FINANCIAL STATEMENTS

FOR THE YEAR ENDED DECEMBER 31, 2023

Ketcham & Associates Accounting | Tax | Business Consulting Ketcham & Tupper Certified Public Accountants

FOR THE YEAR ENDED DECEMBER 31, 2023

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Ketcham & Associates

Accounting Tax Business Consulting

Ketcham & Tupper

Certified Public Accountants

Ketcham & Associates, LLC Certified Public Accounting 202 Mountain Ave. P.O. Box 2610 Westfield, NJ 07091

Independent Accountant's Review Report

Board of Directors of New Alternatives for LGBT Homeless Youth New York, NY

We have reviewed the accompanying financial statements of New Alternatives for LGBT Homeless Youth (a nonprofit organization), which comprise the statements of financial position as of December 31, 2023 and 2022, and the related statements of activities and changes in net assets, cash flows, and functional expenses for the years then ended, and the related notes to the financial statements. A review includes primarily applying analytical procedures to management's financial data and making inquiries of company management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole. Accordingly, we do not express such an opinion.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Accountants' Responsibility

Our responsibility is to conduct the review engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. Those standards require us to perform procedures to obtain limited assurance as a basis for reporting whether we are aware of any material modifications that should be made to the financial statements for them to be in accordance with accounting principles generally accepted in the United States of America. We believe that the results of our procedures provide a reasonable basis for our conclusion. We are required to be independent of New Alternatives for LGBT Homeless Youth and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our review.

Accountants' Conclusion

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in accordance with accounting principles generally accepted in the United States of America.

Ketcham & Associates, LLC

August 1, 2024

STATEMENT OF FINANCIAL POSITION

FOR THE YEAR ENDED DECEMBER 31, 2023 with comparative results for 2022

ASSETS

	<u>2023</u>	<u>2022</u>
Current Assets		
Cash and cash equivalents	855,128	797,195
Prepaid expense	2,000	-
Security deposit	2,000	-
Total Current Assets	859,128	797,195
Territoria		
<u>Equipment</u>	7 201	7 201
Cost	7,301	7,301
Accumulated depreciation	(7,301)	(7,301)
Total Equipment		
Total Assets	859,128	797,195
LIABILITIES AND NET ASSET	<u></u>	
Current Liabilities		
Accounts payable	5,932	5,250
Total Current Liabilities	5,932	5,250
Total Liabilities	5,932	5,250
Total Liabilities	0,932	5,250
Net Assets		
Without donor restrictions	853,196	743,050
With donor restrictions	-	48,895
Total Net Assets	853,196	791,945

859,128

Total Liabilities and Net Assets

797,195

STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS

FOR THE YEAR ENDED DECEMBER 31, 2023 with comparative results for 2022

	Without <u>Donor Restrictions</u>	Purpose <u>Restricted</u>	<u>2023</u>	<u>2022</u>
Public Support and Revenues	Donor Restretions	<u>Restited</u>	2025	2022
Public Support:				
Contributions	398,931	-	398,931	525,305
Total Public Support	398,931	-	398,931	525,305
Revenues:				
Interest income	9,823	-	9,823	232
Program income	33,025	-	33,025	22,512
Total Revenues	42,848		42,848	22,743
Net assets release from restrictions	48,895	(48,895)		
Total Public Support and Revenues	490,674	(48,895)	441,779	548,048
Expenses				
Program services	239,915	-	239,915	328,764
Management and general	109,783	-	109,783	100,544
Fundraising	30,831	-	30,831	46,784
Total Expenses	380,529	-	380,529	476,091
Change in Net Assets	110,146	(48,895)	61,251	71,957
Net Assets, Beginning of year	743,050	48,895	791,945	719,989
Net Assets, End of year	853,196		853,196	791,945

