

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 2023 calendar year, or tax year beginning07/01/23**, and ending** 06/30/24

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

C Name of organization

MIZELL CENTER

Doing business as

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

480 S SUNRISE WAY

Room/suite

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

PALM SPRINGS CA 92262-7641

D Employer identification number

95-3464835

E Telephone number

760-323-5689

G Gross receipts\$ **3,326,984**

F Name and address of principal officer:

WES WINTER

480 S. SUNRISE WAY

PALM SPRINGS CA 92262

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

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

If "No," attach a list. See instructions

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

J Website: **WWW.MIZELL.ORG**

H(c) Group exemption number

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

L Year of formation: **1980**

M State of legal domicile: **CA**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROVIDE DYNAMIC PROGRAMS AND RELEVANT SERVICES THAT ARE RESPONSIVE TO OUR ADULT COMMUNITY.		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	63
	6 Total number of volunteers (estimate if necessary)	6	75
	7a Total unrelated business revenue from Part VIII, column (C), line 12		0
b Net unrelated business taxable income from Form 990-T, Part I, line 11		0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 3,649,802	Current Year 2,498,560
	9 Program service revenue (Part VIII, line 2g)	485,368	332,102
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,004	22,892
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	401,365	400,580
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,539,539	3,254,134
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,041,736	2,097,727
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25)	277,230	
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,889,974	1,573,167
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	3,931,710	3,670,894
19 Revenue less expenses. Subtract line 18 from line 12	607,829	-416,760	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 2,291,183	End of Year 2,104,934
	21 Total liabilities (Part X, line 26)	151,613	277,292
	22 Net assets or fund balances. Subtract line 21 from line 20	2,139,570	1,827,642

Part II Signature Block

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

Sign Here	Signature of officer		Date	
	WES WINTER Type or print name and title		EXECUTIVE DIR.	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed PTIN
	SHANNON C. MAIDMENT	COURTESY COPY ORIGINAL FILED ELECTRONICALLY	12/13/24	P01426554
	Firm's name	Firm's EIN		
	COACHELLA VALLEY ACCOUNTING & AUDITING 43675 ALBA CT LA QUINTA, CA 92253	442-325-0089		

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

☒**1** Briefly describe the organization's mission:**TO SUPPORT INDEPENDENCE AND SELF-SUFFICIENCY THROUGH AN INCLUSIVE NETWORK OF EDUCATION, INFORMATION, AND ASSISTANCE WITH PROBLEM SOLVING.****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ **1,412,570** including grants of \$) (Revenue \$ **142,607**)**MEALS ON WHEELS:**

MIZELL OPERATES THE LARGEST MEALS ON WHEELS PROGRAM IN THE COACHELLA VALLEY FUELED BY THE BELIEF THAT NO SENIOR SHOULD EVER HAVE TO CHOOSE BETWEEN BUYING FOOD AND PAYING FOR MEDICINE. WE DELIVER UPWARDS OF 400 HOT, NUTRITIOUS MEALS EVERY WEEKDAY, TOTALING MORE THAN 180,000 PER YEAR, TO HOMEBOUND SENIORS, AND TO 5 CONGREGATE SITES SUCH AS OTHER SENIOR CENTERS, FROM PALMS SPRINGS ALL THE WAY TO THE SALTON SEA. OUR PROFESSIONAL DRIVERS NOT ONLY DELIVER HEALTHY MEALS BUT ALSO PERFORM WELLNESS CHECKS AND ARE TRAINED IN CPR AND ELDER ABUSE DETECTION.

4b (Code:) (Expenses \$ **747,342** including grants of \$) (Revenue \$ **126,378**)**SEE SCHEDULE O****4c** (Code:) (Expenses \$ **1,053,481** including grants of \$) (Revenue \$ **63,117**)**NUTRITION/CONGREGATE LUNCHES:****THIS PROGRAM PROVIDES ON-SITE LUNCHES TO SENIOR CITIZENS.****4d** Other program services (Describe on Schedule O.)

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

4e Total program service expenses **3,213,393**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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 "Yes," complete Schedule F, Parts III and IV</i>		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 "Yes," complete Schedule G, Part I. See instructions</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	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>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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 "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	21	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	63
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI ☒**Section A. Governing Body and Management**

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	1a 13		
b Enter the number of voting members included on line 1a, above, who are independent	1b 13		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		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		X
6 Did the organization have members or stockholders?	6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
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		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
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	X
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	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	15b	X
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

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

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

VALDEMAR GALEANA**480 S. SUNRISE WAY****PALM SPRINGS****CA 92262****760-323-5689**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) WES WINTER	40.00									
EXECUTIVE DIR.	0.00			X				114,269	0	16,100
(2) VALDEMAR GALEANA	40.00									
FINANCE DIRECTOR	0.00	X						75,550	0	22,020
(3) BRIAN CHAVARIN, MS, ATC	3.50									
PRESIDENT	0.50	X		X				0	0	0
(4) MARY LIVINGSTON	1.00									
VICE-PRESIDENT	0.00	X		X				0	0	0
(5) TIM HOHMEIER	1.00									
TEASURER	0.00	X		X				0	0	0
(6) CRAIG BORBA, ED.D	1.00									
SECRETARY	0.00	X		X				0	0	0
(7) BRIAN WACHS, CPA	0.75									
BOARD MEMBER	0.25	X						0	0	0
(8) RICHARD CAIN	1.00									
BOARD MEMBER	0.00	X						0	0	0
(9) MARJORIE CONLEY AIKENS	0.50									
BOARD MEMBER	0.00	X						0	0	0
(10) MARK MARSHALL	0.50									
BOARD MEMBER	0.00	X						0	0	0
(11) CAROL FRAGEN	0.50									
BOARD MEMBER	0.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) BENJAMIN FARBER										
(12) BOARD MEMBER	0.50 0.00	X						0	0	0
(13) ROBERT CIPOLLONI										
(13) BOARD MEMBER	0.50 0.00	X						0	0	0
(14) DAVID KELLY										
(14) BOARD MEMBER	0.50 0.00	X						0	0	0
(15) DARNEISHA BEELER										
(15) BOARD MEMBER	0.50 0.00	X						0	0	0
(16)										
(17)										
(18)										
(19)										
1b Subtotal								189,819		38,120
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								189,819		38,120

