EXTENDED TO NOVEMBER 15, 2023 **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.

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

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

AF	or tne	2022 calendar year, or tax year beginning a	na enaing		
В с	heck if	C Name of organization		D Employer identific	cation number
	Addres	THE VICTORY PROJECT, LLC			
	Name change Initial			26-22433	66
	return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		
	Final return/ termin-	409 TROY ST		937-224-	
	ated Amend	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,274,550.
	return	DATION, OH 45404-1852		H(a) Is this a group re	
	tion pendin	F Name and address of principal officer: MONNIE BOSH		for subordinates	
_		SAME AS C ABOVE	🗖	H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)	(1) or 527	7	list. See instructions
	Vebsit			H(c) Group exemptio	
		organization: X Corporation Trust Association Other Summary	L Year	of formation: 2000 N	M State of legal domicile: OH
Га		-	OMED V	אוושם שט דופטי	אוידים חנוני
၉		Briefly describe the organization's mission or most significant activities: <u>EMF</u> LIFE GOD INTENDED BY MASTERING SELF-AWAI			
au					
/er					10
છું		Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)			10
∞ ∞		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			76
ţį		Total number of volunteers (estimate if necessary)			250
Activities & Governance		Total unrelated business revenue from Part VIII, column (C), line 12			0.
ĕ		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		1,019,010.	1,227,670.
		Program service revenue (Part VIII, line 2g)		54,751.	46,754.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-862.	-638.
ě		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12		1,072,899.	1,273,786.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ဖွ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		320,386.	365,489.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ğ.	b ·	Total fundraising expenses (Part IX, column (D), line 25) 21,			
ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		329,584.	540,727.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		649,970.	906,216.
_	19	Revenue less expenses. Subtract line 18 from line 12		422,929.	367,570.
Net Assets or Fund Balances			B	eginning of Current Year	End of Year
sset	20	Total assets (Part X, line 16)	·····	1,236,238.	1,606,715.
etA	21	Total liabilities (Part X, line 26)		18,871. 1,217,367.	21,778. 1,584,937.
Z _i	rt II	Net assets or fund balances. Subtract line 21 from line 20		1,21/,30/.	1,304,937.
		ties of perjury, I declare that I have examined this return, including accompanying sched	ulae and etatam	ante and to the heet of my	knowledge and helief it is
		ties of perjury, I declare that I have examined this return, including accompanying sched t, and complete. Declaration of preparer (other than officer) is based on all information of			Kilowieuge allu bellei, it is
uu,	COLLEC	t, and complete. Declaration of proparti (other than officer) is based on an information of	i willon proparo	nas any knowicage.	
Sigr	,	Signature of officer		Date	
Here		MONNIE BUSH, CHIEF EXECUTIVE OFFICER			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid		ANTHONY A COLUSSI ANTHONY A COLU	ssi (08/31/23 if self-employ	P00433041
Prep	- 1	Firm's name GOLDSHOT, LAMB & HOBBS, INC.			1-0971691
Use	- 1	Firm's address 3066 KETTERING BLVD			
		DAYTON, OH 45439-		Phone no. (9	37)297-3400
May	the IF	S discuss this return with the preparer shown above? See instructions			X Yes No

Га	OLA LICOLA I A CONTROL A COOMPISSIMENTS	X
_	· · · · · · · · · · · · · · · · · · ·	
1	Briefly describe the organization's mission: EMPOWER YOUTH TO DISCOVER THE LIFE GOD INTENDED BY MASTERING	
	SELF-AWARENESS, SELF-SUFFICIENCY AND SELFLESS SERVICE WHILE TEARING	
	DOWN THE PILLARS OF POVERTY, ALL WITHOUT GOVERNMENT FUNDING.	
	DOWN THE TIMENED OF TOVERTITY THE WITHOUT COVERENCE TOWN	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$	•)
	THE VICTORY PROJECT CURRICULUM IS BASED ON THE 3E CURRICULUM:	
	EDUCATION - THIS PIECE OF THE CURRICULUM INVOLVES DAILY ACCESS AND	
	REVIEW OF STUDENTS' SCHOOL RECORDS AND WORK, WEEKLY HOMEWORK, AND STUDY	
	HALL ASSISTANCE. THE VICTORY PROJECT BECOMES AN EDUCATIONAL ADVOCATE	
	AND ACCOUNTABILITY PARTNER FOR STUDENTS, PARENTS, AND TEACHERS.	
	ENTREPRENEURSHIP - STUDENTS GET WORK EXPERIENCE AND LEARN THE VALUE OF	
	EARNING MONEY BY WORKING AT THE VICTORY PROJECT'S SMALL BUSINESS,	
	VICTORY IMPROVEMENT PROJECTS (VIP), BUT LEARNING ABOUT WORK IS A	
	REWARD. STUDENTS MUST HIT CERTAIN GOALS TO BE ELIGIBLE TO WORK. WORK-ETHIC DEVELOPMENT PRECEDES WORKFORCE DEVELOPMENT.	
	ENLIGHTENMENT - VICTORY PROJECT PROVIDES 'OVERALL GENTLEMEN' CHARACTER	
	DEVELOPMENT COURSES, BIBLE STUDY, WORSHIP, RECREATION, AND NIGHTLY	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
) (Interior —) (Interior —)	— ′
4.		
4c	(Code:) (Expenses \$	— ⁾
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
40	Total program convice expanses 772 984.	