STATEMENT OF CHANGES IN CASH

FOR THE YEAR ENDED

DECEMBER 31, 2023

with comparative results for 2022

	<u>2023</u>	<u>2022</u>
CASH FLOWS FROM OPERATING ACTIVITIES:		
Change in Net Assets	61,251	71,957
Adjustments to reconcile change in net assets		
from operations to net cash provided (used) by		
operating activities:		
Depreciation	-	-
(Increase) decrease in prepaid expense	(2,000)	-
(Increase) decrease in security deposit	(2,000)	-
Increase (decrease) in accounts payable	682	500
Net cash provided (used) by operating activities	57,933	72,457
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of equipment	-	-
Net cash provided (used) by financing activites		-
NET CHANGE IN CASH	57,933	72,457
CASH, BEGINNING OF YEAR	797,195	724,739
CASH, END OF YEAR	855,128	797,195
Supplementary information: Interest income taxes	<u> </u>	<u> </u>

STATEMENT OF FUNCTIONAL EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 2023 with comparative results for 2022

	Management						
	Programs	<u>& general</u>	Fundraising	<u>2023</u>	<u>2022</u>		
Payroll	129,775	40,517	20,259	190,552	269,475		
Payroll taxes	8,025	2,293	1,146	11,464	18,620		
Payroll processing fees	-	1,908	-	1,908	2,042		
Bank charges	-	1,044	-	1,044	361		
Client needs and progam expense	51,628	-	-	51,628	57,305		
Commissions and fees	5,880	-	-	5,880	8,490		
Depreciation	-	-	-	-	-		
Employee benefits	14,507	3,627	-	18,134	16,794		
Insurance	-	11,523	-	11,523	10,262		
Occupancy	17,938	6,268	3,134	27,340	25,754		
Office expense	-	8,385	-	8,385	6,251		
Professional fees	-	29,599	-	29,599	6,771		
Promotional and advertising	-	-	6,292	6,292	14,932		
Security	12,036	-	-	12,036	4,671		
Taxes, dues, licenses and fees	-	125	-	125	2,432		
Telephone	-	4,494	-	4,494	5,363		
Travel	126			126	26,570		
	239,915	109,783	30,831	380,529	476,091		

NOTES TO FINANCIAL STATEMENTS

FOR THE YEAR ENDED DECEMBER 31, 2023 with comparative results for 2022

Note 1 - Nature of Activities

New Alternatives for LGBT Homeless Youth, Inc. (the Organization) is a non-profit organization devoted to increasing the self-sufficiency of homeless LGBT youth to enable them to "go beyond" the shelter system and transition into stable adult lives. This is achieved by providing services such as case management, education services, life skills training, community-building recreational activities, opportunities for self-expression, and support services for HIV+ youth. The Organization's guiding principles are those of harm reduction, youth development, and empowerment.

Note 2 - Summary of Significant Accounting Policies

These financial statements, which are presented on the accrual basis of accounting in accordance with U.S. GAAP, have been prepared to focus on the Organization as a whole and to present balances and transactions according to the existence or absence of donor imposed restrictions.

Net assets and changes therein are classified as follows:

Net assets without donor restrictions – Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Organization. The Organization's board may designate assets without restrictions for specific operational purposes from time to time.

Net assets with donor restrictions – Net assets subject to donor imposed stipulations that will be met by actions of the Organization and/or the passage of time. When a donor-stipulated time restriction ends or a purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions. Net assets with donor restrictions also include endowments and other funds subject to donor-imposed stipulations requiring that they be maintained permanently by the Organization. The income from these assets is available for either general operations or specific programs as specified by the donor.

Revenue is reported as increases in net assets without donor restrictions unless use of the related assets is limited by donor imposed restrictions. Expenses are reported as decreases in net assets without donor restrictions. Gains and losses on investments and other assets or liabilities are reported as increases or decreases in net assets without donor restrictions unless their use is restricted by explicit donor stipulation or by law. Expirations of donor restrictions on net assets (i.e., the donor stipulated purpose has been fulfilled and/or the stipulated time period has elapsed) are reported as reclassifications between the classes of net assets. Contributions, including unconditional promises to give, are recognized as revenue in the period received. Conditional promises to give are not recognized until they become unconditional, that is, when the conditions on which they depend are substantially met. Contributions to be received after one year are discounted at an appropriate discount rate commensurate with the risks involved. Amortization of the discount is recorded as additional contribution revenue in accordance with donor imposed restrictions, if any, on the contributions.