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

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

Section B. Independent Contractors

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

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

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

0

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a						
	b Membership dues	1b	81,104					
	c Fundraising events	1c	139,468					
	d Related organizations	1d						
	e Government grants (contributions)	1e	1,796,290					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	481,698					
	g Noncash contributions included in lines 1a-1f	1g	\$ 104,936					
	h Total. Add lines 1a-1f		2,498,560					
	Program Service Revenue			Business Code				
2a MEALS ON WHEELS				142,607	142,607			
b VARIOUS PROGRAMS/CLASSES				126,378	126,378			
c NUTRITION/CONGREGATE				63,117	63,117			
d								
e								
f All other program service revenue								
g Total. Add lines 2a-2f			332,102					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			22,892			22,892	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a Gross rents		(i) Real	(ii) Personal				
		6a	90,384					
		b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c	90,384					
	d Net rental income or (loss)			90,384	90,384			
	7a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
		7a						
		b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c						
	d Net gain or (loss)							
	8a Gross income from fundraising events (not including \$ 139,468 of contributions reported on line 1c). See Part IV, line 18							
		8a	55,256					
		b Less: direct expenses	8b	72,850				
	c Net income or (loss) from fundraising events			-17,594				
9a Gross income from gaming activities. See Part IV, line 19								
	9a							
	b Less: direct expenses	9b						
c Net income or (loss) from gaming activities								
10a Gross sales of inventory, less returns and allowances								
	10a	64,659						
	b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory			64,659	64,659				
Miscellaneous Revenue			Business Code					
	11a MANAGEMENT CONTRACT			262,931	262,931			
	b MISCELLANEOUS INCOME			200			200	
	c							
	d All other revenue							
	e Total. Add lines 11a-11d		263,131					
12 Total revenue. See instructions			3,254,134	750,076	0	23,092		

Part IX Statement of Functional Expenses*Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).*Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	231,000	198,987	12,463	19,550
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,518,613	1,308,157	81,931	128,525
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	11,477	9,887	619	971
9 Other employee benefits	198,453	170,950	10,707	16,796
10 Payroll taxes	138,184	119,034	7,455	11,695
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	932	699	233	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	25,308	15,852	4,572	4,884
12 Advertising and promotion				
13 Office expenses	57,057	36,564	10,248	10,245
14 Information technology				
15 Royalties				
16 Occupancy	230,788	154,748	11,343	64,697
17 Travel	4,235	4,129	53	53
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	93,517	74,814	18,703	
23 Insurance	36,145	29,437	3,354	3,354
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOOD COST	705,115	705,115		
b REPAIRS/MAINTENANCE	226,871	205,918	9,290	11,663
c PROGRAM EXPENSES	83,917	83,363	277	277
d KITCHEN EXPENSES	68,232	68,232		
e All other expenses	41,050	27,507	9,023	4,520
25 Total functional expenses. Add lines 1 through 24e	3,670,894	3,213,393	180,271	277,230
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	422,281	1	557,336
	2 Savings and temporary cash investments	577,891	2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	500,184	4	238,409
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,064	9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,489,297		
	b Less: accumulated depreciation	10b 2,199,158	10c 305,790	1,290,139
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	483,973	15	19,050
16 Total assets. Add lines 1 through 15 (must equal line 33)	2,291,183	16	2,104,934	
Liabilities	17 Accounts payable and accrued expenses	151,613	17	168,196
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	109,096
	26 Total liabilities. Add lines 17 through 25	151,613	26	277,292
	Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.		
27 Net assets without donor restrictions		1,471,755	27	1,758,926
28 Net assets with donor restrictions		667,815	28	68,716
Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.				
29 Capital stock or trust principal, or current funds			29	
30 Paid-in or capital surplus, or land, building, or equipment fund			30	
31 Retained earnings, endowment, accumulated income, or other funds			31	
32 Total net assets or fund balances		2,139,570	32	1,827,642
33 Total liabilities and net assets/fund balances	2,291,183	33	2,104,934	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,254,134
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,670,894
3	Revenue less expenses. Subtract line 2 from line 1	3	-416,760
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,139,570
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	104,832
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,827,642

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		☒
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	☒	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	☒	
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? _____	☒	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	☒	

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

MIZELL CENTER

Employer identification number

95-3464835

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

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

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990) 2023

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,135,269	2,937,328	2,561,198	3,649,802	2,498,560	13,782,157
2 Tax revenues levied for the organization'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	91,945	91,945	92,000	99,852	104,832	480,574
4 Total. Add lines 1 through 3	2,227,214	3,029,273	2,653,198	3,749,654	2,603,392	14,262,731
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)						
6 Public support. Subtract line 5 from line 4.						14,262,731

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	2,227,214	3,029,273	2,653,198	3,749,654	2,603,392	14,262,731
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		50	34	1,004	22,892	23,980
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.)			1,084	101,441	200	102,725
11 Total support. Add lines 7 through 10						14,389,436
12 Gross receipts from related activities, etc. (see instructions)					12	3,064,530

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

14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))	14	99.12 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	96.95 %
16a 33 1/3% support test — 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ☒		
b 33 1/3% support test — 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ☐		
17a 10%-facts-and-circumstances test — 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐		
b 10%-facts-and-circumstances test — 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests — 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests — 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
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.		Yes	No
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

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

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

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

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

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

Section D – Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Part VI

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

PART II, LINE 10 - OTHER INCOME DETAIL

OTHER INCOME

\$102,525

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

MIZELL CENTER

Employer identification number

95-3464835

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

Part II Conservation Easements

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).	
☐ Preservation of land for public use (for example, recreation or education)	☐ Preservation of a historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	☐ Yes ☐ No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	☐ Yes ☐ No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.	
(i) Revenue included on Form 990, Part VIII, line 1	\$
(ii) Assets included in Form 990, Part X	\$ 19,050
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.	
a Revenue included on Form 990, Part VIII, line 1	\$
b Assets included in Form 990, Part X	\$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

- a** ☒ Public exhibition **d** ☐ Loan or exchange program
b ☐ Scholarly research **e** ☐ Other
c ☒ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

- c** Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,128,083	1,092,996	1,268,224	1,108,235	1,185,985
b Contributions	14,803				
c Net investment earnings, gains, and losses	81,935	50,860	-160,110	190,251	-12,366
d Grants or scholarships					
e Other expenditures for facilities and programs	1,749	4,739	3,057	19,570	56,090
f Administrative expenses	10,320	11,034	12,061	10,692	9,294
g End of year balance	1,212,752	1,128,083	1,092,996	1,268,224	1,108,235

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

- a** Board designated or quasi-endowment 98.00 %
b Permanent endowment %
c Term endowment 2.00 %

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

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

- (i) Unrelated organizations?
(ii) Related organizations?