Form 990 (2022) THE VICTORY PROJECT, LLC Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	ا		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- '-		1
8	, ,			X
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		 ₩
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			,,,
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			<u></u>
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	ل. تا		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		
10		16		X
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		 ^
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			_~
46	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			,,
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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	23		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	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		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	27		Х
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			X
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34		x
35.2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	334		
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				_
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Ia O Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
b	Enter the flumber of Forms W 24 monded of line 1a. Enter of infort applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1.		
	(gambling) winnings to prize winners?	1c	000	<u> </u>

Form 990 (2022) THE VICTORY PROJECT, LLC

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 76		37						
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	37					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
	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	4-		x					
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a							
ь	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).								
52		5a		Х					
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	"							
	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).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
b	b If "Yes," did the organization notify the donor of the value of the goods or services provided?								
С	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	7e							
е	3 7 7 7 171								
f									
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?								
b									
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders	_							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the								
b	organization is licensed to issue qualified health plans								
c	Enter the amount of reserves on hand	1							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
excess parachute payment(s) during the year?									
If "Yes," see the instructions and file Form 4720, Schedule N.									
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?									
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes," complete Form 6069.								

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.

	to line da, da, or real selection the circumstances, produced, or critical edition	10.								
	Check if Schedule O contains a response or note to any line in this Part VI				X					
Sec	tion A. Governing Body and Management				·					
		10		Yes	No					
та	Enter the number of voting members of the governing body at the end of the tax year 1a	10								
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.	10								
b	, , , ,									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		_		х					
•	officer, director, trustee, or key employee?		2		^					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervi		•		х					
	of officers, directors, trustees, or key employees to a management company or other person?		3_4		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<u>4</u> 5		X					
	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		6		X					
7a			7-		х					
L	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or		7a							
b			76		х					
•	persons other than the governing body?		7b							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	I	0-	Х						
a			<u>8a</u> 8b	X						
b			OD	- 21						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		9		х					
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		21					
	(This Section B requests information about policies not required by the internal Revenue Code.)			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	ſ	10a	103	X					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate		104							
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the		11a	Х						
b										
12a			12a	Х						
b			12b	Х						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	on Schedule O how this was done		12c	Х						
13	Did the organization have a written whistleblower policy?		13		Х					
14	Did the organization have a written document retention and destruction policy?	ſ	14		Х					
15	Did the process for determining compensation of the following persons include a review and approval by independe									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official		15a		Х					
	Other officers or key employees of the organization		15b		Х					
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?		16a		Х					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?		16b							
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed OH									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section	on 501(c)(3)s	only)	availal	ole					
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain on Schedule C))								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interes	,	financ	cial						
	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 $KELLY\ BUSH\ -\ 937-224-0880$;								
	409 TROY ST, DAYTON, OH 45404									

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

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

- 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.

(A)	(B)	Jiga		((C)		ioat	(D)	(E)	(F)
Name and title	Average hours per	Position (do not check more than one box, unless person is both an						Reportable compensation	Reportable compensation	Estimated amount of
	week	offic	, unie: cer ar	ss per id a d	rson i	s boti or/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for related	Individual trustee or director	stee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	truste	Institutional trustee		oyee	Highest compensated employee		1099-NEC)	10001120)	and related
	below	vidual	itutior	cer	Key employee	hest co	Former			organizations
	line)	Indi	lnst	Officer	Key	High	Forr			
(1) MONNIE BUSH	40.00	-						F4 000		•
CHIEF EXECUTIVE OFFICER	40.00			Х				54,883.	0.	0.
(2) JOHN OLIVER	40.00	-						47.604		0
EXECUTIVE DIRECTOR	40.00			Х	Н	\vdash		47,694.	0.	0.
(3) DYLAN POHL	40.00	-		37				22 502		0
EXECUTIVE DIRECTOR (4) KELLY BUSH	40.00			X				32,583.	0.	0.
(4) KELLY BUSH CHIEF FINANCIAL OFFICER	40.00	1		х				7,116.	0.	0.
(5) BUD HAUSER	2.00			Λ				7,110.	0.	0.
BOARD PRESIDENT	2.00	х		X				0.	0.	0.
(6) BETHANY SIBBITT	2.00									•
BOARD SECRETARY		Х		x				0.	0.	0.
(7) STACI MORRIS	2.00								-	-
BOARD TREASURER		Х		х				0.	0.	0.
(8) TIM KO	2.00									
BOARD MEMBER		Х						0.	0.	0.
(9) GENYA DEVOE	2.00									
BOARD MEMBER		Х						0.	0.	0.
(10) WILLIAM ALLEN	2.00									
BOARD MEMBER		Х						0.	0.	0.
(11) AL D. RALSTON	2.00									
BOARD MEMBER		Х						0.	0.	0.
(12) GREG ROBERTO	2.00	1								
BOARD MEMBER		Х						0.	0.	0.
(13) RYAN RIDGE	2.00	l								
BOARD MEMBER		Х						0.	0.	0.
(14) JOE PAUL	2.00									•
BOARD MEMBER		Х						0.	0.	0.
		1								
		1								
		1								
		<u> </u>					1	L	l	