Contributions of gifts in-kind, including investment securities, are recorded as revenue at their estimated fair value in the period received. Contributions are recorded as support without donor restrictions unless the donor has stipulated the period the asset is to be used, in which case, the contribution is recorded as support with donor restrictions.

- a. Cash and Cash Equivalents Cash and cash equivalents consist of funds in checking accounts and money market demand accounts with an original maturity of three months or less. These accounts are at financial institutions that are Federal Deposit Insurance Corporation insured up to \$250,000. The Organization may draw on these deposits and funds at any time.
- b. Investments Investments in marketable securities are classified as available for sale and are carried at fair market value. The cost of securities sold is based on specific identification. The Organization may temporarily hold cash and cash equivalents for investing purposes and treats these amounts as investments based on the Organization's policy.
- c. Fair Value of Financial Instruments The Organization follows Financial Accounting Standards Board guidance on Fair Value Measurements which defines fair value and establishes a fair value hierarchy organized into three levels based upon the input assumptions used in pricing assets. Level 1 inputs have the highest reliability and are related to assets with unadjusted quoted prices in active markets. Level 2 inputs relate to assets with other than quoted prices in active markets which may include quoted prices for similar assets or other inputs which can be corroborated by observable market data. Level 3 inputs are unobservable inputs and are used to the extent that observable inputs do not exist.
- d. Functional Expense Allocation The allocation between program and support expenses is based on the assignment of payroll, related personnel costs, occupancy, and other office expenses using estimates of time spent on program versus fundraising or administrative activities, as well as direct assignment of certain expenses to relevant activities.
- e. Use of Estimates Management of the Organization has made a number of estimates and assumptions relating to the reporting of assets and liabilities and the disclosure of contingent assets and liabilities to prepare these financial statements in conformity with U.S. GAAP. Actual results could differ from those estimates.
- f. Tax-Exempt Status The Organization has been recognized by the IRS as an organization that is taxexempt under Section 501(c)(3) of the Internal Revenue Code and has been recognized by the State of New Jersey as an organization that is tax-exempt and is not generally subject to state or federal taxes on income. In addition, the IRS has determined that the Organization is a public charitable organization as defined in Sections 509(a)(1) and 170(b)(1)(A)(vi) of the Internal Revenue Code, and thus, the Organization is exempt from the excise tax on investment income.

g. Uncertainty in Income Taxes - The Organization is subject to income taxes in the United States and the State of New Jersey on unrelated business income. The Organization has identified and evaluated its significant tax positions for which the statute of limitations remains open and determined there is no material unrecognized benefit or liability to be recorded. The Organization's federal returns are currently open under the statute of limitations for the year ended December 31, 2021 and subsequent years. The Organization does not anticipate that there will be any material changes in the unrecognized tax positions over the next 12 months. There have been no related tax penalties or interest classified as a tax expense in the statement of activities.

h. In-Kind Support – The Organization records the value of donated goods or specialized services based upon the fair market value at the date of donation. Contributed professional services are recognized if the services received (a) create or enhance long-lived assets or (b) require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. Contributions of tangible assets are recognized at fair market value when received.