	Yes	No
3a(i)		X
3a(ii)	X	
3b	X	

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		947,043	32,895	914,148
d Equipment		189,909	41,139	148,770
e Other		2,352,345	2,125,124	227,221
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				1,290,139

Part VII Investments – Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments – Program Related

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

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

Part IX Other Assets

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

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

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO ENDOWMENT	109,096
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	109,096

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	3,431,816
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	104,832
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	72,850
e	Add lines 2a through 2d	2e	177,682
3	Subtract line 2e from line 1	3	3,254,134
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	3,254,134

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

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

1	Total expenses and losses per audited financial statements	1	3,743,744
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	72,850
e	Add lines 2a through 2d	2e	72,850
3	Subtract line 2e from line 1	3	3,670,894
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	3,670,894

Part XIII Supplemental Information

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

PART III, LINE 4 - COLLECTIONS AND RELATION TO EXEMPT PURPOSE

ARTWORK DONATED TO THE CENTER AND CONSIDERED INEXHAUSTIBLE IS RECORDED AT THE ESTIMATED FAIR MARKET VALUE AT THE DATE OF DONATION. THE CENTER'S COLLECTION INCLUDES PAINTINGS, SCULPTURES AND SIMILAR ART OBJECTS DISPLAYED ON THE PREMISES FOR THE ENJOYMENT OF THE MEMBERS.

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

THE MIZELL SENIOR CENTER ENDOWMENT FUNDS PROVIDES FUNDS THAT HELP FURTHER THE SERVICES AND PROGRAMS THAT THE MIZELL SENIOR CENTER OFFERS.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER

FUNDRAISING EXPENSES IN REVENUE \$ 72,850

Part XIII Supplemental Information *(continued)***PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER****FUNDRAISING EXPENSES IN REVENUE** \$ **72,850**

SCHEDULE G
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

MIZELL CENTER

Employer identification number

95-3464835

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

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

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

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

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

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

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>MAKING MAGIC WI</u> (event type)	<u>OTHER EVENT</u> (event type)	<u>NONE</u> (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	173,556	21,168		194,724
	2 Less: Contributions ..	118,300	21,168		139,468
	3 Gross income (line 1 minus line 2)	55,256			55,256
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	28,068			28,068
	6 Rent/facility costs	31,422			31,422
	7 Food and beverages ..				
	8 Entertainment				
	9 Other direct expenses ..	5,782	7,578		13,360
	10 Direct expense summary. Add lines 4 through 9 in column (d)				72,850
	11 Net income summary. Subtract line 10 from line 3, column (d)				-17,594

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses ..				
	6 Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain:

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

b If "Yes," explain:

- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name

Address

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____
- c** If "Yes," enter name and address of the third party: _____

Name

Address

- 16** Gaming manager information:

Name

Gaming manager compensation \$

Description of services provided _____

☐ Director/officer ☐ Employee ☐ Independent contractor

- 17** Mandatory distributions:
- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Noncash Contributions

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open To Public
Inspection**

MIZELL CENTER

Employer identification number

95-3464835

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded				
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()	X	2	104,936	
26 Other ()				
27 Other ()				
28 Other ()				

29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement	29
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	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2023

Part II

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

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

MIZELL CENTER

Employer identification number

95-3464835

FORM 990, PART III, LINE 3

**BOTH CASE MANAGEMENT AND DHS MANAGEMENT SERVICES WERE TERMINATED AT THE END
OF THE FISCAL YEAR.**

FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT

**MIZELL SENIOR CENTER IS AN ACKNOWLEDGED LEADER IN ACTIVE AGING. OUR MULTI-
FACED NETWORK OF PROGRAMS AND SERVICES FOR SENIORS ARE DESIGNED TO
ENCOURAGE CREATIVITY, PROMOTE LIFELONG LEARNING AND SUSTAIN AN ACTIVE AND
ENGAGED LIFESTYLE. MOST IMPORTANTLY, MIZELL'S WELCOMING SPACE OFFERS
COMMUNITY AND KINSHIP FOR SENIORS FROM DIVERSE BACKGROUNDS AND LIFE
EXPERIENCES. ACTIVITIES INCLUDE DAILY LUNCH SERVICE IN THE CENTER'S DINING
ROOM TO THE COMPUTER LAB, ART CLASSES AND WEEKLY JAM SESSIONS. A PORTION OF
OUR WEEKLY SCHEDULE IS DEVOTED TO A BROAD SPECTRUM OF WELLNESS PROGRAMS,
INCLUDING FITNESS CLASSES, A VARIETY OF SUPPORT GROUPS, ENTITLEMENT AND
BENEFITS ASSESSMENTS, LECTURES, MEDICAL SCREENINGS AND OUR PIONEERING FALL
PREVENTION PROGRAM, A MATTER OF BALANCE. ALL OF OUR ON-SITE ACTIVITIES ARE
A VITAL RESOURCE FOR ACTIVELY AGING SENIORS.**

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

**FORM 990 IS PROVIDED TO THE EXECUTIVE DIRECTOR AND THE TREASURER FOR
REVIEW.**

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

EXECUTIVE DIRECTOR COMPENSATION IS DETERMINED ANNUALLY DURING THE

BUDGETING PROCESS. THE FINANCE COMMITTEE MEETS TO DISCUSS WHAT THE

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

Name of the organization

Employer identification number

MIZELL CENTER

95-3464835

EXECUTIVE DIRECTOR SHOULD BE PAID IN THE FOLLOWING YEAR BASED ON A VARIETY OF FACTORS, INCLUDING FINANCIAL PERFORMANCE AND WHAT SIMILARLY POSITIONED EXECUTIVE DIRECTORS ARE PAID AT OTHER NONPROFIT ORGANIZATIONS. THE FINANCE COMMITTEE RECOMMENDS THEIR AMOUNT TO THE EXECUTIVE COMMITTEE, WHO THEN VOTES ON IT.