232007 12-13-22 Form **990** (2022)

Section A. Officers, Directors, T	rustees, Key Em	ploy	ees,	and	l Hiç	ghes	t C	ompensated Employee	s (continued)				
(A)	(B)			_ (0				(D)	(E)			(F)	
Name and title	Average	(do	Position (do not check more than one				nne	Reportable	Reportable	.	Est	timate	d
	hours per	box, unless person is both an officer and a director/trustee)					n an	compensation	compensation	n	am	ount o	of
	week	_	cer an	id a di	recto	or/trus	tee)	from	from related		(other	
	(list any	1 2			the	organization			oensat				
	hours for related	or dir	e e			ated		organization	(W-2/1099-MIS			om the	
	organizations	ustee	truste		eo	bens		(W-2/1099-MISC/	1099-NEC)		•	anizati	
	below	ualtn	ional		ploye	t com	١.	1099-NEC)				l relate nizatio	
	line)	divid	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	ııızatı) 15
	'	=	느	0	ž	王喜	Œ						
						┢							
		-											
		-				┢							
		-											
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		1											
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								_					
		1											
4b Cubbatal							<u> </u>	142,276.		0.			0.
1b Subtotal								0.		0.			0.
c Total from continuation sheets to Par								142,276.		0.			0.
d Total (add lines 1b and 1c)								•					0.
2 Total number of individuals (including but	ıt not limited to tr	iose	liste	d ab	ove	e) wh	o re	ceived more than \$100,	000 of reportable	9			^
compensation from the organization											- 1	· I	<u></u>
										1		Yes	No
3 Did the organization list any former office		,	,	•	,	,	_		,				
line 1a? If "Yes," complete Schedule J fo	or such individual										3		X
4 For any individual listed on line 1a, is the	•							•	•				
and related organizations greater than \$	150,000? If "Yes,	," co	mple	ete S	Sche	edule	Jf	or such individual			4	\rightarrow	X
5 Did any person listed on line 1a receive													
rendered to the organization? If "Yes." o	omplete Schedul	e J fo	or su	ıch r	oers	on .					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest	compensated ind	depe	nder	nt cc	ontra	acto	rs th	at received more than \$	100,000 of comp	oensat	ion fro	m	
the organization. Report compensation	or the calendar y	ear e	ndir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
(A)								(B)			(C)	
Name and busin	ess address	NC	ONE	<u> </u>				Description of s	ervices	C	omper	satior	1
							\Box						
							\dashv						
							\dashv						
							\dashv						
O Tatalasanah (C. I	- C1 P	-1.25						-1					
2 Total number of independent contractor		ot lin	nitec	ı to t	_		ted	above) who received mo	ore tnan				
\$100,000 of compensation from the org	anızatıon				(,							

26-2243366

		Check if Schodule O contains a reappne	or note to any lin	o in this Dort VIII			
		Check if Schedule O contains a response	or note to any iin	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
				Total Tovolido		business revenue	from tax under
							sections 512 - 514
ts ts	1 a	Federated campaigns 1a					
an ni	b	Membership dues 1b					
چ <u>ق</u>		Fundraising events 1c					
fts,							
ig ig							
Contributions, Gifts, Grants and Other Similar Amounts		Government grants (contributions) 1e					
ëË	f	All other contributions, gifts, grants, and	005 650				
ĕ₹		similar amounts not included above \dots 1f 1	,227,670. 64,938.				
발	g	Noncash contributions included in lines 1a-1f 1g \$					
S an	h	Total. Add lines 1a-1f		1,227,670.			
			Business Code				
ø.	2 a	VICTORY IMPROVEMENT PR	561700	46,754.	46,754.		
Program Service Revenue	b						
je, ue							
n S	С.						
g Se	d						
90	е						
<u>م</u>	f	All other program service revenue					
	g	Total. Add lines 2a-2f		46,754.			
	3	Investment income (including dividends, inter	est, and				
		other similar amounts)		126.			126.
	4	Income from investment of tax-exempt bond					
	5	Royalties					
	•	(i) Real	(ii) Personal				
	•		(ii) i Greenar				
	6 a						
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	b	Less: cost or other basis					
<u>o</u>		and sales expenses 7b	764.				
eur	c	Gain or (loss) 7c	-764.				
Revenue		Net gain or (loss)		-764.	-764.		
er B				7011	7011		
Othe	8 а	Gross income from fundraising events (not					
0		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18	a				
	b	Less: direct expenses8	o				
	С	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
		Part IV, line 19	a				
	b	Less: direct expenses					
		Net income or (loss) from gaming activities	-1				
	10 a	Gross sales of inventory, less returns					
		and allowances 10					
	b	Less: cost of goods sold10	b				
	С	Net income or (loss) from sales of inventory					
,,			Business Code				
ous.	11 a						
ine Due	b						
Miscellaneous Revenue	c						
Sc		All other revenue					
Σ							
		Total. Add lines 11a-11d		1,273,786.	45 990	0.	126.
	14	TOTAL LEVELUE THE HISH HOURS		<u> </u>			