Additionally, the Organization receives a significant amount of contributed time, which does not meet the recognition criteria described above. Accordingly, the value of this contributed time has not been determined and is not reflected in the accompanying financial statements.

i. Revenue Recognition - In May 2014, the Financial Accounting Standards Board ("FASB") issued an accounting pronouncement, Revenue from Contracts with Customers, which is a comprehensive new revenue recognition standard that supersedes existing revenue recognition guidance. The core principle of the guidance is that an entity should recognize revenue to depict the transfer of promised goods or services to customers in an amount that reflects the consideration to which the entity expects to be entitled in exchange for those goods or services. The FASB also required expanded disclosures relating to the nature, amount, timing, and uncertainty of revenue and cash flows arising from contracts with customers. The Organization adopted the new standard effective July 1, 2019, the first day of the Organization's fiscal year using the modified retrospective approach.

The Organization primarily derives its revenue from tuition and program revenue. Revenue is recognized when services are transferred to a member in an amount that reflects the consideration the Organization expects to be entitled to in exchange for those services. The Organization recognizes tuition and program fees over time as these services are provided to their students and customers. Revenue is recognized for both tuition and program fees based on established rates. There are no significant financing components or variable considerations provided to students or other parties.

j. Adoption of New Accounting Standards - In February 2016, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update 2016-02, Leases (ASC 842). The new standard increases transparency and comparability among organizations by requiring the recognition of right-of-use (ROU) assets and lease liabilities on the statement of financial position. Most prominent of the changes in the standard is the recognition of ROU assets and lease liabilities by lessees for those leases classified as operating leases. Under the standard, disclosures are required to meet the objective of enabling users of financial statements to assess the amount, timing, and uncertainty of cash flows arising from leases.

The Organization adopted the requirements of the guidance effective July 1, 2022 and has elected to apply the provisions of this standard to the beginning of the period of adoption, through a cumulative effect adjustment,

with certain practical expedients available. The Organization's financial statements are presented with comparative information from the prior year which have not been modified to reflect the ASC 842 standard.

The Organization has elected to adopt the package of practical expedients available in the year of adoption. The Organization has not elected to adopt the available practical expedient to use hindsight in determining the lease term and in assessing impairment of the Organization's ROU assets. The Organization elected the available practical expedients to account for existing capital leases and operating leases as finance leases and operating leases, respectively, under the new guidance, without reassessing (a) whether the contracts contain leases under the new standard, (b) whether classification of capital leases or operating leases would be different in accordance with the new guidance, or (c) whether the unamortized initial direct costs before transition met the definition of initial direct costs in the new guidance at lease commencement. The implementation of this standard does not have a material impact on the statement of financial positions, statement of activities and changes in net assets and statements of cash flows.

k. Property, Equipment and Depreciation - Property and equipment are stated at cost for purchased items and fair value for contributed items at the date of donation. Assets acquired through capital lease agreements are recorded in accordance with U.S. GAAP. Maintenance and repairs are expensed as incurred. Depreciation is calculated using the straight-line method over the useful lives of the respective assets. Property and equipment with a cost over \$1,000 are capitalized.

1. Measure of Operations - The statements of activities reports all changes in net assets, including changes in net assets from operating and non-operating activities. Operating activities consist of those items attributable to the Organization's ongoing activities. Non-operating activities are limited to resources that generate return from investments, endowment contributions, financing costs, and other activities considered to be of a more unusual or nonrecurring nature.

m. Pledges Receivable - The Organization accounts for pledges receivable in accordance with the recommendations of the Financial Accounting Standards Board Accounting Standards Codification Topic 958, "Not-For-Profit Entities." Accordingly, pledged contributions are recognized when the donor makes an unconditional promise to give. Pledges receivable over one year are discounted to present value. Contributions that are restricted by the donor are reported as increases in net assets without donor restrictions if the restrictions are anticipated to expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in net assets with donor restrictions.

The Organization uses the allowance method to determine uncollectible pledges receivable. The allowance is based on prior years' experience and management's analysis of specific promises made.

n. Leases - The Organization leases program space. The Organization determines if an arrangement is a lease at inception. Operating leases are included in operating lease right-of-use (ROU) assets, other current liabilities, and operating lease liabilities on the statement of financial position.

