Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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



A For the 2022 calendar year, or tax year beginning and ending					
B c a	Check if pplicab	e: C Name of organization		D Employer identific	ation number
	Addre	STOKED MENTORING, INC.			
	Name chang			56-253078	33
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final return	68 JAY STREET	407	516-833-0)399
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	651,629.
	Amen	BROOKLIN, NI 11201		H(a) Is this a group re	turn
	Applic tion	F Name and address of principal officer: DR • FAIRICIA CHARLE	EMAGNE	for subordinates	? Yes X No
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
<u> </u>]	Tax-ex	empt status: 🚺 501(c)(3) 🗌 501(c) () (insert no.) 🗌 4947(a)(1) (or 527	If "No," attach a	list. See instructions
	Nebsi			H(c) Group exemption	
		f organization: X Corporation Trust Association Other	L Year	of formation: 2005 N	I State of legal domicile: NY
Pa	art I	Summary			
e	1	Briefly describe the organization's mission or most significant activities: STOKI	ED'S M	ISSION IS TO	CREATE A
Governance		COMMUNITY OF FEARLESS LEADERS THROUGH MEN			
ern	2	Check this box if the organization discontinued its operations or dispos		I	
200	3				<u> </u>
ه ه	l .	Number of independent voting members of the governing body (Part VI, line 1b)			29
ies	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)			100
Activities &	6	Total number of volunteers (estimate if necessary)		_	0.
Ac					0.
		Net unrelated business taxable income from Form 990-T, Part I, line 11		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		840,073.	562,145.
anc	9	Program service revenue (Part VIII, line 2g)		120,423.	80,433.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	1.
Å	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-5,039.	5,930.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		955,457.	648,509.
	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.
s	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		431,477.	604,859.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ee i	b	Total fundraising expenses (Part IX, column (D), line 25) 34, 5	72.		
ŵ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		169,771.	290,772.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		601,248.	895,631.
	19	Revenue less expenses. Subtract line 18 from line 12		354,209.	-247,122.
or Ces			Be	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		599,847.	309,678.
Net Assets (Fund Balanc	21	Total liabilities (Part X, line 26)		94,984.	51,937.
E ^N	22	Net assets or fund balances. Subtract line 21 from line 20		504,863.	257,741.

Part II Signature Block

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

Sign 🗸	Signature of officer		Date				
Here	DR. PATRICIA CHARLEMAGNE,	PRESIDENT					
	Type or print name and title						
	Print/Type preparer's name	Preparer's signstate Da	te Check PTIN				
Paid	CRAIG CASSANO	CRAIG CASSANO 10	0/30/24 self-employed P01551886				
Preparer	Firm's name SAX LLP		Firm's EIN 81-2950760				
Use Only	Firm's address 389 INTERPACE PAR	KWAY; STE 3					
	PARSIPPANY, NJ 07	054	Phone no.973-472-6250				
May the IF	May the IRS discuss this return with the preparer shown above? See instructions						
232001 12-1	3-22 LHA For Paperwork Reduction Act Notic	e, see the separate instructions.	Form 990 (2022)				

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2022) STOKED MENTORING, INC.	56-2530783	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	
1	Briefly describe the organization's mission:		.
	STOKED'S MISSION IS TO CREATE A COMMUNITY OF FEARLESS L MENTORING, OPPORTUNITY, AND ACTION. STOKED RUNS YOUTH D		
	SPORTS BASED MENTORING PROGRAMS FOR UNDERSERVED YOUTH F		
	AND MIDDLE SCHOOL STUDENTS IN NYC, LOS ANGELES, AND CHI		
2	Did the organization undertake any significant program services during the year which were not listed on the		
2	prior Form 990 or 990-EZ?	Ves	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	? Yes	XNo
•	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, a	as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth	• •	nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$715,729. including grants of \$) (Rev	venue \$ 80 , 6	433.)
	STOKED FOR SUCCESS: TO EMPOWER AND PROVIDE COLLEGE / CA	REER READINES	S
	PROGRAMS FOR HIGH SCHOOL STUDENTS. WE CONDUCT AFTERSCHO		
	SPORTS MENTORING PROGRAMS, CAREER DEVELOPMENT WORKSHOPS	-	ΓY
	SERVICE-LEARNING OPPORTUNITIES, ALL AIMED AT HELPING TO		
	LIKELIHOOD OF HIGH SCHOOL GRADUATION AND COLLEGE ACCEPT		A
	100% HIGH SCHOOL GRADUATION RATE AND A 100% COLLEGE ACC	EPTANCE RATE.	
4b	(Code:) (Expenses \$ including grants of \$) (Rev	/enue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Rev	venue \$)
			,
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses715,729.	0	90 (2022)
000		Form 9	30 (2022)
232002	2 12-13-22 2		
	4		

11521031 795584 31421.056

^{2022.06000} STOKED MENTORING, INC. 31421.01

Form	aan	(2022)
FUIII	330	(2022)

 Form 990 (2022)
 STOKED MENTORING, INC.