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 (B)
Program service
expenses (**D**)
Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 142,276. 113,821. 24,187. 4,268. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 190,684. 149,044. 38,020. 3,620. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 32,529. 25,653. 6,122. 754. 10 Payroll taxes 11 Fees for services (nonemployees): Management 9,214. 7,832. 461. 921. Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 466. column (A), amount, list line 11g expenses on Sch O.) 396. 23. 16,658. 19,598. 980. 1.960. Advertising and promotion 12 9,593. 6,760. 1,218. 1,615. 13 Office expenses Information technology 14 Royalties 15 7,734. 69,716. 61,706. 276. 16 Occupancy 17,925. 15,522. 1,602. 801. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 8,215. 7,204. 674. 337. Conferences, conventions, and meetings 19 405. 405. 20 Payments to affiliates 21 46,463. 41,064. 5,399. Depreciation, depletion, and amortization 22 21,283. 17,413. 3,870. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 151,938. 151,938. DIRECT PROGRAM EXPENSES WEST CAMPUS EXPORATION 83,559. 83,559. 63,938. 63,938. DONATED MATERIALS AND M 14,455. 8,673. 5,782. d DUES AND SUBSCRIPTIONS 15,477. 23,959. 1.398. 7,084. All other expenses 906,216. 772,984. 111,549. 21,683. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2022)

Part X | Balance Sheet

1	Pai	rt X	Balance Sheet					
1 Cash - non-interest-bearing 2 509			Check if Schedule O contains a response or no	te to any	/ line in this Part X			
2 Savings and temporary cash investments 297,345. 3						(A) Beginning of year		(B) End of year
2 2 3 Pledges and grants receivable, net 297,345. 3 3 4 Accounts receivable, net 4 4 4 4 4 4 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 5 5 5 5 5 5 5 5		1	Cash - non-interest-bearing			410,574.	1	509,705.
3 Pledges and grants receivable, net 297, 345. 3 4 Accounts receivable, net 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 Coans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 Notes and loans receivable, net 7 Notes and loans receivable, net 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Notes accumulated depreciation 10a 1,318,301. 10a 1,		2					2	
4 Accounts receivable, net 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 8 1 myentories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10a 1, 318, 301. b Less: accumulated depreciation 10b 221, 291. 511, 319. 10c 1,097 111 Investments - publicity traded securities 112 Investments - publicity traded securities 113 Investments - program-related. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 1 14 15 Other assets. See Part IV, line 11 17,000. 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 1, 236, 238. 16 1,606 17 Accounts payable and accrued expenses 18,871. 17 21 18 Grants payable 19 Deferred revenue 19 19 20 Tax-exempt bond liabilities 12 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 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities and ther liabilities ont included on lines 17:24). Complete Part X of Schedule D 21 Total liabilities and therefore the search of the search and therefore the search and therefore the search and		3				297,345.	3	
Solution Comment Com		4				4		
controlled entity or family member of any of these persons 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) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. Sed Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17, 236, 238 . 16 1, 606 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 Secured mortgages and notes payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities on tincluded on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Total liabilities. Add lines 17 through 25 28 Organizations that follow FASB ASC 958, check here		5						
6 Loans and other receivables from other disqualified persons (as defined under section 4958(p(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 11 Investments - publicly traded securities 12 Investments - publicly traded securities 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17, 236, 238. 16 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Loans and other payables to unrelated third parties 22 Loans and other payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25 18,871. 26 21 Egrants payable to unrelated third parties 24 Organizations that follow FASB ASC 958, check here			trustee, key employee, creator or founder, subs	stantial co	ontributor, or 35%			
Under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 7 7 8 1 1 1 1 1 1 1 1 1			controlled entity or family member of any of the	ese perso	ons		5	
7 Notes and loans receivable, net		6	Loans and other receivables from other disqua	sons (as defined				
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b 221, 291. 511, 319. 10c 1, 097 11 Investments - publicity traded securities 11 Investments - publicity traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17, 236, 238. 16 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 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 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 26 Total liabilities. Add lines 17 through 25 27 Total liabilities. Add lines 17 through 25 28 Total liabilities. Add lines 17 through 25 29 Total liabilities. Add lines 17 through 25 20 Total liabilities. Add lines 17 through 25 20 Total liabilities. Add lines 17 through 25 21 Total liabilities. Add lines 17 through 25 25 Total liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow FASB ASC 958, check here			under section 4958(f)(1)), and persons describe	ion 4958(c)(3)(B)		6		
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10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,318,301. b Less: accumulated depreciation 10b 221,291. 11 Investments - publicity traded securities 11 Investments - publicity traded securities 11 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17, 236, 238. 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liabilities 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 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow FASB ASC 958, check here	sse	8	Inventories for sale or use				8	
basis. Complete Part VI of Schedule D 10a	⋖	9	Prepaid expenses and deferred charges				9	
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14 Intangible assets 15 Other assets. See Part IV, line 11 17,000 . 15 16 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 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 23 Secured mortgages and notes payable to unrelated third parties 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 Total liabilities. Add lines 17 through 25 Add lines 17 through 25 Drganizations that follow FASB ASC 958, check here								
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16 Total assets. Add lines 1 through 15 (must equal line 33) 1,236,238. 16 1,606 17 Accounts payable and accrued expenses 18,871. 17 21 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here					17 000		0	
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23 Secured Hortgages and notes payable to unrelated third parties 24 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 18,871 26 21 Organizations that follow FASB ASC 958, check here	ties	22						
23 Secured Hortgages and notes payable to unrelated third parties 24 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 18,871 26 21 Organizations that follow FASB ASC 958, check here	Ξ						22	
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of Schedule D 25 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X Z5 27 X								
26 Total liabilities. Add lines 17 through 25 18,871. 26 21 Organizations that follow FASB ASC 958, check here X			(O				25	
Organizations that follow FASB ASC 958, check here		26				18,871.		21,778.
and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Net assets with donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds				eck here	X			
27 Net assets without donor restrictions 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 31	Ses							
28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 31	auc	27	Net assets without donor restrictions				27	1,450,066.
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Betained earnings, endowment, accumulated income, or other funds 31	Ba	28	Net assets with donor restrictions			322,438.	28	134,871.
and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Betained earnings, endowment, accumulated income, or other funds	nd		Organizations that do not follow FASB ASC	958, che	ck here			
29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 31	Ę		and complete lines 29 through 33.					
30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds	S	29	Capital stock or trust principal, or current funds	3			29	
31 Retained earnings, endowment, accumulated income, or other funds	set	30	Paid-in or capital surplus, or land, building, or e	quipmen	nt fund		30	
The state of the s	t As	31	Retained earnings, endowment, accumulated in	ncome, o	or other funds	4 44 =	31	
32 Total net assets or fund balances 1,217,367. 32 1,584	Red	32	Total net assets or fund balances		<u> </u>			1,584,937.
		33	Total liabilities and net assets/fund balances			1,236,238.	33	1,606,715.