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

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

FUNDRAISING EXPENSES IN REVENUE	\$	72,850
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FUNDRAISING EXPENSES IN REVENUE	\$	-72,850
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Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

2023

Attachment
Sequence No. 179Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

Identifying number

MIZELL CENTER

95-3464835

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

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

1	Maximum amount (see instructions)	1	1,160,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,890,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	93,455

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2023	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

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

Section C—Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	93,455
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2023)

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:									
1	40 Bridge Tables	4/01/91	3,065			3,065	5 MO200DB	3,065	0
2	10 Folding Tables	4/01/91	389			389	5 MO200DB	389	0
3	20 Folding Tables	4/01/91	905			905	5 MO200DB	905	0
4	4 High Back Chairs	4/01/91	576			576	5 MO200DB	576	0
5	8 Secretarial Chairs	4/01/91	961			961	5 MO200DB	961	0
6	Projection Screen	7/31/92	607			607	5 MO200DB	607	0
7	Office Desks	10/31/95	1,711			1,711	5 MO200DB	1,711	0
8	Bldg Improvements	1/01/92	63,192			63,192	15 MO S/L	63,192	0
9	Cabinets	8/31/92	2,700			2,700	5 MO200DB	2,700	0
10	Cashier Booth	6/30/95	2,850			2,850	15 MO S/L	2,850	0
11	Building Lighting	1/31/96	664			664	5 MO200DB	664	0
12	West Patio	10/31/92	30,076			30,076	15 MO S/L	30,076	0
13	Electronic Sign	3/15/94	27,005			27,005	7 MO200DB	27,005	0
14	Steve's Office Binding Ma	10/31/96	538			538	5 MO200DB	538	0
15	132 Chairs from PS City	9/30/96	1,991			1,991	5 MO200DB	1,991	0
16	Flag Equipment	1/01/99	321			321	3 MO200DB	321	0
17	Brochure Racks	3/31/99	2,930			2,930	7 MO200DB	2,930	0
18	Covered Patio	8/01/98	1,160			1,160	7 MO200DB	1,160	0
19	Building Improvements	9/30/98	813			813	7 MO200DB	813	0
20	Business Brochure Racks	9/30/98	2,830			2,830	7 MO200DB	2,830	0
21	CDBG Equipment	6/30/99	9,673			9,673	5 MO200DB	9,673	0
22	Reception Area Desk	2/01/00	20,140			20,140	15 MO S/L	20,140	0
23	Piano - Donated Grace Jac	6/01/00	3,500			3,500	7 MO200DB	3,500	0
24	Emergency Lights	4/30/01	3,245			3,245	7 MO200DB	3,245	0
25	Carmichael Brochure Racks	6/30/01	1,105			1,105	5 MO200DB	1,105	0
26	New Wall in Building	6/30/01	10,560			10,560	15 MO S/L	10,560	0
27	Operable Wall - AW Corp	10/22/01	10,525			10,525	10 MO S/L	10,525	0
28	Digital Thermostats	7/18/01	2,070			2,070	7 MO S/L	2,070	0
29	RPM Floor Machine	10/15/01	989			989	5 MO S/L	989	0
30	Wireless System	10/16/02	746			746	5 MO S/L	746	0
31	Kitchen Freezer	3/25/03	1,379			1,379	5 MO S/L	1,379	0
32	Bingo Machine	6/16/03	5,387			5,387	7 MO S/L	5,387	0
33	Roofing Project - CDBG	5/04/05	44,619			44,619	15 MO S/L	44,619	0
34	Roofing Project - Interac	5/04/05	1,480			1,480	15 MO S/L	1,480	0
35	Everest Freezer - Paoli	8/26/04	1,735			1,735	5 MO S/L	1,735	0
36	Everest Refrig - Paoli	8/26/04	1,993			1,993	5 MO S/L	1,993	0
37	Electric Lighting - CDBG	6/30/06	16,877			16,877	15 MO S/L	16,877	0
38	AC System/Polar Barr CDBG	3/31/07	74,709			74,709	10 MO S/L	74,709	0
39	Ansul R-102 Fire System/K	11/14/07	2,688			2,688	7 MO S/L	2,688	0
40	Front Display Led Sign	12/30/08	19,767			19,767	15 MO S/L	19,111	656
41	Display Sign	4/22/09	2,264			2,264	7 MO S/L	2,264	0
42	Restroom improvements	10/15/09	1,300			1,300	15 MO S/L	1,195	87
43	display sign	7/29/09	2,264			2,264	7 MO S/L	2,264	0
44	Building	3/01/90	1,415,590			1,415,590	31 MO S/L	1,415,590	0
45	2011 Ford Escape Hybrid	3/15/11	33,808			33,808	5 MO S/L	33,808	0
Mass Sale: 6/30/24									
46	PROJECTION SCREEN - MOUNT	9/30/11	4,877			4,877	7 MO S/L	4,877	0
47	DISHWASHER	11/28/11	4,660			4,660	7 MO S/L	4,660	0
48	REFRIGERATOR	11/28/11	1,790			1,790	7 MO S/L	1,790	0
49	DISH TABLES	11/28/11	819			819	7 MO S/L	819	0
50	COMPUTER LAB	9/30/11	5,223			5,223	5 MO S/L	5,223	0
51	COMPUTER LAB	11/01/11	12,732			12,732	5 MO S/L	12,732	0
52	BUILDING ROOF	6/01/12	87,120			87,120	31 MO S/L	30,871	2,810
53	WALK IN REFRIG SYSTEM	2/05/13	37,928			37,928	15 MO S/L	25,843	2,529
54	AUTOMATIC FRONT DOOR	6/30/13	14,001			14,001	15 MO S/L	9,331	933
55	15 COMPUTERS	5/31/13	25,608			25,608	5 MO S/L	25,608	0
56	2013 FORD 0828	5/23/13	24,707			24,707	7 MO S/L	24,707	0
60	Vinyl Flooring	6/15/15	7,241			7,241	10 MO S/L	5,840	724
61	Convection Oven/Range	6/26/15	15,991			15,991	7 MO S/L	15,991	0
63	2015 NV200 Cargo Van	11/23/15	21,288			21,288	7 MO S/L	21,288	0
Mass Sale: 6/30/24									
64	Cat 5 Fiber Cable	11/19/15	6,054			6,054	15 MO S/L	3,062	404
65	Internal TV & Progaming	3/03/16	4,944			4,944	7 MO S/L	4,944	0
66	HD Security Cameras	1/31/16	4,026			4,026	7 MO S/L	4,026	0
67	carpet	3/22/17	12,396			12,396	10 MO S/L	7,749	1,240
68	drapery	4/19/17	4,695			4,695	10 MO S/L	2,897	470
69	2018 Kia Soul	10/24/17	17,850			17,850	7 MO S/L	13,450	2,550
70	Computer Server	3/30/18	11,595			11,595	5 MO S/L	11,175	420
71	Carpet	1/17/18	6,542			6,542	10 MO S/L	3,543	655
72	ABA Roof	6/12/19	73,200			73,200	15 MO S/L	18,927	4,810

