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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047
2025
Open to Public Inspection

A For the 2025 calendar year, or tax year beginning , and ending

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

C Name of organization: LIMITLESS COMMUNITY DEVELOPMENT CORP.

Doing business as:

Number and street (or P.O. box if mail is not delivered to street address): 1805 CLEMSON ROAD, UNIT 292021

Room/suite:

City or town, state or province, country, and ZIP or foreign postal code: COLUMBIA SC 29229

D Employer identification number: 27-0291442

E Telephone number: 803-401-5481

G Gross receipts $: 508,341

F Name and address of principal officer:
TANYA RODRIQUEZ HODGES
1805 CLEMSON ROAD UNIT 292021
COLUMBIA SC 29229

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

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

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

J Website: WWW.LIMITLESSCDC.ORG

H(c) Group exemption number

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

L Year of formation: 2010

M State of legal domicile: SC

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
TO STRENGTHEN ACCESS TO SUPPORT, KNOWLEDGE, AND RESOURCES. THE VISION IS THAT EVERY COMMUNITY IN SOUTH CAROLINA FLOURISHES.

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

Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	9
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	9
	5 Total number of individuals employed in calendar year 2025 (Part V, line 2a)	5	5
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	78,528	295,245
	9 Program service revenue (Part VIII, line 2g)	398,741	213,096
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	477,269	508,341
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	153,117	170,973
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) 0		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	300,796	294,184
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	453,913	465,157
	19 Revenue less expenses. Subtract line 18 from line 12	23,356	43,184

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	101,630	121,516
	21 Total liabilities (Part X, line 26)	32,215	8,917
	22 Net assets or fund balances. Subtract line 21 from line 20	69,415	112,599

Part II Signature Block

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

Sign Here

Signature of officer — Date: 07/21/26

TANYA RODRIQUEZ HODGES EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
BEN J. PEARMAN, CPA	BEN J. PEARMAN, CPA	07/21/26		P01287192

Firm's name: REID TAX & ADVISORY SERVICES, LLC — Firm's EIN: 92-0780479

Firm's address: 1611 DEVONSHIRE DR, COLUMBIA, SC 29204 — Phone no. 803-252-0606

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