ROU assets represent the Organization's right to use an underlying asset for the lease term and lease liabilities represent the Organization's obligation to make lease payments arising from the lease. ROU assets and liabilities are recognized at the lease commencement date based on the present value of lease payments over the lease term. As most of the individual lease contracts do not provide an implicit rate, the Organization has elected to use a risk-free discount rate determined using a period comparable with that of the lease term for computing the

present value of lease liabilities. The operating lease ROU asset also includes any lease payments made and excludes lease incentives. The lease terms may include options to extend or terminate the lease when it is reasonably certain that the Organization will exercise that option. Lease expense for lease payments is recognized on a straightline basis over the lease term. The Organization has elected to recognize payments for short-term leases with a lease term of 12 months or less and those that are immaterial in nature as expense as incurred and these leases are not included as lease liabilities or right of use assets on the statement of financial position.

The Organization has elected not to separate nonlease components from lease components and instead accounts for each separate lease component and the nonlease component as a single lease component. The Organization's lease agreements do not contain any material residual value guarantees or material restrictive covenants. In evaluating contracts to determine if they qualify as a lease, the Organization considers factors such as if the Organization has obtained substantially all of the rights to the underlying asset through exclusivity, if the Organization can direct the use of the asset by making decisions about how and for what purpose the asset will be used and if the lessor has substantive substitution rights. This evaluation may require significant judgment.

o. Comparative Financial Information - The financial statements include certain prior year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with U.S. GAAP. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended June 30, 2022, from which the summarized information was derived.

Note 3 – Operating Lease

On January 1, 2023 the Organization entered into a renewable lease agreement for the lease of program space with a beginning date of January 1, 2023 and expiring December 31, 2023. The Organization provided a security deposit in the amount of \$2,000 which the Organization is entitled to receive at the conclusion of the lease if certain conditions are met. The monthly lease payment over the term of the lease is \$2,000. The lease will automatically be renewed at the expiration date of the lease each year and intent to terminate must be expressed by either party at least 60 days prior to the end of the calendar year.

Note 4 - Tax Filing Compliance

The Organization was in compliance with applicable Federal and State regulations as of December 31, 2023 relating to the remitting of employee withholding taxes and filing of payroll tax returns and all other annual regulatory information filings.

Note 5 – Income Taxes

Generally accepted accounting principles prescribe how an organization should measure, recognize, present and disclose in its financial statements tax positions that the organization has taken on its information returns. The Organization regularly reviews its tax positions taken and as reflected in its financial statements, with regard to issues affecting tax matters. The Organization has concluded that no tax benefits or liabilities are required to be recognized in accordance with generally accepted accounting principles.

The Organization's tax and information returns are generally subject to examination by taxing authorities for three years, including 2021, 2022, and 2023.

Note 6 - Concentration of Credit Risk

The Organization maintains cash balances at several financial institutions. From time to time, the Organization's balances exceed the federally insured limits. Deposits with broker-dealers are insured by the Securities Investor Protection Corporation. The Organization maintains balances with brokers which are in excess of these limits.

Deposits with broker-dealers are insured by the Securities Investor Protection Corporation. The Organization maintains balances with brokers that are in excess of these limits.

Note 7 – Liquidity

The Organization's financial assets available within one year of the balance sheet date for general expenditure are as follows:

Financial assets:	
Cash and cash equivalents	<u>\$ 855,128</u>
Financial assets, at year end	<u>855,128</u>
Less amounts unavailable for general expenditures within	n one year:
Donor restrictions	
Financial assets available to meet cash needs	
for general expenditure within one year	<u>\$855,128</u>

As part of the Organization's liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due.

Note 8 - Subsequent Events

The Organization has evaluated subsequent events for potential recognition and/or disclosure in the December 31, 2023 financial statements through August 1, 2024 the date that the financial statements were available to be issued.

