0	3,558
287	SWIMMING DOCK	6/01/24	42,699			42,699	7 MO S/L	0	3,558
288	Cement Moorings	6/01/24	7,488			7,488	7 MO S/L	0	624
289	Freezer	6/01/24	6,332			6,332	7 MO S/L	0	528
290	Clubhouse	12/31/24	157,598			157,598	0 -- Memo	0	0
Total Other Depreciation			<u>2,169,537</u>			<u>2,169,537</u>		<u>233,685</u>	<u>92,337</u>
Total ACRS and Other Depreciation			<u>2,169,537</u>			<u>2,169,537</u>		<u>233,685</u>	<u>92,337</u>
Grand Totals			5,973,507			5,973,507		2,180,982	178,096
Less: Dispositions and Transfers			26,000			26,000		26,000	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>5,947,507</u>			<u>5,947,507</u>		<u>2,154,982</u>	<u>178,096</u>

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Depreciation Adjustment Report

FYE: 12/31/2024

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
There are no assets that meet the criteria of this report						

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Future Depreciation Report

FYE: 12/31/25

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
11	TACK	3/31/97	4,300	0	0
13	SADDLES	3/31/97	3,600	0	0
16	BRIDLES	3/31/97	150	0	0
18	FLYING JR BOAT (2)	3/31/97	10,000	0	0
27	SAIL BOATS (3)	3/31/97	7,000	0	0
29	CANOES (8)	3/31/97	800	0	0
34	TENNIS COURTS	3/31/97	25,000	0	0
35	COURT FENCING	5/01/97	2,637	0	0
36	COURT DRAINAGE	5/01/97	4,450	0	0
56	SEWER SYSTEM	3/31/97	212,600	5,315	0
57	BUILDINGS	3/31/97	310,800	7,770	0
58	CABIN-ROOFING	4/10/97	4,400	110	0
59	HORSE JUMP	6/10/97	2,538	0	0
60	DINING ROOM RENOVATION	6/10/00	21,717	543	0
61	STORAGE SHED	6/01/98	1,399	35	0
62	DINING ROOM CHAIRS	6/15/98	839	0	0
63	SADDLES	6/15/98	2,955	0	0
74	DINING ROOM	3/10/99	4,941	123	0
75	POWER UPGRADE	7/10/99	71,938	1,798	0
76	BUILDING IMPROVEMENTS	6/15/99	17,272	432	0
77	DINING ROOM	6/01/01	925,388	23,135	0
78	NEW ROOF	4/27/00	4,995	125	0
79	NEW ROOF	9/13/00	9,950	249	0
81	OVERHEAD DOOR	10/26/00	1,490	0	0
87	REROOF THREE CABINS	6/01/01	3,700	92	0
91	DRY HYDRANT	1/01/02	17,019	0	0
93	DINING TABLES	6/01/01	20,026	0	0
94	DINING CHAIRS	6/01/01	1,651	0	0
95	RANGE, GRIDDLE & HOOD	6/01/01	14,706	0	0
96	DISHWASHER & HOOD	6/01/01	19,071	0	0
97	DISH TABLE	6/01/01	4,071	0	0
98	PROOFING BOX	6/01/01	1,730	0	0
99	WALK-IN COOLER	6/01/01	8,718	0	0
100	POT SINK	6/01/01	1,244	0	0
101	VEGETABLE SINK	6/01/01	410	0	0
102	SERVING COUNTERS	6/01/01	4,120	0	0
103	WORK TABLE	6/01/01	259	0	0
104	POT RACK	6/01/01	337	0	0
105	MISC. HARDWARE	6/01/01	822	0	0
106	SHELVING	6/01/01	784	0	0
107	FREEZER - HOBART	6/01/01	3,250	0	0
110	UTILITY CARTS	6/01/01	736	0	0
111	TELEPHONE NETWORK	11/20/00	1,924	0	0
117	WOMEN'S BATH	6/01/02	85,631	2,141	0
120	ELECTRICAL UPGRADE	6/10/02	9,420	235	0
121	STORAGE SHED	8/01/02	1,299	33	0
122	TENNIS COURTS ROLLER	6/01/02	1,700	0	0
124	SEWER HOOKUP	6/01/02	2,474	0	0
125	CAMPER BATHHOUSE	6/10/04	348,833	8,721	0
126	THEATRE BUILDING	10/10/03	32,511	813	0
128	TENNIS COURT FENCE	6/10/03	1,370	0	0
130	THEATRE EQUIPMENT	6/15/03	12,722	0	0
131	CHAIRS (30)	6/15/03	1,304	0	0
135	BUILDING ADDITION - BATH	6/01/04	16,610	416	0
136	DIVING BOARD & STAND	6/01/04	8,114	0	0
140	THEATRE LIGHT GRID SUSPENSION	6/01/04	9,531	0	0
142	BROOK STABILIZATION	6/01/04	4,402	0	0
143	CABIN ROOFING	9/01/04	7,184	180	0
146	JUNIOR SAILBOAT - ROCKY	6/01/05	2,000	0	0
147	JUNIOR SAILBOAT - BULLWINKLE	6/01/05	2,000	0	0
150	WATER CONECTION	6/01/06	21,715	543	0
152	KUBOTA TRACTOR	6/13/06	13,401	0	0
153	WATER HOOK-UP FD#2	7/01/06	43,768	1,094	0
156	MATTRESS AND BOX SPRINGS	6/15/06	3,413	0	0
158	DRINKING WATER SYSTEM	1/24/07	2,200	0	0
162	LARGE RIDING RING - FOOTING	6/01/07	22,600	0	0
165	ELECTRICAL SVC UPGRADE	6/01/07	12,716	318	0