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Basis for Depr	PerConv Meth	Prior	Current
73	2017 GMC Savana 2500	7/19/19	20,000			20,000	7 MO S/L	9,690	2,857
74	2020 Nissan NV200	6/25/20	27,352			27,352	7 MO S/L	10,222	3,907
75	2020 Nissan NV1500	6/25/20	34,204			34,204	7 MO S/L	13,158	4,887
76	Bathroom Remodel	6/01/20	25,232			25,232	10 MO S/L	7,779	2,524
77	Additional ABA Roof	7/11/19	108			108	15 MO S/L	28	8
78	Bathroom remodel accessor	8/05/20	2,527			2,527	10 MO S/L	737	253
79	Plumbing, tile & drywall	9/15/20	2,699			2,699	10 MO S/L	765	270
80	Electronic sign	4/15/21	11,221			11,221	30 MO S/L	842	374
81	Electronic Sign	4/15/21	11,221			11,221	30 MO S/L	842	374
82	Air Scrubbers (Covid)	4/27/21	7,350			7,350	10 MO S/L	1,593	735
83	Ceiling tiles	6/02/21	3,582			3,582	7 MO S/L	1,066	512
84	Three-Section refrigerato	2/12/21	20,834			20,834	5 MO S/L	8,729	4,167
85	Banquet chairs	2/12/21	10,488			10,488	5 MO S/L	5,069	2,098
86	2021 Nissan NV200	6/16/21	9,594			9,594	7 MO S/L	2,741	1,371
91	Outdoor lighting	6/13/22	6,106			6,106	15 MO S/L	441	407
92	Audiovisual Equipment	2/28/22	11,819			11,819	7 MO S/L	2,251	1,689
93	2021 Nissan NV200 Minivan	5/09/22	13,481			13,481	7 MO S/L	2,247	1,926
95	Bathroom Water Heater	6/22/23	7,416			7,416	10 MO S/L	0	742
96	POS Terminal & Software	8/01/22	2,371			2,371	7 MO S/L	310	339
97	LVP Flooring - dining room	1/02/24	5,451			5,451	15 MO S/L	0	182
98	6X6 Tile - dining room	1/02/24	1,659			1,659	15 MO S/L	0	55
99	LVP Flooring - dining room	12/31/23	21,466			21,466	15 MO S/L	0	716
100	Kitchen Remodel	12/31/23	895,338			895,338	15 MO S/L	0	29,845
101	5 Phenolic overhead braced tiolet compartm	9/06/23	4,804			4,804	15 MO S/L	0	267
102	5 Phenolic overhear braced tiolet compartm	9/27/23	4,803			4,803	15 MO S/L	0	240
103	AC Carrier Model 48HJL005 Volt 208-230	8/04/23	18,921			18,921	7 MO S/L	0	2,478
104	Kitchen Equipment	11/08/23	124,445			124,445	7 MO S/L	0	11,852
105	COMPUTER CEO	1/10/24	917			917	5 MO S/L	0	92
Total Other Depreciation			<u>3,544,393</u>			<u>3,544,393</u>		<u>2,160,799</u>	<u>93,455</u>
Total ACRS and Other Depreciation			<u>3,544,393</u>			<u>3,544,393</u>		<u>2,160,799</u>	<u>93,455</u>
Grand Totals			3,544,393			3,544,393		2,160,799	93,455
Less: Dispositions and Transfers			55,096			55,096		55,096	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>3,489,297</u>			<u>3,489,297</u>		<u>2,105,703</u>	<u>93,455</u>