	~	20	Baturn of Organization Exampt From Ind	omo Tov		OMB No. 1545-0047			
Form 990			Return of Organization Exempt From Inc			2023			
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (exce	pt private found	lations)	2023			
Donart	mont of	the Treasury	Do not enter social security numbers on this form as it may be n	nade public.		Open to Public			
		ue Service	Go to www.irs.gov/Form990 for instructions and the latest in	formation.		Inspection			
A F	or the	e 2023 calend	lar year, or tax year beginning , 2023, and	ending		, 20			
вс	heck if a	applicable:	C Name of organization New Alternatives for LGBT Homeless You	th Inc	D Employ	er identification number			
A	ddress	change	Doing business as			27-2151000			
N	ame ch	ange	Number and street (or P.O. box if mail is not delivered to street address)	oom/suite	E Telepho	one number			
lr	nitial retu	urn	410 West 40th Street			(718)300-0133			
F	inal retu	ırn/terminated	City or town, state or province, country, and ZIP or foreign postal code		G Gross	receipts			
A	mendeo	d return	New York, NY 10018		\$	441,779			
A	pplicatio	on pending	F Name and address of principal officer: Jeffry Mummert	H(a) Is this a	group return fo	r subordinates? Yes X No			
			410 West 40th Street New York NY 10018	H(b) Are all	subordinates	included? Yes No			
I T	ax-exen	npt status: X	501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	lf "No,"	attach a list.	See instructions			
J W	/ebsite:		.newalternativesnyc.org	H(c) Group	exemption n	umber			
K F	orm of c	organization: X	Corporation Trust Association Other L Year of formation:	2010 м :	State of lega	l domicile: NY			
Par	tl	Summar	'y						
	1	Briefly descr	ibe the organization's mission or most significant activities: Provide social	services	to LGB	T teens in the			
		NYC area	. Life skills training, meals, and social work serve						
S			adults a week.			_			
nan		<u></u>							
Governance	2	Check this b	ox 🔲 if the organization discontinued its operations or disposed of more than 25%	of its net assets					
Ő	3		oting members of the governing body (Part VI, line 1a)		3	7			
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	4			4	7				
ies	5		r of independent voting members of the governing body (Part VI, line 1b) •••••••••••••••••••••••••••••••••••						
Activities &	6			6	<u> </u>				
Ac	7a		r of volunteers (estimate if necessary)		7a				
					7a 7b	0			
	D	net unrelate	d business taxable income from Form 990-T, Part I, line 11 • • • • • • • • • • •		10				
		Contribution	and grants (Dart )/III line 1h)	Prior Year	205	Current Year			
0	8		s and grants (Part VIII, line 1h)		5,305	398,931			
nu	9	•	rvice revenue (Part VIII, line 2g)	24	2,512	33,025			
Revenue	10		ncome (Part VIII, column (A), lines 3, 4, and 7d)		232	9,823			
č	11		ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0			
	12		e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	548	3,049	441,779			
	13		similar amounts paid (Part IX, column (A), lines 1-3)			0			
	14		d to or for members (Part IX, column (A), line 4)			0			
s	15		er compensation, employee benefits (Part IX, column (A), lines 5-10) • • • • •	304	4,889	220,149			
Jse			fundraising fees (Part IX, column (A), line 11e)			0			
Expenses			ising expenses (Part IX, column (D), line 25) 30,831						
ш	17	•	ses (Part IX, column (A), lines 11a-11d, 11f-24e)		,204	160,379			
	18		ses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,093	380,528			
	19	Revenue les	s expenses. Subtract line 18 from line 12	71	L,956	61,251			
۶S				Beginning of Curr	ent Year	End of Year			
sets alan	20		(Part X, line 16)	797	,195	859,128			
Net Assets or Fund Balances	21		es (Part X, line 26)	Ę	5,250	5,932			
			or fund balances. Subtract line 21 from line 20	791	,945	853,196			
Par	t II	Signatu	re Block						
			clare that I have examined this return, including accompanying schedules and statements, and to the best of claration of preparer (other than officer) is based on all information of which preparer has any knowledge.	ny knowledge and be	lief, it is				
		JEFF	RY MUMMERT						
Sigr	า	Signature of office	cer		Date				
Here	e	JEFF	RY MUMMERT, Treasurer						
		Type or print nar	·						