Pai	T XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,27					
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u> 16.</u>			
3	Revenue less expenses. Subtract line 2 from line 1	3	36 1,21		<u>70.</u>			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))							
5								
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	coluṃn (B))	10	1,58	4,9	<u>37.</u>			
Pai	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				X			
				Yes	No			
1	Accounting method used to prepare the Form 990:							
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.						
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis X Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	_X_				
	If the organization changed either its oversight process or selection process during the tax year, explain on School	edule O.						
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the							
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b					
			Form	990	(2022)			

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Open to Public

Employer identification number

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

Inspection

OMB No. 1545-0047

THE VICTORY PROJECT, 26-2243366 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). 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: 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). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 10 X 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed n your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

(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.)

Sec	ction A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not	ļ									
	include any "unusual grants.")										
2	Tax revenues levied for the organ-										
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities										
	furnished by a governmental unit to										
	the organization without charge										
4	Total. Add lines 1 through 3										
5	The portion of total contributions										
	by each person (other than a										
	governmental unit or publicly										
	supported organization) included										
	on line 1 that exceeds 2% of the										
	amount shown on line 11,			· ·							
	column (f)				1						
6	Public support. Subtract line 5 from line 4.										
	ction B. Total Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
	Amounts from line 4	(4) 2010	(2) 2010	(0) 2020	(4) 2021	(6) 2022	(i) rotal				
8	Gross income from interest,										
•	dividends, payments received on	ļ									
	securities loans, rents, royalties,	ļ									
	and income from similar sources	ļ									
9	Net income from unrelated business										
•	activities, whether or not the	ļ									
	business is regularly carried on										
10											
10	or loss from the sale of capital										
	assets (Explain in Part VI.)	ļ									
44	Total support. Add lines 7 through 10										
11 12	Gross receipts from related activities,	oto (coo instructio	l ne)			12					
	First 5 years. If the Form 990 is for the	•		fourth or fifth tax i							
13	organization, check this box and stor										
Sec	etion C. Computation of Publi										
	Public support percentage for 2022 (I			column (f))		14	%				
15	Public support percentage from 2021					15					
	33 1/3% support test - 2022. If the										
104	stop here. The organization qualifies										
h	33 1/3% support test - 2021. If the		•			or more, check thi					
	and stop here. The organization qual			45							
170	10% -facts-and-circumstances test	•	• •			and line 14 is 10% (
174											
	and if the organization meets the fact			=	-	vi now the organiz					
I-	meets the facts-and-circumstances te	ū	•			17a and line 15 :- :					
D	10% -facts-and-circumstances test	-					1U70 UI				
	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										
40	•		-		• • •						
18	Private foundation. If the organization	n ala not check a	box on line 13, 16a	a, 100, 1/a, 0r 1/b	, cneck this box a	nu see instructions	·L				