CA Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	CA Prior	CA Current	Federal Current	Difference Fed - CA
Other Depreciation:								
1	40 Bridge Tables	4/01/91	3,065	3,065	3,065	0	0	0
2	10 Folding Tables	4/01/91	389	389	389	0	0	0
3	20 Folding Tables	4/01/91	905	905	905	0	0	0
4	4 High Back Chairs	4/01/91	576	576	576	0	0	0
5	8 Secretarial Chairs	4/01/91	961	961	961	0	0	0
6	Projection Screen	7/31/92	607	607	607	0	0	0
7	Office Desks	10/31/95	1,711	1,711	1,711	0	0	0
8	Bldg Improvements	1/01/92	63,192	63,192	63,192	0	0	0
9	Cabinets	8/31/92	2,700	2,700	2,700	0	0	0
10	Cashier Booth	6/30/95	2,850	2,850	2,850	0	0	0
11	Building Lighting	1/31/96	664	664	664	0	0	0
12	West Patio	10/31/92	30,076	30,076	30,076	0	0	0
13	Electronic Sign	3/15/94	27,005	27,005	27,005	0	0	0
14	Steve's Office Binding Ma	10/31/96	538	538	538	0	0	0
15	132 Chairs from PS City	9/30/96	1,991	1,991	1,991	0	0	0
16	Flag Equipment	1/01/99	321	321	321	0	0	0
17	Brochure Racks	3/31/99	2,930	2,930	2,930	0	0	0
18	Covered Patio	8/01/98	1,160	1,160	1,160	0	0	0
19	Building Improvements	9/30/98	813	813	813	0	0	0
20	Business Brochure Racks	9/30/98	2,830	2,830	2,830	0	0	0
21	CDBG Equipment	6/30/99	9,673	9,673	9,673	0	0	0
22	Reception Area Desk	2/01/00	20,140	20,140	20,140	0	0	0
23	Piano - Donated Grace Jac	6/01/00	3,500	3,500	3,500	0	0	0
24	Emergency Lights	4/30/01	3,245	3,245	3,245	0	0	0
25	Carmichael Brochure Racks	6/30/01	1,105	1,105	1,105	0	0	0
26	New Wall in Building	6/30/01	10,560	10,560	10,560	0	0	0
27	Operable Wall - AW Corp	10/22/01	10,525	10,525	10,525	0	0	0
28	Digital Thermostats	7/18/01	2,070	2,070	2,070	0	0	0
29	RPM Floor Machine	10/15/01	989	989	989	0	0	0
30	Wireless System	10/16/02	746	746	746	0	0	0
31	Kitchen Freezer	3/25/03	1,379	1,379	1,379	0	0	0
32	Bingo Machine	6/16/03	5,387	5,387	5,387	0	0	0
33	Roofing Project - CDBG	5/04/05	44,619	44,619	44,619	0	0	0
34	Roofing Project - Interac	5/04/05	1,480	1,480	1,480	0	0	0
35	Everest Freezer - Paoli	8/26/04	1,735	1,735	1,735	0	0	0
36	Everest Refrig - Paoli	8/26/04	1,993	1,993	1,993	0	0	0
37	Electric Lighting - CDBG	6/30/06	16,877	16,877	16,877	0	0	0
38	AC System/Polar Barr CDBG	3/31/07	74,709	74,709	74,709	0	0	0
39	Ansul R-102 Fire System/K	11/14/07	2,688	2,688	2,688	0	0	0
40	Front Display Led Sign	12/30/08	19,767	19,767	19,111	656	656	0
41	Display Sign	4/22/09	2,264	2,264	2,264	0	0	0
42	Restroom improvements	10/15/09	1,300	1,300	1,195	87	87	0
43	display sign	7/29/09	2,264	2,264	2,264	0	0	0
44	Building	3/01/90	1,415,590	1,415,590	1,415,590	0	0	0
45	2011 Ford Escape Hybrid	3/15/11	33,808	33,808	33,808	0	0	0
Mass Sale: 6/30/24								
46	PROJECTION SCREEN - MOUNT	9/30/11	4,877	4,877	4,877	0	0	0
47	DISHWASHER	11/28/11	4,660	4,660	4,660	0	0	0
48	REFRIGERATOR	11/28/11	1,790	1,790	1,790	0	0	0
49	DISH TABLES	11/28/11	819	819	819	0	0	0
50	COMPUTER LAB	9/30/11	5,223	5,223	5,223	0	0	0
51	COMPUTER LAB	11/01/11	12,732	12,732	12,732	0	0	0
52	BUILDING ROOF	6/01/12	87,120	87,120	30,871	2,810	2,810	0
53	WALK IN REFRIG SYSTEM	2/05/13	37,928	37,928	25,843	2,529	2,529	0
54	AUTOMATIC FRONT DOOR	6/30/13	14,001	14,001	9,331	933	933	0
55	15 COMPUTERS	5/31/13	25,608	25,608	25,608	0	0	0
56	2013 FORD 0828	5/23/13	24,707	24,707	24,707	0	0	0
60	Vinyl Flooring	6/15/15	7,241	7,241	5,840	724	724	0
61	Convection Oven/Range	6/26/15	15,991	15,991	15,991	0	0	0
63	2015 NV200 Cargo Van	11/23/15	21,288	21,288	21,288	0	0	0
Mass Sale: 6/30/24								
64	Cat 5 Fiber Cable	11/19/15	6,054	6,054	3,062	404	404	0
65	Internal TV & Programming	3/03/16	4,944	4,944	4,944	0	0	0
66	HD Security Cameras	1/31/16	4,026	4,026	4,026	0	0	0
67	carpet	3/22/17	12,396	12,396	7,749	1,240	1,240	0
68	drapery	4/19/17	4,695	4,695	2,897	470	470	0
69	2018 Kia Soul	10/24/17	17,850	17,850	13,450	2,550	2,550	0
70	Computer Server	3/30/18	11,595	11,595	11,175	420	420	0
71	Carpet	1/17/18	6,542	6,542	3,543	655	655	0
72	ABA Roof	6/12/19	73,200	73,200	18,927	4,810	4,810	0

CA Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	CA Prior	CA Current	Federal Current	Difference Fed - CA
73	2017 GMC Savana 2500	7/19/19	20,000	20,000	9,690	2,857	2,857	0
74	2020 Nissan NV200	6/25/20	27,352	27,352	10,222	3,907	3,907	0
75	2020 Nissan NV1500	6/25/20	34,204	34,204	13,158	4,887	4,887	0
76	Bathroom Remodel	6/01/20	25,232	25,232	7,780	2,523	2,524	1
77	Additional ABA Roof	7/11/19	108	108	29	7	8	1
78	Bathroom remodel accessor	8/05/20	2,527	2,527	737	253	253	0
79	Plumbing, tile & drywall	9/15/20	2,699	2,699	765	270	270	0
80	Electronic sign	4/15/21	11,221	11,221	842	374	374	0
81	Electronic Sign	4/15/21	11,221	11,221	842	374	374	0
82	Air Scrubbers (Covid)	4/27/21	7,350	7,350	1,593	735	735	0
83	Ceiling tiles	6/02/21	3,582	3,582	1,066	512	512	0
84	Three-Section refrigerato	2/12/21	20,834	20,834	8,729	4,167	4,167	0
85	Banquet chairs	2/12/21	10,488	10,488	5,069	2,098	2,098	0
86	2021 Nissan NV200	6/16/21	9,594	9,594	2,741	1,371	1,371	0
91	Outdoor lighting	6/13/22	6,106	6,106	441	407	407	0
92	Audiovisual Equipment	2/28/22	11,819	11,819	2,251	1,689	1,689	0
93	2021 Nissan NV200 Minivan	5/09/22	13,481	13,481	2,247	1,926	1,926	0
95	Bathroom Water Heater	6/22/23	7,416	7,416	0	742	742	0
96	POS Terminal & Software	8/01/22	2,371	2,371	310	339	339	0
97	LVP Flooring - dining room	1/02/24	5,451	5,451	0	182	182	0
98	6X6 Tile - dining room	1/02/24	1,659	1,659	0	55	55	0
99	LVP Flooring - dining room	12/31/23	21,466	21,466	0	716	716	0
100	Kitchen Remodel	12/31/23	895,338	895,338	0	29,845	29,845	0
101	5 Phenolic overhead braced tiolet compartm	9/06/23	4,804	4,804	0	267	267	0
102	5 Phenolic overhear braced tiolet compartm	9/27/23	4,803	4,803	0	240	240	0
103	AC Carrier Model 48HJL005 Volt 208-230	8/04/23	18,921	18,921	0	2,478	2,478	0
104	Kitchen Equipment	11/08/23	124,445	124,445	0	11,852	11,852	0
105	COMPUTER CEO	1/10/24	917	917	0	92	92	0
Total Other Depreciation			<u>3,544,393</u>	<u>3,544,393</u>	<u>2,160,801</u>	<u>93,453</u>	<u>93,455</u>	<u>2</u>
Total ACRS and Other Depreciation			<u><u>3,544,393</u></u>	<u><u>3,544,393</u></u>	<u><u>2,160,801</u></u>	<u><u>93,453</u></u>	<u><u>93,455</u></u>	<u><u>2</u></u>
Grand Totals			3,544,393	3,544,393	2,160,801	93,453	93,455	2
Less: Dispositions			55,096	55,096	55,096	0	0	0
Less: Start-up/Org Expense			<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Net Grand Totals			<u><u>3,489,297</u></u>	<u><u>3,489,297</u></u>	<u><u>2,105,705</u></u>	<u><u>93,453</u></u>	<u><u>93,455</u></u>	<u><u>2</u></u>