 Part IV
 Checklist of Required Schedules

14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14a X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X				Yes	No
2 b the organization engage in direct or indexed pailority of provide schedule 0, Part 1 2 X 3 D the organization engage in direct or indexed pailority of provide schedule 0, Part 1 3 X 4 Section 501(s)(a) organizations. Due the organization engage in lookying activities, or have a section 501(h) election in elected during the tax year? If 'vag, complete Schedule C, Part I 4 X 5 is the organization assection 501(s)(d) EOI(s) or 501(c)(d) or 500(c)(d) or	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Old the organization engage in direct or publical campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 3 X 4 Section 501(x)0 organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect of the organization match and yound on advice the organization that receives membership dues, assessments, or animal amounts as defined in Rev. Proc. 6197 II "Yes," complete Schedule D, Part II 4 X 5 Did the organization maintain and yound a onive officing 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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts or accounts or distribution services? 7 X 9 Did the organization maintain collections of works of at, historical trassures, or other similar assets? (***, complete Schedule D, Part II) 8 X 9 Did the organization, directly or hough a related organization, hold assets in donor-restricted endowments or in quasi endowments? (***, complete Schedule D, Part V) 10 X 10 Did the organization report an amount for inestments - organ related in Part X, line 10? (****, complete Schedule D, Part V) 114		If "Yes," complete Schedule A			<u> </u>
public office? 3 X Section 501(k) organization. Bit the organization engage in lobbying activities, or have a section 501(k) election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 X 5 Is the organization a section 501(k), 501(k), 501(k), 501 (k) 50	2		2	X	<u> </u>
 Section 501(c)(3) organizations. Did the organization apage in lobbying activities, or have a section 501(h) election in effect during the tax year? // 'Yes,' complete Schedule C, Part II. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or aminar amounts as defined in Rev. Proc. 89197. // Yes,' complete Schedule C, Part II. Did the organization construe any donor advised in tunds or any aminar funds or accounts? // 'Yes,' complete Schedule D, Part II. Did the organization markina any donor advised in tunds or accounts? // 'Yes,' complete Schedule D, Part II. Did the organization neutrin exament, including easements to other similar assets? // 'Yes,' complete Schedule D, Part II. Did the organization neutrin Part X, time 21, for ecrow or custodial account liability, serve as a custodian for a mount in Part X, time 21, for ecrow or custodial account liability, enve as a custodian for a mount in Part X, time 21, for ecrow or custodial account liability, enve as a custodian in the serve or any of the following questions in 'Yes,' then complete Schedule D, Part III. Did the organization any of the following questions in 'Yes,' then complete Schedule D, Part V, UN, UN, W, or X, as applicable. Did the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part V. Did the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part X. Did the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part X. Did the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part X. Did the organization report an amount for investments - other securities in Part X	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
during the taxy war? (****, *complete Schedule C, Part II 4 X is the organization a section Soft(s)(5) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? (*****, **complete Schedule C, Part III) 5 X 6 Did the organization maintain any donr advised funds or any similar funds or accounts for which donors have the right to provide advised. On the distribution or investment to amounts in such tubids or accounts (D). Part II 6 X 7 Did the organization necesive or hold a conservation easements to preserve open space, the environment, historic land enses, or historic attrutures? If ***sc, **complete Schedule D, Part II 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If ***sc, **complete Schedule D, Part II 8 X 9 Did the organization discusted in Part X, ine 21, for sercew or custodial account liability, serve as a custodian for amounts not listed in Part X, ery complete Schedule D, Part V 9 X 9 Did the organization discusted and parts, ery complete Schedule D, Part V 9 X 10 Did the organization serve to any of the following questions is **s, * then complete Schedule D, Part V 10 X 11 If the organization report an amount for linad, buildings, and equipment in Part X, line 10? If **sc, *complete Schedule D, Part			3		<u> </u>
5 In the organization 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. 991.97 // **es, "complete Schedule C, Part II 5 X D Dt the organization maintam any doore advised funds or any similar funds or accounts? // **es, "complete Schedule D, Part I 6 X D Dt the organization maintam any doore advised in such funds or accounts? // **es, "complete Schedule D, Part II 7 X B Dt the organization maintam any doore advised in easement, including easements to proserve open space, the environment, historic atmoust on load conservation easement, including easements to proserve open space, the service on the organization reproved credit counseling, debt management, credit repair, or debt neglicitation services? 7 X 9 Dd the organization, service row or outstodial account liability, serve as a custodian for amount not tilsed in Part X, ine 21, for secrev or outstodial account liability, serve as a custodian for amount not tilsed in Part X, ine 21, for secrev or outstodial account liability, serve as a custodian for a not quasi endowment? // *es, *complete Schedule D, Part V 10 X 10 Dt the organization report an amount for land, buildings, and equipment in Part X, line 10? // *fors, *complete Schedule D, Part V 11a X 2 Dd the organization report an amount for investments - organ related in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 12 // *fors, *complete Schedule D, Part W 11a X <	4				37
similar amounts as defined in Rev. Proc. 98-197 (#*es," complete Schedule C, Part II 5 X 0 Did the organization maintain any doora advised funds or any similar funds or accounts? (# *Yes," complete Schedule D, Part II 6 X 7 Did the organization maintain aclelations or any similar funds or accounts? (# *Yes," complete Schedule D, Part II 7 X 8 Did the organization maintain aclelations of works of art, historical treasures, or other similar assets? (# 'Yes," complete Schedule D, Part II 8 X 9 Did the organization report an amount in Part X, line 21, for secrow or custodial account liability, serve as a custodian for amounts not listed in Part X to provide credit constinuing, data management, credit repart, or data negotiation services? 9 X 10 Did the organization, directly or through a nelated organization, hold assets in donor-restricted endowments or in quasi endowments? (# 'Yes, 'complete Schedule D, Part V 10 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? (# Yes, 'complete Schedule D, Part V) 11a X 2 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? (# Yes, 'complete Schedule D, Part V) 11a X 2 Did the organization report an amount for investments - program related in Part X, line 15% or more of its total assets reported in Part X, line 167 (# Yes, 'complete Schedule D, Part V) 11a X			4		<u> </u>
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 II 6 X 7 Z <td< th=""><td>5</td><td></td><td></td><td></td><td>v</td></td<>	5				v
provide advice on the distribution or investment of amounts in such funds or account? If "Yes," complete Schedule D, Part II 6 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical advasa, or historic structures? If "Yes," complete Schedule D, Part II 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar asset? If "Yes," complete Schedule D, Part II 8 X 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, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, which we can be address to any of the following questions is "Yes," then complete Schedule D, Part IV. 10 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part XIII 11 X 11 Did the organization report an amount for other assets 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 X 11 X 11 Did the organization report an amount for other assets in Part X, line 13, If this 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11 X <td>-</td> <td></td> <td>5</td> <td></td> <td>_<u>_</u></td>	-		5		_ <u>_</u>
7 Did the organization receive or hold a conservation assement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. 7 X 8 Did the organization maintain collections of vorks of art, historical treasures, or orbite similar assets? If "Yes," complete Schedule D, Part III. 8 X 9 Did the organization neutrin Part X, line 21, for escrew 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? 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 10 X 11 If 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 VI 11 X 11 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 VI 11 X 11 Did the organization report an amount for investments For the tax year include a foothore that advesses the organization shares the organization orbit or other tabilities in Part X, line 12, If with is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 116 X	6				v
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes," complete Schedule D, Part IV 8 X 9 Did the organization report an amount in Part X, line 21, for escrew 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? 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 report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 10 X 12 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 11a X 13 Did the organization report an amount for three assets in Part X, line 13? If "Yes," complete Schedule D, Part VIII 11a X 14 Did the organization oreport an amount for three assets in Part X, line 13? If "Yes," complete Schedule D, Part X 11a X 14 Did the organization oreport an amount for three assets in Part X, line 13? If "Yes," complete Schedule D, Part X 11d X 14 Did the organi	-		6		<u> </u>
B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III IIII B Did the organization report an amount in Part X, line 21, for escrew 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? 9 IV bits To ganization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 9 X ID lid the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VIII If the organization report an amount for investments - other securities in Part X, line 127, If "Yes," complete Schedule D, Part VII 10 X ID lid the organization report an amount for investments - program related in Part X, line 127, If "Yes," complete Schedule D, Part VII 11 X ID lid 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 167 If "Yes," complete Schedule D, Part X 11 X ID lid the organization report an amount for other assets in Part X, line 257 If "Yes," complete Schedule D, Part X 11 X ID lid the organization include in 168 If "Yes," complete Schedule D, Part X 11 X ID lid the organization neport an amount for three assets in Part X, line 257 If "Yes," complete Schedule D, Part X	1		-		v
Schedula D, Part III 8 X 9 Did the organization report an amount in Part X, line 21, fore scrow 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? 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 report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI 10 X 11a X 10 X 11a X 11a X 10 X 11a X 11a X 10 X 11a X 11a X 11a X 11a X 11a X 11b X 11c X </th <td>•</td> <td></td> <td></td> <td></td> <td></td>	•				
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 redit counseling, debt management, credit repair, or debt negotiation services? 9 X 10 Ut the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? 10 X 11 If the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X 12 If the organization, directly or through a related organization, hold assets in donor-restricted endowments? 10 X 13 If the organization report an amount for land, buildings, and equipment in Part X, line 12? If 'Yes,' complete Schedule D, Part V 11a X 14 X 11a X 11a X 15 Did the organization report an amount for investments - other securities 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 X 11a X 16 Ut the organization report an amount for other assets in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11d X 110 X 11d X 11d X 1110 X 11	8				v
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? 9 X If Yes, "complete Schedule D, Part IV 10 X If the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X If the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X If the organization, directly or through a related organization, should assets in Part X, line 10? H *Yes, "complete Schedule D, Part V 10 If 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? 111b X If the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? 112c X If bid the organization report an amount for investments - other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? 112c X If bid the organization report an amount for investments - the tax year include a contract that assets reported in Part X, line 16? 112c X If bid the organization separate or consolidated financial statements for the tax year? 112c X If bid the organization report an amount for inther labilitis in Part X, line 15% or other assistance to o	0	·	•		<u></u>
# "Yes," complete Schedule D, Part IV 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X 11 If the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V 10 X 12 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a X 13 assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI 11b X 14 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 XI 11c X 15 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 11d X 16 Did the organization is lability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 111 X 17 Was the organization is lability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 111 X 18 the organizat	9				
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 10 X 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VII, VII, VII, VII, VII,			•		x
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, VII, IX, or X, as applicable. 11a X a) Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a 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 VI 11b X c) Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11c X d) Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X 11d X e) Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11d X 12a Did the organization is parate, independent audited financial statements for the tax year? 11f X 12b Was the organization included in consolidated, independent audited financial statements for the tax year? 12a X 13 St he organization included in consolidated, independent audited financial statements for the tax year? 12b X 14 Did the organization ansite reployees, or ageneso sotice of the United State	10		3		