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

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

Sec	ction A. Public Support	elow, please comp	lete Part II.)				_
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and		` ,	, ,	,	,	
	membership fees received. (Do not						
	include any "unusual grants.")	615,442.	525,833.	608,959.	1019010.	1227670.	3996914.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	106,272.	110,598.	33,760.	54,751.	46,754.	352,135.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge			(
	Total. Add lines 1 through 5	721,714.	636,431.	642,719.	1073761.	1274424.	4349049.
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)						4349049.
Sec	ction B. Total Support				·		
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	721,714.	636,431.	642,719.	1073761.	1274424.	4349049.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties,	15,863.	12,150.	353.	88.	126.	28,580.
L	and income from similar sources Unrelated business taxable income	13,003.	12,130.	222•	00.	120.	20,300.
L	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	15,863.	12,150.	353.	88.	126.	28,580.
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	737,577.	648,581.	643,072.	1073849.	1274550.	4377629.
14	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3) organizatio	on,
_							
	ction C. Computation of Publi						00 25
	Public support percentage for 2022 (li			olumn (f))		15	99.35 %
	Public support percentage from 2021					16	98.75 %
	ction D. Computation of Inves					47	.65 %
	Investment income percentage for 20					17	
	Investment income percentage from 2 a 33 1/3% support tests - 2022. If the					18 3 1/3% and line 17	,
136	more than 33 1/3%, check this box ar						X
b	33 1/3% support tests - 2021. If the	-	-	•			
	line 18 is not more than 33 1/3%, che	ck this box and st o	op here. The orga	nization qualifies a	s a publicly suppo	rted organization	
20	Private foundation. If the organizatio	n did not check a l	oox on line 14, 19a	a, or 19b, check th	is box and see inst	tructions	

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	he organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	-	elow, the governing body of a supported organization?	11a		
b		illy member of a person described on line 11a above?	11b		
		6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
		in Part VI.	11c		
Sec	tion E	3. Type I Supporting Organizations			
				Yes	No
1	Did th	ne governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
-		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		ne organization operate for the benefit of any supported organization other than the supported			
		ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		vised, or controlled the supporting organization.	2		
Sec	tion C	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			
		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		inagement of the supporting organization was vested in the same persons that controlled or managed			
		apported organization(s).	1		
Sec	tion C	D. All Type III Supporting Organizations			
				Yes	No
1	Did th	ne organization provide to each of its supported organizations, by the last day of the fifth month of the			
		ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	-	(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	,	ason of the relationship described on line 2, above, did the organization's supported organizations have a			
	signifi	icant voice in the organization's investment policies and in directing the use of the organization's			
	incom	ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	suppo	orted organizations played in this regard.	3		
Sec	tion E	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	truction	s)	
2	Activit	ties Test. Answer lines 2a and 2b below.		Yes	No
а	Did su	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the su	upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those	e supported organizations and explain how these activities directly furthered their exempt purposes,			
	how ti	he organization was responsive to those supported organizations, and how the organization determined			
	that th	hese activities constituted substantially all of its activities.	2a		
b	Did th	ne activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one o	r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part \	the reasons for the organization's position that its supported organization(s) would have engaged in			
	these	activities but for the organization's involvement.	2b		
3	Paren	nt of Supported Organizations. Answer lines 3a and 3b below.			
а	Did th	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	truste	es of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	За		
b	Did th	ne organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its	supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying t	rust or	n Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must co		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):		<u> </u>	
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		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

___ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2022

instructions).