Form 990		Two Year Comparison Report		2022 & 2023	
		For calendar year 2023, or tax year beginning 07/01/23 , ending 06/30/24			
Name MIZELL CENTER				Taxpayer Identification Number 95-3464835	
Revenue			2022	2023	Differences
	1. Contributions, gifts, grants	1.	1,640,383	621,166	-1,019,217
	2. Membership dues and assessments	2.	90,749	81,104	-9,645
	3. Government contributions and grants	3.	1,918,670	1,796,290	-122,380
	4. Program service revenue	4.	485,368	332,102	-153,266
	5. Investment income	5.	1,004	22,892	21,888
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.	2,000		-2,000
	8. Net income or (loss) from fundraising events	8.	-44,447	-17,594	26,853
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.	58,527	64,659	6,132
	11. Other revenue	11.	387,285	353,515	-33,770
12. Total revenue. Add lines 1 through 11	12.	4,539,539	3,254,134	-1,285,405	
Expenses	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15.	231,548	231,000	-548
	16. Salaries, other compensation, and employee benefits	16.	1,810,188	1,866,727	56,539
	17. Professional fundraising fees	17.			
	18. Other professional fees	18.	30,713	26,240	-4,473
	19. Occupancy, rent, utilities, and maintenance	19.	246,035	230,788	-15,247
	20. Depreciation and Depletion	20.	97,426	93,517	-3,909
	21. Other expenses	21.	1,515,800	1,222,622	-293,178
	22. Total expenses. Add lines 13 through 21	22.	3,931,710	3,670,894	-260,816
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	607,829	-416,760	-1,024,589
Other Information	24. Total exempt revenue	24.	4,539,539	3,254,134	-1,285,405
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26.	934,184	773,168	-161,016
	27. Total assets	27.	2,291,183	2,104,934	-186,249
	28. Total liabilities	28.	151,613	277,292	125,679
	29. Retained earnings	29.	2,139,570	1,827,642	-311,928
	30. Number of voting members of governing body	30.	12	13	
	31. Number of independent voting members of governing body	31.	12	13	
32. Number of employees	32.	61	63		
33. Number of volunteers	33.	75	75		

Form 990	Tax Return History	2023
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Name MIZELL CENTER	Employer Identification Number 95-3464835
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	2019	2020	2021	2022	2023	2024
Contributions, gifts, grants		2,855,618	2,459,062	3,559,053	2,417,456	
Membership dues		81,710	102,136	90,749	81,104	
Program service revenue		509,683	409,138	485,368	332,102	
Capital gain or loss			8,161	2,000		
Investment income		50	34	1,004	22,892	
Fundraising revenue (income/loss)		-3,873	106,339	-44,447	-17,594	
Gaming revenue (income/loss)						
Other revenue		7,241	260,667	445,812	418,174	
Total revenue		3,450,429	3,345,537	4,539,539	3,254,134	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.		149,266	121,268	231,548	231,000	
Other compensation		1,270,052	1,656,150	1,810,188	1,866,727	
Professional fees		46,345	48,667	30,713	26,240	
Occupancy costs		137,647	156,397	246,035	230,788	
Depreciation and depletion		84,001	48,463	97,426	93,517	
Other expenses		1,088,963	1,068,827	1,515,800	1,222,622	
Total expenses		2,776,274	3,099,772	3,931,710	3,670,894	
Excess or (Deficit)		674,155	245,765	607,829	-416,760	
Total exempt revenue		3,450,429	3,345,537	4,539,539	3,254,134	
Total unrelated revenue						
Total excludable revenue		516,974	678,000	934,184	773,168	
Total Assets		1,260,101	1,592,043	2,291,183	2,104,934	
Total Liabilities		131,879	160,154	151,613	277,292	
Net Fund Balances		1,128,222	1,431,889	2,139,570	1,827,642	

Taxable Interest on Investments

Description						
	Amount	Unrelated Business	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
TAXABLE INTEREST	\$ 22,892			3		
TOTAL	\$ 22,892					

Federal Statements

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
PROFESSIONAL FEES	\$ 25,308	\$ 15,852	\$ 4,572	\$ 4,884
TOTAL	\$ 25,308	\$ 15,852	\$ 4,572	\$ 4,884

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
OTHER EXPENSES	\$ 41,050	\$ 27,507	\$ 9,023	\$ 4,520
TOTAL	\$ 41,050	\$ 27,507	\$ 9,023	\$ 4,520

Schedule A, Part II, Line 1(e)