11 If the organization's name to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VX, or X, as applicable. 11 It due organization report an amount for land, buildings, and equipment in Part X, line 10? // "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? // "Yes," complete Schedule D, Part VI 11a X c Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // "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? // "Yes," complete Schedule D, Part X 11d X d Did the organization report an amount for other assets in Part X, line 25? // "Yes," complete Schedule D, Part X 11d X e Did the organization separate or consolidated financial statements for the tax year? Include a footnote that addresses the organization asparate, independent audited financial statements for the tax year? 11f X 12a Did the organization aschool described in section 170(bi(1)(k)(i) // "Yes," complete Schedule D, Part X X and XII is optional 11z X 12b Dasto organization oschol described in section 170	10		10		x
as applicable. a) Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // "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? // "Yes," complete Schedule D, Part VII 11a X c) Did the organization report an amount for investments - orgoram related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VIII 11c X d) Did the organization report an amount for other tabilities in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part X 11d X d) Did the organization report an amount for other tabilities in Part X, line 25? // "Yes," complete Schedule D, Part X 11e X f) Did the organization separate, independent audited financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? 11t X 12a Did the organization included in consolidated, independent audited financial statements for the tax year? 12a X 13 Is the organization as achool described in section 170(b)(1)/(h)(i)? // "Yes," complete Schedule D, Part X 11d X 14a X Did the organization aschool described in eD 11e	11				
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // *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? // *Yes,* complete Schedule D, Part VI 11b X c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // *Yes,* complete Schedule D, Part VII 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? // *Yes,* complete Schedule D, Part XII 11d X d Did the organization report an amount for other lassets in Part X, line 25? // *Yes,* complete Schedule D, Part X 11e X f Did the organization separate or consolidated financial statements for the tax year? 11f X 12a Did the organization obtain separate, independent audited financial statements for the tax year? 11f X 13 Is the organization neoper on Part X, line 100(h)(N)(N)? 1* Yes,* complete Schedule E 11a X 14a Did the organization aschool described in section 170(b)(1)(A)(N)? 1* Yes,* complete Schedule E 11a X 15 Did the organization navice astrowards on some than \$5,000 of grants or oth	••				
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 c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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 XI 11c X e Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization noluded in consolidated, independent audited financial statements for the tax year? 11t X 12a Did the organization a school described in section 170(b)(1)(A)(III)? If "Yes," complete Schedule E 11a X 13 Is the organization neport on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 12a X <t< th=""><td>а</td><td></td><td></td><td></td><td></td></t<>	а				
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 c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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 X 11c X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11d X f Did the organization is baparate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 11d X 12a Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII is optional 12a X 13 Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 113 X 14a Did the organization navered "No" to line 35,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 o	u		11a	x	
assets reported in Part X, line 16? /f 'Yes," complete Schedule D, Part VII 11b X c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? /f '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? /f 'Yes," complete Schedule D, Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? /f 'Yes," complete Schedule D, Part X, line 16? /f 'Yes," complete Schedule D, Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? /f 'Yes," complete Schedule D, Part X, line 16? /f 'Yes," complete Schedule D, Part X 11d X e Did the organization's separate or consolidated financial statements for the tax year? 11f 'Yes," complete Schedule D, Part X 11t X 12a Did the organization included in consolidated, independent audited financial statements for the tax year? 11f 'Yes," and if the organization asswered 'No' to line 12a, then completing Schedule D, Part X and XII is optional 12a X 13 Is the organization as achool described in section 170(b(1)(A(ii)?) if 'Yes," complete Schedule E 13a X 14a Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other assistance to or for foreign individuals? If 'Yes," complete Schedule F, Part	b				
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c 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 X 11c X e 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 X 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X f Did the organization othin separate or consolidated financial statements for the tax year include a tootnote that addresses the organization included in consolidated, independent audited financial statements for the tax year? 11f X 12a X Was the organization included in consolidated, independent audited financial statements for the tax year? 12a X 13 Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Part X and XII an	~		11b		Х
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 X 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11d X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 11tl X 12a Did 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, Part X XII and XII is optional 12b X 14a Did the organization naintain an office, employees, or agents outside of the United States? 14a X 15 Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV 16 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II </th <td>с</td> <td></td> <td></td> <td></td> <td></td>	с				
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 X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization included in consolidated financial statements for the tax year? 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," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12a X b Was the organization aschool described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E 13a X 14a Did the organization aschool described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E 13a X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of gants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X	-		11c		Х
Part X, line 16? If "Yes," complete Schedule D, Part IX 11d X P Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? 11f X 12a Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answerd "No" to line 12a, then completing Schedule D, Part X and XII is optional 12b X 13 Is the organization nave aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States? 14a X 14b X 16 X 16 X 17 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnts or other assistance to or for foreign ing invisution report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X 17 Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II and IV	d				
 e Did the organization report an amount for other liabilities in Part X, line 25? /f "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? 1111 X 122 Did the organization included in consolidated, independent audited financial statements for the tax year? 112 If "Yes," and if the organization a school described in section 170(b)(11/(A)(ii)? If "Yes," complete Schedule D, Parts XI and XII 128 Did the organization a school described in section 170(b)(11/(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued a \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report more than \$15,000 total of fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule 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 IX, column (A), line 3, more ther assistance to any complete schedule G, Part II 18 X 19 X 20a X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Ye			11d		Х
f Did the organization's isability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 111 X 12a Did the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII 12a X b Was the organization included in consolidated, independent audited financial statements for the tax year? 12a X b Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States; or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garets or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X 17 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II and IV 16 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part IX, line 9a? If	е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes." complete Schedule D. Part X	11e		Х
12a Did the organization obtain separate, independent audited financial statements for the tax year? // f' 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? // f' Yes, " and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization aschool described in section 170(b)(1)(A)(ii)? // ff "Yes," complete Schedule E 13 X 14 Did the organization naintain an office, employees, or agenes outside of the United States? 14a X b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? /f "Yes," complete Schedule F, Parts II and IV 16 X 17 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? /f "Yes," complete Schedule F, Parts II and IV 16 X 18 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? /f "Yes," complete Schedule F, Parts III and IV 16 X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part					
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a X b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b X b Was the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule D, Parts XI and XII is optional 12b X 14a Did the organization as wered "No" to line 12a, then complete Schedule E 13 X 14b Did the organization aschool described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 14a X 15 Did the organization neport on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X 17 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II and IV 16 X 18 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II and IV 16 X 18 Did the organization report more than \$15,000 of expenses for profes		the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnts or other assistance to or for foreign individuals? 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 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part 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," 18 X 19 Did t	12a				
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts 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 or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 of grass income from gaming activities on Part VIII, line 9a? If "Yes,"		Schedule D, Parts XI and XII	12a		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnts or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 15 X 17 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X 18 Did the organization report at total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," complete Schedule G, Part II 19 X 20a X 20a X<	b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14a X 14a X 14a X 14a X 14a X 		If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 15 X 16 X 16 X 17 Did the organization report on Part IX, column (A), line 3, more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 16 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 18 X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 20a X 20a X 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21	13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a 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 H 20a X 20a 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 H 20a X	14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 18 X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 20a X 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 H 20a X	b				
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> 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 or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions 17 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> 18 X 19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a X 20a 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? <i>If</i> "Yes," <i>complete Schedule H</i> 20a X					
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 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 18 X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 20a X 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 H 20a X			14b		<u> </u>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</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 1 c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," 19 X 20a Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a X 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 X	15				
or for foreign individuals? // "Yes," complete Schedule F, Parts III and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? // "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 1 c and 8a? // "Yes," complete Schedule G, Part II 18 X 19 Did the organization operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes," 19 X 20a Did the organization operate one or more hospital facilities? // "Yes," complete Schedule H 20a X 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? // "Yes," complete Schedule I, Parts I and II 20b			15		<u> </u>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</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 1 c and 8a? <i>If "Yes," complete Schedule G, Part II</i> 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> 19 X 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> 20a X 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> 21 X	16				
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 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 18 X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 20a 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 20a X			16		<u> </u>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," 18 X 19 Did the organization operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," 19 X 20a Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i> 21 X	17				v
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," 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 20b 21 X			17		<u> </u>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," 19 X 20a Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a X 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization operate on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i> 21	18				v
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 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	40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
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 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	19				v
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	00 -				
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					
domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II			200		
	21		24		x
	32003			990 /	