Par	t V	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continu	ıed)	
Secti	on D -	Distributions				Current Year
1	Amou	nts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amou	nts paid to perform activity that directly furthers exemp	t purposes of supported			
	organ	izations, in excess of income from activity			2	
3	Admir	nistrative expenses paid to accomplish exempt purpose	s of supported organizations	3	3	
4	Amou	nts paid to acquire exempt-use assets			4	
5	Qualif	ied set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6		distributions (describe in Part VI). See instructions.	,		6	
7	Total	annual distributions. Add lines 1 through 6.			7	
8	Distrib	outions to attentive supported organizations to which th	e organization is responsive			
		de details in Part VI). See instructions.			8	
9	7	outable amount for 2022 from Section C, line 6			9	
10		amount divided by line 9 amount			10	
		,	(i)	(ii)		(iii)
Secti	on E -	Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	ıs	Distributable Amount for 2022
1	Distrib	outable amount for 2022 from Section C, line 6				
2	Under	distributions, if any, for years prior to 2022 (reason-		_		
	able c	ause required - explain in Part VI). See instructions.				
3	Exces	s distributions carryover, if any, to 2022				
а	From	2017				
b	From	2018				
С	From	2019				
d	From	2020				
е	From	2021				
f	Total	of lines 3a through 3e				
g	Applie	ed to underdistributions of prior years				
h	Applie	ed to 2022 distributable amount				
i	Carry	over from 2017 not applied (see instructions)				
j	Rema	inder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distrib	outions for 2022 from Section D,				
	line 7:	\$				
а	Applie	ed to underdistributions of prior years				
b	Applie	ed to 2022 distributable amount				
С	Rema	inder. Subtract lines 4a and 4b from line 4.				
5	Rema	ining underdistributions for years prior to 2022, if				
	any. S	Subtract lines 3g and 4a from line 2. For result greater				
	than z	ero, explain in Part VI. See instructions.				
6	Rema	ining underdistributions for 2022. Subtract lines 3h				
	and 4	b from line 1. For result greater than zero, explain in				
	Part \	/I. See instructions.				
7	Exces	s distributions carryover to 2023. Add lines 3j				
	and 4	-				
8		down of line 7:				
а		s from 2018				
		s from 2019				
		s from 2020				
		s from 2021				
		s from 2022				

Schedule A (Form 990) 2022

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

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

2022

26-2243366 THE VICTORY PROJECT LLC Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule**. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,

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

religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2022)

Name of organization Employer identification number

THE VICTORY PROJECT, LLC

26-2243366

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	CONNOR GROUP FOUNDATION 10510 SPRINGBORO PIKE MIAMISBURG, OH 45342	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHRISTIAN LIFE CENTER 3489 LITTLE YORK RD DAYTON, OH 45414	\$ 503,300.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	NYSUS SOLUTIONS 403 TOMAHAWK DRIVE MAUMEE, OH 45357	\$ 37,800.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4 LORI AND JIM MCCARTHY 4533 SOUTHERN BLVD DAYTON, OH 45429	\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	THE DANIS FOUNDATION INC 3233 NEWMARK DR MIAMISBURG, OH 45342	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

THE VICTORY PROJECT, LLC

26-2243366

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Employer identification number Name of organization THE VICTORY PROJECT, LLC 26-2243366 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

THE VICTORY PROJECT, LLC

Employer identification number 26-2243366

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ac	lvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	conferring
Da			
Pai			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizatio	`	
	Preservation of land for public use (for example, recreat	· —	f a historically important land area
	Protection of natural habitat	Preservation o	of a certified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualific day of the tax year.	ed conservation contribution in the form	Held at the End of the Tax Year
_	Total number of conservation easements		
b		at we in all refer to (a)	I I
	Number of conservation easements on a certified historic stru		2c
u	Number of conservation easements included in (c) acquired at		2d
3	historic structure listed in the National Register		
3	year	eased, extinguished, or terminated by the	e organization during the tax
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h		
	6 , 1 6 ,	,	Ç ,
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conserva	ation easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservatio		
	balance sheet, and include, if applicable, the text of the footnote	ote to the organization's financial statem	ents that describes the
_	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 958	•	
	of art, historical treasures, or other similar assets held for publ		•
	service, provide in Part XIII the text of the footnote to its finance		
b	If the organization elected, as permitted under FASB ASC 958		
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
_			· · · · · · · · · · · · · · · · · · ·
2	If the organization received or held works of art, historical trea		al gain, provide
	the following amounts required to be reported under FASB AS	_	Φ.
a	Revenue included on Form 990, Part VIII, line 1		
D	Assets included in Form 990, Part X		ð

Par	t III Organizations Maintaining C	ollections of Art	, Histo	orical Tre	asures, o	r Other:	Similar A	ssets	(contin	ued)	J
3	Using the organization's acquisition, accession	on, and other records	, check	any of the f	ollowing that	make sig	nificant use	of its		-	
	collection items (check all that apply):										
а	Public exhibition	d		Loan or excl	hange progra	am					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	how the	ey further th	e organizatio	n's exemp	ot purpose	in Part	XIII.		
5	During the year, did the organization solicit or	r receive donations o	f art, his	storical treas	sures, or othe	r similar a	ssets				
	to be sold to raise funds rather than to be ma	aintained as part of th	e organ	ization's col	lection?				Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Comple	te if the	organizatio	n answered '	'Yes" on F	orm 990, P	art IV,	line 9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodia	an or other intermedia	ary for c	ontributions	or other ass	ets not in	cluded				
	on Form 990, Part X?							\square	Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amount		
С	Beginning balance						1c				
	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo						/?		Yes		No
b	If "Yes," explain the arrangement in Part XIII.										
Par	t V Endowment Funds. Complete i	f the organization ans	swered	"Yes" on Fo	rm 990, Part	IV, line 10	١.				
		(a) Current year	(b) P	rior year	(c) Two year	s back (d	d) Three year	rs back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balance	(line 1g	, column (a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С	Term endowment	 %									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.									
За	Are there endowment funds not in the posses	ssion of the organizat	tion that	are held an	d administer	ed for the					
	organization by:								ſ	Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on So	chedule R?					3b		
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipm	ent.									
	Complete if the organization answered	d "Yes" on Form 990,	Part IV	, line 11a. S	ee Form 990	, Part X, lir	ne 10.				
	Description of property	(a) Cost or ot	her	(b) Cost	or other	(c) Acc	cumulated		(d) Bool	c value	
		basis (investm	ent)	basis	(other)	depr	eciation		. ,		
1a	Land			10	0,710.				100	71	LO.
b	Buildings				4,105.	1	20,029			1,07	
С	Leasehold improvements			-							
d	Equipment			5	9,371.		35,067	· .	24	1,30)4.
	Other				4,115.		66,195			7,92	
	. Add lines 1a through 1e. (Column (d) must e		Colum	n (R) line 10	nc)		-		1,097		