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Future Depreciation Report **FYE: 12/31/25**

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
166	DINING HALL/OTHER	6/01/07	16,744	419	0
170	REBUILD STUDIO	12/31/08	38,741	968	0
174	DINING ROOM	10/13/09	31,665	791	0
175	BATHHOUSE	8/27/09	1,154	29	0
176	POINT HOUSE	7/17/09	13,569	339	0
178	THEATRE VENT	12/02/09	1,161	29	0
179	RIDING EQUIPMENT	7/01/09	4,647	0	0
181	HOBIE 16	7/01/09	9,000	0	0
184	BUILDING IMPROVEMENTS	7/01/10	22,129	553	0
185	SKI BOAT	7/01/10	19,850	0	0
186	LAUNDRY DRYER	8/01/10	2,915	0	0
189	WATER CONNECTION	7/01/11	37,474	937	0
191	LIGHTS - THEATRE	7/01/11	1,984	0	0
192	ANNEX CABIN	7/01/11	24,861	621	0
193	SANITATION IMPROVEMENT	7/01/11	16,351	409	0
194	ADDITION	7/01/11	25,724	643	0
195	HORSE BARN REFURBISH	7/01/12	177,098	4,427	0
196	GROVE CABIN	12/31/12	724	18	0
197	THEATRE LIGHTING	7/01/12	105,497	2,637	0
198	ANNEX CABIN	7/01/12	10,083	252	0
199	SANITATION IMPROVEMENT	7/01/12	2,871	72	0
200	IMPROVEMENTS	4/09/12	35,025	875	0
203	J24 SAILBOAT & TRAILER	7/24/13	5,500	0	0
205	THEATRE RIGGING	7/23/13	17,064	0	0
206	VIDEO EQUIP LIGHT GRID	12/03/13	17,200	0	0
207	NEW GROVE CABINS	7/01/13	99,483	2,487	0
208	ANNEX CABINS	7/01/13	175,706	4,393	0
209	SANITARY	7/01/13	63,725	1,593	0
210	THEATRE/DANCE CABIN	7/01/13	6,405	160	0
211	BATH HOUSE	11/17/14	2,455	62	0
212	BUILDING IMPROVEMENTS	10/02/14	22,819	571	0
213	NEW ENGINE # 188	8/07/15	13,519	0	0
214	SANITARY	7/01/15	15,960	399	0
215	ELECTRICAL SVC UPGRADE	7/01/15	4,775	120	0
217	BUILDING IMPROVEMENTS	7/01/15	84,400	2,110	0
218	COMPUTER	11/19/15	1,895	0	0
220	MEN'S BATH	7/01/16	95,132	2,379	0
221	BUILDING IMPROVEMENTS	7/01/16	129,904	3,248	0
222	EQUIPMENT	7/01/16	106	0	0
			<u>3,777,970</u>	<u>85,762</u>	<u>0</u>

Other Depreciation:

9	LAND	3/31/97	220,769	0	0
223	Website 2015	1/01/16	32,397	0	0
224	Sewer Pump	10/20/17	1,112	111	0
225	Skunk Junction Cabins	7/26/17	17,058	426	0
226	Electrical Work - Grove	4/06/17	2,206	220	0
227	Hangout & Outback Staff Cabins	7/26/17	14,852	371	0
228	Vista Cabin	7/26/17	50,260	1,256	0
229	16' Peterboro Boat	6/15/17	3,000	0	0
230	10 Beds (5 bunks)	7/07/17	2,100	0	0
231	Hot Water Heater	8/08/17	8,750	875	0
232	Beehive	5/09/18	84,862	2,121	0
233	New Website	5/04/18	24,300	0	0
234	Dining Room Roof	4/19/18	56,815	2,841	0
235	Hans and Eva Cabin	7/16/18	18,238	456	0
236	Cabin Work 18-16; 18-20	12/21/18	34,474	862	0
237	New Sailboats	10/18/18	15,636	1,861	0
238	Convection Oven	6/08/18	7,995	800	0
239	Roadside Renovations	7/25/19	66,266	1,656	0
241	Bathroom Renovations	6/27/19	41,400	2,070	0
242	Director's Cabin Roof and Porch Work	9/03/19	44,760	2,238	0
243	Gator Side by Side	6/11/19	6,100	0	0
244	Program Recreational Area Upgrades	12/31/19	36,116	1,806	0
245	Road Improvements and Drainage	6/26/19	7,725	1,103	0
246	Infirmary	4/29/20	4,610	115	0
247	Annex Improvement	11/10/20	12,551	314	0
248	Health Center	12/10/20	36,189	905	0

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Future Depreciation Report**FYE: 12/31/25**

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
249	Health Center	9/03/21	40,812	1,020	0
250	Ski Boat and Trailer	5/15/22	20,000	2,857	0
251	Diving Dock	6/01/22	17,990	2,570	0
252	Dining Room Chairs	6/01/22	6,539	934	0
253	Kitchen Stand Mixer	6/01/22	5,262	752	0
254	Riding Rings	12/31/22	17,000	2,429	0
255	Director's Cabin Bathroom Refresh	1/01/22	8,473	424	0
256	Barn Horse Shavings Bin Refresh	1/01/22	10,638	532	0
257	Cabin Roofs and Misc. Improvements	1/01/22	8,992	449	0
258	Drainage and Excavating Dining Room	5/09/22	18,420	921	0
259	Additional Plumbing in Fishbowl	6/08/22	12,078	604	0
260	Point House Refresh	6/01/22	27,046	1,353	0
261	Cabin Floors	6/01/22	35,400	1,770	0
262	Triple Decker Cabin Refresh	6/01/22	39,475	1,974	0
263	Cabin Roofs and Clubhouse Roof	6/01/22	6,253	312	0
264	Leveling of 2 Cabins	6/01/22	6,237	311	0
265	Refresh of Fishbowl and Cooks Cabin	6/01/22	12,705	635	0
266	Camper Bathroom Refresh	6/01/22	15,456	773	0
267	Tennis Court Poles	6/01/22	19,790	990	0
268	New Kitchen Floor in Dining Room	6/01/22	5,125	256	0
270	Theater Remodel	6/01/24	161,767	8,089	0
271	Ford F-150	4/01/23	19,395	3,879	0
272	Staff Cabin Refresh	6/01/23	29,098	1,454	0
273	New Canoe and Ski Dock	6/01/23	41,740	5,963	0
274	Sraff Cabin Remodel	6/01/23	40,024	2,001	0
275	Headquarters Remodel	6/01/23	81,934	4,097	0
276	Electrical Work in Theater	6/01/23	28,521	1,426	0
277	Rain Water Excavation	6/01/23	11,984	599	0
278	Arts and Crafts Remodel	6/01/23	168,506	8,425	0
279	Cabin Roofs	6/01/23	9,000	450	0
280	Picnic Tables	12/31/23	800	115	0
281	Roof and Underpinnings	6/01/24	26,055	1,303	0
282	Staff Cabin Add-On	6/01/24	34,380	1,719	0
283	Freezer Room	6/01/24	56,785	2,839	0
284	RIB Boat and Trailer	6/01/24	14,900	2,980	0
285	Lenny (Horse)	6/01/24	3,600	514	0
286	SAILING DOCK	6/01/24	42,699	6,100	0
287	SWIMMING DOCK	6/01/24	42,699	6,100	0
288	Cement Moorings	6/01/24	7,488	1,070	0
289	Freezer	6/01/24	6,332	904	0
290	Clubhouse	12/31/24	157,598	0	0
	Total Other Depreciation		<u>2,169,537</u>	<u>104,300</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>2,169,537</u>	<u>104,300</u>	<u>0</u>
	Grand Totals		<u>5,947,507</u>	<u>190,062</u>	<u>0</u>

Form 990	Two Year Comparison Report	2023 & 2024
For calendar year 2024, or tax year beginning _____, ending _____		

Name

Taxpayer Identification Number

THE BROWN LEDGE FOUNDATION, INC.