232003 12-13-22

3 2022.06000 STOKED MENTORING, INC. 31421.01

Form	990	(2022)
FUIII	330	(2022)

 Form 990 (2022)
 STOKED MENTORING, INC.
 56-2530783
 Page 4

 Part IV
 Checklist of Required Schedules (continued)
 Continued
 Continued

Pai	The Checklist of Required Schedules (continued)		_	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
	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		
b	I Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		<u> </u>
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		25b		x
06	Schedule L, Part I	250		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			x
07	controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i>	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% control			x
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV			X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	<u>28b</u>		X 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	<u>28c</u>		X X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M			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		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	<u>35b</u>		\vdash
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	on?		
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		\square
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	5		
b		0		
С				
	(gambling) winnings to prize winners?	1c	X	
232004)4 12-13-22 A	Form	n 990	(2022)

11521031 795584 31421.056

^{2022.06000} STOKED MENTORING, INC. 31421.01

Form	990 (2022) STOKED MENTORING, INC. t V Statements Regarding Other IRS Filings and Tax Compliance (continued)	56-2530	783	P	_{age} 5
				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			103	
	filed for the calendar year ending with or within the year covered by this return	2a 29			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return		2b	Х	
			3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad	counts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<u>5</u> a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact		5b		x
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		<u>5c</u>		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				v
	•	····	<u>6a</u>		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contribution upon a statement that such contribution		Ch		
-	were not tax deductible?		<u>6b</u>		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	viego provided to the power?	7-		x
a h		1 1 2	7a 7b		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				<u> </u>
С	to file Form 8282?	is required	7c		x
Ь		7d			
	If "Yes," indicate the number of Forms 8282 filed during the year		7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		x
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
	sponsoring organization have excess business holdings at any time during the year?	•	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders	11a	-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		13a		
а	Is the organization licensed to issue qualified health plans in more than one state?		158		
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
, D	organization is licensed to issue qualified health plans	13b			
с	Enter the amount of reserves on hand	13c	1		
14a			14a		x
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				
	excess parachute payment(s) during the year?		15		x
	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?	16		X
	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 act	tivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		<u> </u>
	If "Yes," complete Form 6069.				
232005	12-13-22		Form	990	(2022)

5 2022.06000 STOKED MENTORING, INC. 31421.01

Form 990	(2022)
----------	--------

STOKED MENTORING, INC.

56-2530783 Pa	age 6
---------------	-------

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. X

Check if Schedule O contains a response or note to any line in this Part VI	
ection A. Governing Body and Management	

Sec	tion A. Governing Body and Management			
			Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year 1a 7		165	
Ia	Enter the number of voting members of the governing body at the end of the tax year 1a 1 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.			
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 supervision			v
	of officers, directors, trustees, or key employees to a management company or other person?	3		X X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	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	1
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
b	Other officers or key employees of the organization	15b	X	
~	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions		_	

	in the total of tob, describe the process of 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
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?	,
Section C. Disclosure	

17	List the states with which a copy of this Form 990 is required to be filed	NY	,CA,IL	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or	1024-A	if applicable)	990, and 990

18	Section 6104 requires	s an organization to make its F	orms 1023 (1024 or 1024-/	A, if applicable), 990, and 990-T (section 501(c)(3)s only) available
	for public inspection.	Indicate how you made these	available. Check all that ap	oply.
	X Own website	X Another's website	X Upon request	Other (explain on Schedule O)
19	Describe on Schedule	e O whether (and if so, how) the	e organization made its go	verning documents, conflict of interest policy, and financial

	statements available to the public during the tax year.
20	State the name, address, and telephone number of the person who possesses the organization's books and records
	GBR CONSULTING LLC $-347-927-4427$

3028	W	29тн	ST,	BROOK	LYN,	NY	11224

232006 12-13-22

6

Form **990** (2022)

Х

16b

2022.06000 STOKED MENTORING, INC. 31421.01

Form 990 (2022)	STOKED MENTORING, INC.	56-2530783 Page 7					
Part VII Com	pensation of Officers, Directors, Trustees, Key Employees, H	lighest Compensated					
Emp	loyees, 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							
	table for all persons required to be listed. Report compensation for the calendar e organization's current officers, directors, trustees (whether individuals or orgar	, , ,					

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		l than d	ne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both r/trus	n an	compensation	compensation	amount of
	week		cer ar		recio	r/trus	lee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or di	ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	rustee	trus		ee	npen		1099-NEC)	1099-NEC)	and related
	below	dual t	utiona	_	m ploy	st col	2	1000 1120)		organizations
	line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former			5
(1) DR. PATRICIA CHARLEMAGNE	50.00									
EXECUTIVE DIRECTOR				X				153,218.	0.	70.
(2) STEVE LAROSILIERE	50.00									
EXECUTIVE DIRECTOR		Х		X				20,061.	0.	26,199.
(3) DEVON GEORGE	2.00									
BOARD CHAIR		Х						0.	0.	Ο.
(4) MARA GROBINS-NASATIR	2.00									
SECRETARY		Х						0.	0.	0.
(5) ELLEN O'CONNELL	2.00									
DIRECTOR		Х						0.	0.	0.
(6) SELEMA MASEKELA	2.00									
DIRECTOR		Х						0.	0.	0.
(7) GINA REBOLLAR	2.00									
DIRECTOR		Х						0.	0.	0.
(8) CARLOS LIMA	2.00									
DIRECTOR		Х						0.	0.	0.
			-	-	-	-				·
232007 12-13-22	1							1		Form 990 (2022)

7

Form 990 (2022)

	990 (2022) STOKED ME									56-2530	783	P	age 8
Par			loye	ees,			ghes	t Co		· ,	1	(F)	
	(A) Name and title	(B) (C) Average hours per week week			an	(D) Reportable compensation from	(E) Reportable compensation from related	table Estimation ar					
		hours for be organized with the second secon						the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	f org an	npensa rom th ganizat d relat anizati	e ion ed	
	Image: Number of the subtotal 173,279. 0. 26,269								69				
1b Subtotal 1/3,279. 0. c Total from continuation sheets to Part VII, Section A 0. 0. d Total (add lines 1b and 1c) 173,279. 0.								6,2	0.				
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization								Yes	<u>1</u> No				
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for si										3	Tes	X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportable 0,000? If "Yes,"	e co " <i>co</i> i	mpe mple	ensat ete S	tion Sche	and edule	oth J fo	er compensation from to such individual	he organization	4	x	
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes." com</i>										5		Х
Sect 1	tion B. Independent Contractors Complete this table for your five highest cor	mnensated ind	ene	nder	nt co	ontra	actor	s th	nat received more than \$	100 000 of compense	tion fr	om	
-	the organization. Report compensation for t	=	-										
	(A) (B) (C) Name and business address NONE Description of services Compensation									n			
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot lin	nited	l to t	thos r	se lis	ted	above) who received mo	ore than			
	wroe,ood or compensation nom the organiz						-				F	990 (