	PROJECT, LLC	26	5-22 4 3366 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" o			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	id-of-year market value
1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	id-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" o		11d. See Form 990, Part X, line 15.	
(a) D	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	5.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 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

(6) (7) (8) (9)

	rt XI Reconciliation of Revenue per Audited Financia	-		
	Complete if the organization answered "Yes" on Form 990, Par	IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statemen	ts	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	J			
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	I Other (Describe in Part XIII.)	2d		
е	• • • • • • • • • • • • • • • • • • • •			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а				
b	Other (Describe in Part XIII.)	4b		
С				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, II	ne 12.)	5	
Pa	rt XII Reconciliation of Expenses per Audited Financi		er Return.	
	Complete if the organization answered "Yes" on Form 990, Par			
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а				
b	• • • • • • • • • • • • • • • • • • • •			
С				
d	, , , , , , , , , , , , , , , , , , , ,			
е	• • • • • • • • • • • • • • • • • • • •			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a				
b			4.	
	Add lines 4a and 4b			
5 Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. art XIII Supplemental Information.	line 18.)	5	
	vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	and 4: Part IV lines 1b and 2b; Part V	ling 1: Dort V ling 2: Dort	VI
	s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro		iiile 4, Fait A, iiile 2, Fait	ΛΙ,
111163	s 20 and 4b, and Fart An, lines 20 and 4b. Also complete this part to pro			
		de arry additional information.		
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Inspection Employer identification number

	THE VICTORY	ROJECT, LLC				26-2243366				
Pa	rt I Types of Property									
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amoun		•	s		
1	Art - Works of art									
2	Art - Historical treasures									
3	Art - Fractional interests									
4	Books and publications									
5	Clothing and household goods									
6	Cars and other vehicles	X	2	6,938.	FAIR	MARKET	VA:	LUE		
7	Boats and planes									
8	Intellectual property									
9	Securities - Publicly traded			<u> </u>						
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
	trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation contribution -									
	Historic structures									
14	Qualified conservation contribution - Other									
15	Real estate - Residential									
16	Real estate - Commercial									
17	Real estate - Other									
18	Collectibles									
19	Food inventory	X	52	48,000.	FAIR	MARKET	VA:	LUE		
20	Drugs and medical supplies									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other (COMPUTERS)	X	2	10,000.	FAIR	MARKET	VA:	LUE		
26	Other ()									
27	Other ()									
28	Other ()									
29	Number of Forms 8283 received by the organization	zation during	the tax year for co	ontributions						
	for which the organization completed Form 828	83, Part V, D	onee Acknowledge	ement 29						
								Yes	No	
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	jh 28, tha	at it				
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be used	for					
	exempt purposes for the entire holding period?	?					30a		X	
b	If "Yes," describe the arrangement in Part II.									
31	Does the organization have a gift acceptance p	oolicy that re	quires the review o	of any nonstandard contribut	tions?		31		Х	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash						
	contributions?						32a		Х	
b	If "Yes," describe in Part II.									
33	If the organization didn't report an amount in c	olumn (c) for	a type of property	for which column (a) is ched	cked,					
	describe in Part II.									

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE VICTORY PROJECT, LLC

Employer identification number 26-2243366

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SELFLESS SERVICE WHILE TEARING DOWN THE PILLARS OF POVERTY, ALL WITHOUT
GOVERNMENT FUNDING.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
DINNERS. THE VICTORY PROJECT IS OPEN YEAR-ROUND, EVEN ON HOLIDAYS,
EARNING IT THE PRIVILEGE OF BEING HEARD.
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 IS REVIEWED BY THE CHIEF EXECUTIVE OFFICER, CHIEF FINANCIAL
OFFICER AND BOARD PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
BOARD MEMBERS SIGN THE CONFLICT OF INTEREST POLICY ANNUALLY AT BOARD
MEETING.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.
FORM 990, PART XII, LINE 2C
NO CHANGE FROM PRIOR YEAR.