Description	Amount
MEMBERSHIP DUES - BUSINESS	\$ 31,379
MEMBERSHIP DUES - INDIVIDUALS	49,725
GOVERNMENT GRANTS	1,591,458
GENERAL CONTRIBUTIONS	104
OTHER GRANTS	
BIGHORN GOLF CLUB CHARITIES	
CASH CONTRIBUTION	8,000
CITY OF PALM SPRINGS	
CASH CONTRIBUTION	100,000
OFFICE RENT	104,832
CONTOUR DERMATOLOGY	
CASH CONTRIBUTION	10,600
DESERT OASIS HEALTHCARE	
CASH CONTRIBUTION	57,000
EISENHOWER HEALTH/ EISENHOWER MEDICA	
CASH CONTRIBUTION	7,500
FOUNDATION FOR HUMAN ENRICHMENT	
CASH CONTRIBUTION	21,000
GRACE HELEN SPEARMAN CHARITABLE FOUN	
CASH CONTRIBUTION	1,095
JEWISH FEDERATION OF THE DESERT	
CASH CONTRIBUTION	15,000
MR. GARY MILLER	
CASH CONTRIBUTION	10,500
MR. TIM HOHMEIER	
CASH CONTRIBUTION	5,810
MRS. CAROL FRAGEN	
CASH CONTRIBUTION	70,000
MS. CYNTHIA KENNAN WILLIAMS	
CASH CONTRIBUTION	5,000
MS. MARY MIX LIVINGSTON	
CASH CONTRIBUTION	13,350
PALM SPRINGS BOARD OF REALTORS	
CASH CONTRIBUTION	19,250
PALM SPRINGS DISPOSAL SERVICES	
CASH CONTRIBUTION	21,550
PALM SPRINGS GAY MEN'S CHORUS	
CASH CONTRIBUTION	8,100
PALM SPRINGS MARATHON RUNNERS	
CASH CONTRIBUTION	15,000

Schedule A, Part II, Line 1(e) (continued)

Description	Amount
THE CHAMPIONS VOLUNTEER FOUNDATION CASH CONTRIBUTION	\$ 5,000
THE COETA AND DONALD BARKER FOUNDA CASH CONTRIBUTION	10,000
THE DAVID AARON ROOT LIVING TRUST CASH CONTRIBUTION	5,200
ART LABOE FOUNDATION CASH CONTRIBUTION	5,000
GLOBAL TRUTH CENTER CASH CONTRIBUTION	6,950
MR. JAMES MCKENNA CASH CONTRIBUTION	8,100
MR. RICHARD M CAIN CASH CONTRIBUTION	7,054
MS. CAROL KEMP CASH CONTRIBUTION	38,829
MS. JUANITA MILLER CASH CONTRIBUTION	10,000
MS. KATHY BLOCK CASH CONTRIBUTION	6,706
PNC BANK CASH CONTRIBUTION	10,000
RICHMOND ERNET AIDS FOUNDATION CASH CONTRIBUTION	20,000
ANONYMOUS CASH CONTRIBUTION	60,000
MAKING MAGIC WITH MIZELL CASH CONTRIBUTION	118,300
OTHER EVENT CASH CONTRIBUTION	21,168
TOTAL	\$ <u>2,498,560</u>

Schedule A, Part II, Line 5 - Excess Gifts

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
BANK OF AMERICA CHARITABLE FOUNDATIO	\$ 10,000	\$
BIGHORN GOLF CLUB CHARITIES	16,000	
CITY OF INDIO	7,872	
CONTOUR DERMATOLOGY	25,700	
DESERT CARE NETWORK/ DESERT REGIONAL	25,000	
DESERT OASIS HEALTHCARE	129,480	
EISENHOWER HEALTH/ EISENHOWER MEDICA	18,500	
EVANS FAMILY FOUNDATION	60,000	
FOUNDATION FOR HUMAN ENRICHMENT	36,000	
GRACE HELEN SPEARMAN CHARITABLE FOUN	45,400	
H.N. AND FRANCES C BERGER FOUNDATION	50,000	
JEROME AND ANASTASIA ANGEL CHARITABL	200,000	
JEWISH FEDERATION OF THE DESERT	30,000	
MR. AND MRS. WIL STILES	5,700	
MR. BOB ILES	6,500	
MR. BRIAN WACHS	6,150	
MR. DAVID STEWART	24,290	
MR. GARY MILLER	21,000	
MR. JOHN AAROE	7,850	
MR. MICHAEL MELANCON	5,160	
MR. TIM HOHMEIER	14,370	
MRS. CAROL FRAGEN	131,505	
MS. BOBBI LAMPROS	5,325	
MS. CYNTHIA KENNAN WILLIAMS	34,000	
MS. DOROTHY MEYERMAN	100,000	
MS. MARY MIX LIVINGSTON	26,210	
NONPROFITS INSURANCE ALLIANCE OF CA	5,004	
PALM SPRINGS BOARD OF REALTORS	26,250	
PALM SPRINGS DISPOSAL SERVICES	41,950	
PALM SPRINGS GAY MEN'S CHORUS	14,700	
PALM SPRINGS MARATHON RUNNERS	30,000	
SCAN HEALTH PLAN	15,250	
THE CHAMPIONS VOLUNTEER FOUNDATION	11,000	
THE COETA AND DONALD BARKER FOUNDA	35,000	
THE DAVID AARON ROOT LIVING TRUST	114,462	
THE HOUSTON FAMILY FOUNDATION	50,000	
DESERT HEALTHCARE DISTRICT	184,810	
ART LABOE FOUNDATION	5,000	
GLOBAL TRUTH CENTER	6,950	
MR. JAMES MCKENNA	8,100	
MR. RICHARD M CAIN	7,054	
MS. CAROL KEMP	38,829	
MS. JUANITA MILLER	10,000	
MS. KATHY BLOCK	6,706	
PNC BANK	10,000	
RICHMOND ERNET AIDS FOUNDATION	20,000	
ANONYMOUS	60,000	
TOTAL	\$ <u>1,743,077</u>	\$ <u>0</u>

Federal Statements

Schedule A, Part II, Line 8(e)

Description	Amount
TAXABLE INTEREST	\$ 22,892
TOTAL	\$ 22,892

Schedule A, Part II, Line 10(e)

Description	Amount
MISCELLANEOUS INCOME	\$ 200
TOTAL	\$ 200

Schedule A, Part II, Line 12 - Current year

Description	Amount
MEALS ON WHEELS	\$ 142,607
NUTRITION/CONGREGATE	63,117
VARIOUS PROGRAMS/CLASSES	126,378
THRIFT STORE	64,659
MAKING MAGIC WITH MIZELL	55,256
MANAGEMENT CONTRACT	262,931
OTHER EVENT	
RENT 1	90,384
TOTAL	\$ 805,332

MAKING MAGIC WITH MIZELL

Other Direct Fundraising or Gaming Expenses

Description	Amount
PHOTOGRAPHY	\$ 750
AUCTION PACKAGES	2,390
DESIGN & PRINT	2,642
TOTAL	\$ 5,782

OTHER EVENT

Other Direct Fundraising or Gaming Expenses

Description	Amount
EVENT EXPENSES	\$ 7,578
TOTAL	\$ 7,578