232008 12-13-22

Pa	rt VII	I Statement of Revenue					
		Check if Schedule O contains a response of	r note to any line		(D)		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns 1a					
an oun	b	Membership dues 1b					
s, G	с	Fundraising events 1c					
Gift lar J	d	Related organizations 1d					
,sc imi	е	3 ()	50,882.				
er S	f	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11 000				
l G H J H J H			511,263.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f		562,145.			
<u> </u>	h	Total. Add lines 1a-1f	Business Code	502,145.			
	2 a		713990	80,433.	80,433.		
vice	z a b		113550	00,400.	00,433.		
Serv	c c						
m ver	d						
Program Service Revenue	e						
Pro	f	All other program service revenue					
	g	Total. Add lines 2a-2f		80,433.			
	3	Investment income (including dividends, interes					
		other similar amounts)		1.			1.
	4	Income from investment of tax-exempt bond pro	oceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a						
	b						
	c	· · · · · ·					
	d Zo	Net rental income or (loss) Gross amount from sales of	(ii) Other				
	<i>i</i> a	assets other than inventory 7a					
	h	Less: cost or other basis					
Ð	, D	and sales expenses					
Revenue	с	Gain or (loss)					
Sev		Net gain or (loss)					
<u> </u>	8 a	Gross income from fundraising events (not					
Othe		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a	0.				
	b	Less: direct expenses	3,120.				
		Net income or (loss) from fundraising events		-3,120.			-3,120.
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities Gross sales of inventory, less returns					
	iu a	and allowances					
	h	Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory					
	<u> </u>		Business Code				
snc	11 a	MISC INCOME	1	9,050.			9,050.
cellanec	b			•			
sells eve	с						
Miscellaneous <u>Revenue</u>		All other revenue					
2		Total. Add lines 11a-11d		9,050.			
	12	Total revenue. See instructions		648,509.	80,433.	0.	5,931.
232009	9 12-13	-22					Form 990 (2022)

STOKED MENTORING, INC.

Form 990 (2022)

11521031 795584 31421.056

9 2022.06000 STOKED MENTORING, INC. 31421.01

56-2530783 Page 9

	Form	990	(2022
--	------	-----	-------

STOKED MENTORING, INC. Part IX Statement of Functional Expenses

Do	Check if Schedule O contains a respons	(A)	<u>(B)</u> Program service	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
•	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,				
5	trustees, and key employees	199,549.	165,626.	23,946.	9,977
6	Compensation not included above to disqualified	199,349.	105,020.	23,540.	5,511
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	334,065.	277,274.	40,088.	16,703
8	Pension plan accruals and contributions (include	,	, _ ,		
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	25,878.	21,479.	3,105.	1,294
0	Payroll taxes	45,367.	37,655.	5,444.	2,268
1	Fees for services (nonemployees):	•			•
а	Management				
b					
с	·	35,796.	30,427.	5,369.	
d					
е					
f	Investment management fees				
g					
	column (A), amount, list line 11g expenses on Sch 0.)	48,580.	41,293.	7,287.	
12	Advertising and promotion	6,217.	5,160.	746.	311
3	Office expenses	26,323.	21,848.	3,159.	1,316
14	Information technology				
15	Royalties				
6	Occupancy	22,945.	19,503.	3,442.	
7	Travel	43,006.	35,695.	5,161.	2,150
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	1 0 0 0		1 0 0 0	
2	Depreciation, depletion, and amortization	1,262.		1,262.	
3	Insurance	35,745.		35,745.	
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	MEETING EXPENSES	23,716.	20,159.	3,557.	
b	PAYROLL PROCESSING FEES	11,031.	9,155.	1,323.	553
c	PROGRAM SUPPLIES	8,986.	8,986.		
d	SOFTWARE EXPENSE	8,845.	7,518.	1,327.	
е		18,320.	13,951.	4,369.	
5	Total functional expenses. Add lines 1 through 24e	895,631.	715,729.	145,330.	34,572
6	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)				

10

232010 12-13-22

2022.06000 STOKED MENTORING, INC.

Form 990 (2022)

11521031 795584 31421.056

STOKED MENTORING, INC.

56-2530783 Page 11

		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			440,497.	1	185,122.
	2	Savings and temporary cash investments			5,827.	2	12,093.
	3	Pledges and grants receivable, net			-	3	
	4	Accounts receivable, net			144,511.	4	96,793.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
Assets		controlled entity or family member of any of thes	e perso	ns		5	
	6	Loans and other receivables from other disqualit	fied pers				
		under section 4958(f)(1)), and persons described				6	
Ś	7	Notes and loans receivable, net				7	
set	8	Inventories for sale or use				8	
As	9	B			2,628.	9	7,571.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	19,366.			
	b	Less: accumulated depreciation	10b	19,366. 18,734.	1,894.	10c	632.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line 1			12		
	13	Investments - program-related. See Part IV, line ⁻			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	4,490.	15	7,467.		
	16	Total assets. Add lines 1 through 15 (must equa	599,847.	16	309,678.		
	17	Accounts payable and accrued expenses	44,102.	17	51,937.		
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
se	22	Loans and other payables to any current or form	er office	er, director,			
Liabilities		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
abi		controlled entity or family member of any of thes	se perso	ns		22	
	23	Secured mortgages and notes payable to unrela	ted thir	d parties		23	
	24	Unsecured notes and loans payable to unrelated	d third p	arties	50,882.	24	0.
	25	Other liabilities (including federal income tax, pa	yables t	o related third			
		parties, and other liabilities not included on lines	17-24).	Complete Part X			
		of Schedule D		······		25	
	26				94,984.	26	51,937.
		Organizations that follow FASB ASC 958, che	ck here	X			
čě		and complete lines 27, 28, 32, and 33.			504 060		058 844
Ilan	27			······ -	504,863.	27	257,741.
B	28	Net assets with donor restrictions				28	
oun		Organizations that do not follow FASB ASC 9	58, che	ck here			
Ĕ		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or ec				30	
τÀ	31	Retained earnings, endowment, accumulated in			E04 062	31	
Re	32	Total net assets or fund balances			504,863.	32	257,741.
	33	Total liabilities and net assets/fund balances			599,847.	33	309,678.

Form 990 (2022)

Part X | Balance Sheet

Form 990 (2022)

Form	990 (2022) STOKED MENTORING, INC. 5	6-2530783	Page	e 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	[
1	Total revenue (must equal Part VIII, column (A), line 12)		<u>,50</u>	
2	Total expenses (must equal Part IX, column (A), line 25)		5,63	
3	Revenue less expenses. Subtract line 2 from line 1		-	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	504	.,86	3.
5	Net unrealized gains (losses) on investments 5			
6	Donated services and use of facilities6			
7	Investment expenses7			
8	Prior period adjustments 8			
9	Other changes in net assets or fund balances (explain on Schedule O)			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,			
	column (B))	257	74/	1.
Pa	rt XII Financial Statements and Reporting		-	
	Check if Schedule O contains a response or note to any line in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	_	<u>x</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a			
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2 b	_	<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate bas	is,		
	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 aud	it,		
	review, or compilation of its financial statements and selection of an independent accountant?	<u>2c</u>	_	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule	; O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	<u>3a</u>		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required a			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			

Form **990** (2022)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization

STOKED MENTORING, INC. 56-2530783 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 S 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)(v). 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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)(v). 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(vi), on organization described in section 170(b)(1)(A)(vi), on organization with a land-grant college or university:
 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).) 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A 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)(v). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) A a gricultural research organization described in section 170(b)(1)(A)(x) operated in conjunction with a land-grant college or university: 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).
 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).) 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A 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)(v). A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) A community trust 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)(vi), operated in conjunction with a land-grant college or university: 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).
 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A norganization 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)(v). (Complete Part II.) A community trust 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.) A na organization described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization conganization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 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).
 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.) 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) A a gricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 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).
 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
 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.) 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.) 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 university: 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).
 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.) 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.) 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 university: 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).
 section 170(b)(1)(A)(iv). (Complete Part II.) 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.) 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 university: 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).
 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
 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 university:
 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 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).
 university:
 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).
 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).
income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or
more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on
lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving
the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having
control or management of the supporting organization vested in the same persons that control or manage the supported
organization(s). You must complete Part IV, Sections A and C.
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with,
its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s)
that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness
requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III
functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).
(i) Name of supported (ii) EIN (iii) Type of organization (described on lines 1-10 (described on lines 1-10)
organization (described on lines 1-10 above (see instructions)) Yes No support (see instructions) support (see instructions)
Total

STOKED MENTORING, INC.