-*1055

		2023	2024	Differences
Revenue	1. Contributions, gifts, grants	559,346	3,240,425	2,681,079
	2. Membership dues and assessments			
	3. Government contributions and grants			
	4. Program service revenue	1,953,541	1,990,565	37,024
	5. Investment income	105,243	155,207	49,964
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory	257	1,500	1,243
	8. Net income or (loss) from fundraising events		23,620	23,620
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory	3,073	-1,270	-4,343
	11. Other revenue	806	18,133	17,327
	12. Total revenue. Add lines 1 through 11	2,622,266	5,428,180	2,805,914
Expenses	13. Grants and similar amounts paid	213,258	273,803	60,545
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	125,979	191,792	65,813
	16. Salaries, other compensation, and employee benefits	815,870	921,830	105,960
	17. Professional fundraising fees			
	18. Other professional fees	23,734	27,874	4,140
	19. Occupancy, rent, utilities, and maintenance	117,790	127,921	10,131
	20. Depreciation and Depletion	151,129	178,099	26,970
	21. Other expenses	674,980	753,146	78,166
	22. Total expenses. Add lines 13 through 21	2,122,740	2,474,465	351,725
	23. Excess or (Deficit). Subtract line 22 from line 12	499,526	2,953,715	2,454,189
Other Information	24. Total exempt revenue	2,622,266	5,428,180	2,805,914
	25. Total unrelated revenue			
	26. Total excludable revenue	2,062,920	2,164,135	101,215
	27. Total assets	6,575,811	9,636,141	3,060,330
	28. Total liabilities	156,226	134,781	-21,445
	29. Retained earnings	6,419,585	9,501,360	3,081,775
	30. Number of voting members of governing body	9	7	
31. Number of independent voting members of governing body	9	7		
32. Number of employees	105	104		
33. Number of volunteers	100	100		

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Form 990	Tax Return History	2024
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Name THE BROWN LEDGE FOUNDATION, INC.	Employer Identification Number **-***1055
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	2020	2021	2022	2023	2024	2025
Contributions, gifts, grants	808,072	503,238	1,171,168	559,346	3,240,425	
Membership dues						
Program service revenue		1,930,320	2,068,920	1,953,541	1,990,565	
Capital gain or loss		7,536	-5,308	257	1,500	
Investment income	145	24	7,406	105,243	155,207	
Fundraising revenue (income/loss)					23,620	
Gaming revenue (income/loss)						
Other revenue	4,749	26,894	-3,687	3,879	16,863	
Total revenue	812,966	2,468,012	3,238,499	2,622,266	5,428,180	
Grants and similar amounts paid		149,553	203,070	213,258	273,803	
Benefits paid to or for members						
Compensation of officers, etc.	102,297	100,707	112,240	125,979	191,792	
Other compensation	247,344	652,779	734,206	815,870	921,830	
Professional fees	29,906	14,095	22,184	23,734	27,874	
Occupancy costs	87,127	95,838	103,880	117,790	127,921	
Depreciation and depletion	128,058	124,763	135,459	151,129	178,099	
Other expenses	215,210	557,632	679,572	674,980	753,146	
Total expenses	809,942	1,695,367	1,990,611	2,122,740	2,474,465	
Excess or (Deficit)	3,024	772,645	1,247,888	499,526	2,953,715	
Total exempt revenue	812,966	2,468,012	3,238,499	2,622,266	5,428,180	
Total unrelated revenue						
Total excludable revenue	4,894	1,964,774	2,067,331	2,062,920	2,164,135	
Total Assets	4,289,305	5,154,241	5,927,054	6,575,811	9,636,141	
Total Liabilities	527,521	619,702	142,846	156,226	134,781	
Net Fund Balances	3,761,784	4,534,539	5,784,208	6,419,585	9,501,360	

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Federal Statements

FYE: 12/31/2024

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST AND DIVIDENDS	\$ 155,207		14			
TOTAL	<u>\$ 155,207</u>					

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Federal Statements

FYE: 12/31/2024

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
OTHER PROFESSIONAL FEES	\$ 15,907	\$ 2,978	\$ 12,510	\$ 419
TOTAL	<u>\$ 15,907</u>	<u>\$ 2,978</u>	<u>\$ 12,510</u>	<u>\$ 419</u>