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

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

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									
	include any "unusual grants.")	820,648.	691,639.	160,002.	840,073.	562,145.	3074507.			
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	000 640	CO1 C20	1 (0 0 0 0 0	040 072		2074507			
	Total. Add lines 1 through 3	820,648.	691,639.	160,002.	840,073.	562,145.	3074507.			
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)						749,200.			
6	Public support. Subtract line 5 from line 4.						2325307.			
	Section 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 4	820,648.	691,639.	160,002.	840,073.	562,145.	3074507.			
	Gross income from interest,		,							
Ŭ	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources	9.		1.		1.	11.			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on									
10	Other income. Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part VI.)				1,668.	9,050.	10,718.			
11	Total support. Add lines 7 through 10						3085236.			
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	527,880.			
13	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third, f	fourth, or fifth tax y	/ear as a section 5	01(c)(3)				
	organization, check this box and stop									
Sec	ction C. Computation of Publi	c Support Per	centage			r				
	Public support percentage for 2022 (I		-			14	75.37 %			
	Public support percentage from 2021					15	79.71 %			
1 6a	33 1/3% support test - 2022. If the o				14 is 33 1/3% or m	ore, check this bo>				
	stop here. The organization qualifies		-							
b	33 1/3% support test - 2021. If the c	-								
	and stop here. The organization qual									
17a	10% -facts-and-circumstances test	-								
	and if the organization meets the fact			-		-				
1-	meets the facts-and-circumstances te	-		• • • •	-	To and line 1E is -				
b	10% -facts-and-circumstances test	-					IU% Or			
	more, and if the organization meets the									
19	organization meets the facts-and-circu Private foundation. If the organization		-		• •					
10	Trivate roundation. If the organization			a, 100, 17a, 01 17b	, oneon this box al		(Form 990) 2022			
						Concute A				

232022 12-09-22

Schedule A				MENTORING,		
Part III	Support	Schedule	for Organizat	tions Described	in Section	509(a)(2)

STOKED MENTORING, INC.

(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 .)

O a ati a m	A Public Support	
	gualify under the tests listed below.	, please complete Part II.

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 202	2 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.) ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 202	2 (f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) orga	nization,
	check this box and stop here						
Sec	ction C. Computation of Public	c Support Per	centage				
15	Public support percentage for 2022 (ine 8, column (f), d	ivided by line 13,	column (f))		15	%
16	Public support percentage from 2021					16	%
Sec	ction D. Computation of Inves	stment Income	e Percentage				
	Investment income percentage for 20	-				17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2022. If the	organization did r	ot check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and	line 17 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	fies as a publicly s	supported organiza	ation	
b	33 1/3% support tests - 2021. If the	-					
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins		
23202	23 12-09-22		15			Sche	dule A (Form 990) 2022

^{2022.06000} STOKED MENTORING, INC.

STOKED MENTORING, INC.

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

Yes No

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")? // "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?
- 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 disgualified 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.)

232024 12-09-22

11521031 795584 31421.056

6 7 8 9a 9b 9c 10a 10b Schedule A (Form 990) 2022 31421.01

16

	(Form 990) 2022	STOKED	-
Part IV	Supporting Orga	anizations _{(coni}	tinued)

STOKED MENTORING, INC.

1

2

Yes No

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			

	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
2	Did the organization operate for the benefit of any supported organization other than the supported
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated.

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised	<u>1. or controlled the</u>	supporting orga	anization.
Section C. T	ype II Support	ing Organiz	ations

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

Section D. All Type III Supporting Organizations	
--	--

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

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to sat	sfy the Integral Par	t Test during the year	(see instructions).
	Check the DOX hext to the method that the organization used to sat	אין נוופ ווונפעומו רמו	l rest during the year	

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c 🗌	The organization supported a governmental entity	Describe in Part VI how	you supported a	governmental entity	(see instructions	s).
-----	--	-------------------------	-----------------	---------------------	-------------------	-----

17

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

2a ______ 2b _____ 2b _____ 3a _____ 3b _____ Schedule A (Form 990) 2022

Yes No

232025 12-09-22

2022.06000 STOKED MENTORING, INC.

_	edule A (Form 990) 2022 STOKED MENTORING, INC.	-		56-2530783 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti			
1	Check here if the organization satisfied the Integral Part Test as a qualify	ng trust on	Nov. 20, 1970 (explain	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.	
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):			
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		
7	Check here if the current year is the organization's first as a non-function	ally integrat	ed Type III supporting or	rganization (see

instructions).

Schedule A (Form 990) 2022

232026 12-09-22

11521031 795584 31421.056

c Excess from 2020 d Excess from 2021 e Excess from 2022

Administrative expenses paid to accomplish exempt purposes of supported organizations 3 3 4 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 Other distributions (describe in Part VI). See instructions. 6 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 9 9 Distributable amount for 2022 from Section C, line 6 10 **10** Line 8 amount divided by line 9 amount (i) (ii) (iii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Amount for 2022 Pre-2022 1 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2022 a From 2017 **b** From 2018 c From 2019 d From 2020 e From 2021 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2022 distributable amount i Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2022 from Section D, line 7: \$ a Applied to underdistributions of prior years b Applied to 2022 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019

Schedule A (Form 990) 2022 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Amounts paid to perform activity that directly furthers exempt purposes of supported

1 Amounts paid to supported organizations to accomplish exempt purposes

organizations, in excess of income from activity

Section D - Distributions

2

56-2530783 Page 7

1

2

Current Year

Schedule A (Form 990) 2022

31421.01

Schedule A	(Form 990) 2022 STOKED MENTORING, INC.	56-2530783 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for a (See instructions.)	line 17a or 17b; Part III, line 12; n B, lines 1 and 2; Part IV, Section C, ne 1; Part V, Section B, line 1e; Part V, any additional information.
232028 12-09-2	2 20	Schedule A (Form 990) 2022

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

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

2022

Employer identification number

56-2530783

ST	OKED	MENTORING
Organization type (check o	ne):	

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

INC

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

General Rule

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

Special Rules

X 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 $_{\theta XC}$ for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an $_{exclusively}$ religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received $_{nonexclusively}$ religious, charitable, etc., contributions totaling \$5,000 or more during the year $_{nonexclusively}$ \$

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).

 $\label{eq:LHA} \ \ \mbox{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

STOKED MENTORING,

INC.

Name of organization

Employer identification number

56-2530783

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 Х Person Payroll 25,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 2 Х Person Payroll 5,050. Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 3 Person Х Payroll Noncash 5,000. \$ (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 4 Х Person Payroll 10,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 Х Person Payroll 8,000. Noncash (Complete Part II for noncash contributions.) (c) (d) (a) (b) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Х 6 Person Payroll Noncash 20,000. \$ (Complete Part II for noncash contributions.) 223452 11-15-22 Schedule B (Form 990) (2022)

2022.06000 STOKED MENTORING, INC. 31421.01

2

Page 2

Schedule B (Form 990) (2022)

STOKED MENTORING,

INC.

Name of organization

Employer identification number

56-2530783

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 7 Х Person Payroll 35,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 8 Х Person Payroll 5,000. Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 9 Person Х Payroll Noncash 25,000. \$ (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 10 Х Person Payroll 5,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 11 Х Person Payroll 256,982. Noncash (Complete Part II for noncash contributions.) (c) (d) (a) (b) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 12 Х Person Payroll Noncash 50,882. \$ (Complete Part II for noncash contributions.) 223452 11-15-22 Schedule B (Form 990) (2022)

3 2022.06000 STOKED MENTORING,

31421.01

INC.

Schedule B ((Form	990)	(2022)
--------------	-------	------	--------

Name of organization

Page 3

STOKED MENTORING, INC.

Employer identification number

56-2530783

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

4

2022.06000 STOKED MENTORING, INC.

Name of o	rganization			E	mployer identification number
STOK EI	D MENTORING, INC.				56-2530783
Part III		a) through (e) and the following line charitable, etc., contributions of \$1,000	entry. For orga	anizations	total more than \$1,000 for the year
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descrip	otion of how gift is held
-		(e) Transfer o	f gift		
-	Transferee's name, address, a	and ZIP + 4	Rel	ationship of trans	feror to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descrip	otion of how gift is held
-		(e) Transfer o	f gift		
-	Transferee's name, address, a	and ZIP + 4	Rel	ationship of trans	feror to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descrip	otion of how gift is held
	Transferee's name, address, a	(e) Transfer o		ationship of trans	feror to transferee
-				•	
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descrip	otion of how gift is held
-		e) Transfer o	f gift		
-	Transferee's name, address, a	and ZIP + 4	Rel	ationship of trans	feror to transferee
23454 11-15	5-22				Schedule B (Form 990) (2022

11531018 795584 31421.056

5 2022.06000 STOKED MENTORING, INC. 31421.01

SC	HEDULE D	Supplementa	al Financial Statements		OMB No. 1545-0047			
	n 990)	Complete if the orga	nization answered "Yes" on Form 990,		2022			
Doport	ment of the Treasury), 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.		Open to Public			
	Revenue Service		0 for instructions and the latest information.		Inspection			
Nam	e of the organizati			Em	Diover identification number			
Par	t I Organiza	STOKED MENTORING,	d Funds or Other Similar Funds or A		<u>56-2530783</u>			
1 0		n answered "Yes" on Form 990, Part IV, lin		ccour	Its. Complete il the			
		,,,	(a) Donor advised funds	(b) Fur	ds and other accounts			
1	Total number at er	nd of year						
2		f contributions to (during year)						
3		f grants from (during year)						
4		t end of year						
5	Did the organization	on inform all donors and donor advisors in	writing that the assets held in donor advised fu	nds				
	are the organization	on's property, subject to the organization's	exclusive legal control?		Yes No			
6	•	•	dvisors in writing that grant funds can be used					
			r donor advisor, or for any other purpose confe	•				
Par	impermissible prive		ganization answered "Yes" on Form 990, Part I					
1		servation easements held by the organizati		/, iii e 7.				
•		of land for public use (for example, recrea		torically	important land area			
		f natural habitat	Preservation of a cer		•			
		of open space						
2	Complete lines 2a	through 2d if the organization held a quali	fied conservation contribution in the form of a c	onserva	tion easement on the last			
	day of the tax year	<i>.</i>			Held at the End of the Tax Year			
а	Total number of co	onservation easements		2a				
b								
С			ucture included in (a)	2c				
d		vation easements included in (c) acquired a	• • •					
2			accord autionuished as terminated by the area	2d	during the tax			
3	year	vation easements modified, transferred, rel	eased, extinguished, or terminated by the orga	lization	during the tax			
4		 where property subject to conservation eas	sement is located					
5		tion have a written policy regarding the per						
	violations, and enf	orcement of the conservation easements it	t holds?		Yes No			
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservat					
7	Amount of expens	es incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation e	asemen	ts during the year			
-								
8			re satisfy the requirements of section 170(h)(4)(E					
9	and section 170(h)		on easements in its revenue and expense state					
5	,	e 1	1					
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.							
Par	t III Organiza	ations Maintaining Collections of	f Art, Historical Treasures, or Other	Simila	r Assets.			
	Complete it	the organization answered "Yes" on Form	1 990, Part IV, line 8.					
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and ba	lance sl	neet works			
	of art, historical tre	easures, or other similar assets held for put	olic exhibition, education, or research in furthera	ance of	oublic			
	· •		ncial statements that describes these items.					
b	-		8, to report in its revenue statement and balance					
			exhibition, education, or research in furtherand	e of pul	DIIC Service,			
	•	ng amounts relating to these items: ded on Form 990, Part VIII, line 1			\$			
					\$\$			
2	.,		asures, or other similar assets for financial gain					
-	-	unts required to be reported under FASB A						
а	-				\$			
b					\$			
LHA	For Paperwork Re	eduction Act Notice, see the Instructions	s for Form 990.		Schedule D (Form 990) 2022			

11521031 795584 3142

232051 09-01-22

2022.06000 STOKED MENTORING, INC. 31421.01

		MENTORING,						56-25	30783	3 Ра	age 2
Par	t III Organizations Maintaining C								(contir	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check ar	ny of the f	ollowing that	make s	ignificant (use of its			
	collection items (check all that apply):										
а	Public exhibition	d			hange progra						
b	Scholarly research	e	e 🗌 Ot	her							
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explair	n how they	further th	ne organizatio	n's exer	npt purpo	se in Part	XIII.		
5											
Dec	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran		ete if the o	rganizatio	n answered "	Yes" on	Form 990), Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa										
1 a	Is the organization an agent, trustee, custod								٦.,		٦
	on Form 990, Part X?							∟	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing tab	le:					Amoun	+	
	De site site a la de se s								Amoun		
	Beginning balance										
	Additions during the year										
	Distributions during the year										
	Ending balance Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII.							L]
Par							10.	<u></u>			<u></u>
		(a) Current year	(b) Pric		(c) Two year		(d) Three	ears back	(e) Four	years	back
1a	Beginning of year balance						.,		. ,		
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
	End of year balance										
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1g, c	column (a)) held as:						
а	Board designated or quasi-endowment	-	_%								
b	Permanent endowment	%									
с	Term endowment	<u>%</u>									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organiza	ation that a	re held ar	nd administer	ed for th	ne		,		
	organization by:									Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the		wment fun	ds.							
Fai	t VI Land, Buildings, and Equipm				Faure 000	Devt V	line 10				
	Complete if the organization answere				I				<u> </u>		
	Description of property	(a) Cost or o basis (investr		. ,	or other (other)	• •	ccumulate preciation		(d) Boo	k value	Э
1a	Land										
b	Buildings										
с	Leasehold improvements										
d	Equipment			1	9,366.		18,7	34.		6	32.
	Other										
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column	(<u>B), line 1</u>	0c.)	<u></u>					32.
								Cabadula		- 000	0000

Schedule D (Form 990) 2022

232052 09-01-22

Schedule [) (Form 990) 2022	STOKED	MENTORING,	INC

	nvestments - Other Securities. Complete if the organization answered "Yes" o	n Form 990 Part IV line	11b See Form 990 Part X line 12	
	on of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
1) Financial of		.,		,
	eld equity interests			
3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Part VIII	must equal Form 990, Part X, col. (B) line 12.)	n Form 000 Port IV/ line	11. See Form 000 Dert V line 12	
(Complete if the organization answered "Yes" o (a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
(1)		US DOOR VALUE	(c) method of valuation. Oost of end	Si your market value
(1)			1	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	Other Assets. Complete if the organization answered "Yes" o (a) D	n Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15.	(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
rotal. (Columi Part X 0	n (b) must equal Form 990, Part X, col. (B) line Other Liabilities.			
Total. (Columi Part X 0	Other Liabilities. Complete if the organization answered "Yes" o			(b) Book value
Fotal. <u>(Columi</u> Part X C C	Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability			(b) Book value
Fotal. (Column Part X C C I. (1) Federa	Other Liabilities. Complete if the organization answered "Yes" o			(b) Book value
Total. (Column Part X C (C 1. (1) Feder: (2)	Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability			(b) Book value
Iteration Column Part X C C C 1. C (1) Federation (2) C (3) C	Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability			(b) Book value
Iteration Columnia Part X C C C 1. C (1) Federation (2) C (3) C (4) C	Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability			(b) Book value
Total. (Columni Part X C (1) Federation (2) (3) (4) (5)	Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability			(b) Book value
Iteration Columnia Part X C C C 1. C (1) Federation (2) C (3) C (4) C	Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability			(b) Book value
Fotal. (Columni Part X C (1) Federa (2) (3) (4) (5) (6) (6)	Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability			(b) Book value
Fotal. (Columni Part X C (1) Federa (2) (3) (4) (5) (6) (7)	Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability			(b) Book value

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

Schedule D (Form 990) 2022

232053 09-01-22

Sche	dule D (Form 990) 2022 STOKED MENTORING, INC	•	56-2530783 Page 4
	t XI Reconciliation of Revenue per Audited Financial	Statements With Revenu	e per Return.
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	s	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		
Pa	t XII Reconciliation of Expenses per Audited Financial	•	ses per Return.
	Complete if the organization answered "Yes" on Form 990, Part		
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	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b		4b	
С	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, li	ine 18.)	
Pa	t XIII Supplemental Information.		

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

232054 09-01-22

SC	HEDULE J	Compensation Information		OMB No. 1	545-004	47	
(Fo	rm 990)	- For certain Officers, Directors, Trustees, Key Employees, and Highest	ľ	20	ົງງ)	
		Compensated Employees		20		-	
Dopo	tmont of the Treesury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to Publi			
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction		
Nan	ne of the organization	1		identificatio		nber	
		STOKED MENTORING, INC.	56-2	253078	3		
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,				
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or c	harter travel Housing allowance or residence for perso	nal use				
	Travel for com	panions Payments for business use of personal re-	sidence				
		ation and gross-up payments					
	Discretionary s	spending account Personal services (such as maid, chauffer	ır, chef)				
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or					
-	•			1b			
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2			
~	la d'acta e del de 16 au						
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's							
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to							
	establish compensation of the CEO/Executive Director, but explain in Part III.						
	Compensation						
	·	ompensation consultant Compensation survey or study ther organizations X	ommittee				
		ther organizations X Approval by the board or compensation c	ommittee				
4	During the year did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
-	organization or a re						
а	-	e payment or change-of-control payment?		4a		х	
b		eive payment from a supplemental nonqualified retirement plan?				x	
c	-	eive payment from an equity-based compensation arrangement?				x	
-	-	ies 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
	·····,						
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n				
	contingent on the r						
а	The organization?			5a		X	
b	Any related organiz	ation?				X	
		or 5b, describe in Part III.					
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n				
contingent on the net earnings of:							
а	The organization?			<u>6</u> a		X	
		ation?				X	
	If "Yes" on line 6a c	or 6b, describe in Part III.					
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments					
		nes 5 and 6? If "Yes," describe in Part III		7		X	
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th	ne				
				8		X	
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in							
		1 53.4958-6(c)?					
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sche	dule J (Forn	n 990)	2022	

232111 10-18-22

Schedule J (Form 990) 2022

56-2530783

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC		(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DR. PATRICIA CHARLEMAGNE	(i)	153,218.	0.	0.	70.	0.	153,288.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2022

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2022

SCHEDULE O (Form 990)

Name of the organization

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.



56-2530783

STOKED MENTORING, INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ACTION. STOKED RUNS YOUTH DEVELOPMENT AND SPORTS-BASED MENTORING

PROGRAMS FOR UNDERSERVED YOUTH (11-24 YEARS OLD) IN NYC, LOS ANGELES,

AND CHICAGO.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FINANCE COMMITTEE REVIEWS THE 990 BEFORE FILING. COPIES OF THE 990 ARE

SENT TO THE FULL BOARD AND ANY QUESTIONS ABOUT IT ARE ADDRESSED BY THE

FINANCE COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 12C:

STOKED REVIEWS CONFLICTS OF INTEREST AT THE BOARD LEVEL IN COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY. NO FINANCIAL INTERESTS SUBJECT TO THE CONFLICT OF INTEREST POLICY WERE DISCLOSED IN THE CURRENT YEAR. THE BOARD AND PRESIDENT ARE WELL AWARE OF THE ORGANIZATIONS' CONFLICT OF INTEREST POLICY AND ARE VIGILANT IN LOOKING OUT FOR POTENTIAL CONFLICTS OF INTEREST. ADDITIONALLY, NEW EMPLOYEES ARE PROVIDED THE CONFLICT OF INTEREST POLICY TO EDUCATE THEM ON THE ORGANIZATION'S COMPLIANCE REQUIREMENTS.

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

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS -

CEO & TOP MANAGEMENT THE BOARD OF DIRECTORS FULLY REVIEWS THE COMPENSATION

OF THE PRESIDENT, OTHER OFFICERS AND KEY EMPLOYEES ANNUALLY. FOR THE

ORGANIZATION'S PRESIDENT, THE BOARD OF DIRECTORS SETS ANNUAL COMPENSATION

ON ITS OWN, WITHOUT THE PARTICIPATION OF THE PRESIDENT. FOR ALL OTHER

 OFFICERS
 AND
 KEY
 EMPLOYEES
 THE
 BOARD
 OF
 DIRECTORS
 CONSIDERS
 THE

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2022

 232211
 10-28-22
 Schedule O (Form 990) 2022

34

Schedule O (Form 990) 2022	Page 2				
Name of the organization STOKED MENTORING, INC.	Employer identification number 56-2530783				
PRESIDENT'S RECOMMENDATIONS AND MAKES ADJUSTMENTS WHERE APPROPRIATE.THE					
DIRECTORS CONSIDER INDIVIDUAL AND ORGANIZATIONAL PERFORMANCE IN					
COMPENSATION, AS WELL AS OTHER FACTORS WE DEEM IMPORTANT SUCH AS INTEGRITY.					
THE BOARD OF DIRECTORS MAY ALSO CONSIDER COMPENSATION RELA	TED TO				
APPROPRIATE PEER ORGANIZATIONS FOR BENCHMARKING PURPOSES.					
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROV	AL PROCESS -				
OFFICERS & KEY EMPLOYEES					
THE BOARD OF DIRECTORS FULLY REVIEWS THE COMPENSATION OF T	HE PRESIDENT,				
OTHER OFFICERS AND KEY EMPLOYEES ANNUALLY. FOR THE ORGANIZ	ATION'S				
PRESIDENT, THE BOARD OF DIRECTORS SETS ANNUAL COMPENSATION	ON ITS OWN,				
WITHOUT THE PARTICIPATION OF THE PRESIDENT. FOR ALL OTHER	OFFICERS AND KEY				
EMPLOYEES, THE BOARD OF DIRECTORS CONSIDERS THE PRESIDENT'	S RECOMMENDATIONS				
AND MAKES ADJUSTMENTS WHERE APPROPRIATE. THE DIRECTORS CON	SIDER INDIVIDUAL				
AND ORGANIZATIONAL PERFORMANCE IN COMPENSATION, AS WELL AS	OTHER FACTORS WE				
DEEM IMPORTANT SUCH AS INTEGRITY. THE BOARD OF DIRECTORS M	AY ALSO CONSIDER				
COMPENSATION RELATED TO APPROPRIATE PEER ORGANIZATIONS FOR	BENCHMARKING				
PURPOSES.					

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

STOKED MENTORING, INC. FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC

232212 10-28-22