	Print/Type preparer's name		Preparer's signature		Date		Check if	PTIN	
Paid	Steven Ketcham	СРА			08-19-2024		self-employed	P01439801	-
Preparer	Firm's name	Ketcham	& Associates LLC			Firm's	EIN		
Use Only	Firm's address	202 Moun	tain Avenue			Phone	no.		
_		Westfiel	d NJ 07090				908-	232-4618	
May the IRS	v the IRS discuss this return with the preparer shown above? See instructions $\dots \dots \dots \dots \dots \dots \dots \dots \dots \dots \square$ Yes $\square$ No								

Form	990 (2023) New Alternatives for LGBT H	omeless Youth Inc	27-2151000 Page 2
Pa	t III Statement of Program Service Acco	omplishments	
	Check if Schedule O contains a response or not	e to any line in this Part III •••••••••••••••••••••••••••••••••	
1	Briefly describe the organization's mission:		
	Provide social services to LGBT teen	s in the NYC area. Life skills traini	ng, meals, and social
	work services were offered to an ave	rage of 60 young adults a week.	
2	Did the organization undertake any significant program se	rvices 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 significar	t 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 accomplishing	nents for each of its three largest program services, as meas	sured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations	are required to report the amount of grants and allocations t	o others,
	the total expenses, and revenue, if any, for each program	service reported.	
4a	(Code: ) (Expenses \$ 239,9	15 including grants of \$ ) (Revenu	ue \$ 441,779)
		s in the NYC area. Life skills trainin	g, meals, and social
	work services were offered to an ave		<b>•</b> • •
4b	(Code:) (Expenses \$	including grants of \$) (Revenue)	ie \$)
4c	(Code: ) (Expenses \$	including grants of \$ ) (Revenue)	ie \$ )
	/ ( ) = = = = ,/	, (*****	· ,
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of	of \$ ) (Revenue \$	)
4e	Total program service expenses 2	39,915	
EEA			Form <b>990</b> (2023)

Form	990 (2023)New Alternatives for LGBT Homeless Youth Inc27-215	000	F	Page 3
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part L	3		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? If "Yes," complete Schedule C, Part II	4		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? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
~	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
10	debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		
44		10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X, as applicable.			
~	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
а	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more	11a	•	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
~	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more	110		
U	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	110		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
<u>م</u>	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part</i> .X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
120	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	124		
-	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
-	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and JV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part JI.	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

Form 990 (2023)

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Pa	rt IV Checklist of Required Schedules (continued)				
				Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on				
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	•••	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the				
	organization's current and former officers, directors, trustees, key employees, and highest compensated				
	employees? If "Yes," complete Schedule J	• • •	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b				
	through 24d and complete Schedule K. If "No," go to line 25a	• • •	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	• • •	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year				
	to defease any tax-exempt bonds?		24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit				
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior				
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?				
	If "Yes," complete Schedule L, Part I		25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%				
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part.II		26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key				
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee				
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these				
	persons? If "Yes," complete Schedule L, Part III		27		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).				
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If				
-	"Yes," complete Schedule L, Part IV.		28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		28b		x
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	•••	200		
Ŭ	"Yes," complete Schedule L, Part IV.		28c		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M		29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	•••	20		
00	conservation contributions? If "Yes," complete Schedule M.		30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part J		31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	•••	01		X
02	complete Schedule N, Part II		32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	•••	52		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part L.		33		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	•••	- 33		<u>x</u>
	or IV, and Part V, line 1		34		v
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		34 35a		X X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	•••	JJa		
D	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 • • • • • • •		35b		
26		•••	350		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		36		v
27	related organization? If "Yes," complete Schedule R, Part V, line 2	•••	30		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		07		
~~	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part-VI	•••	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and				
D	19? Note: All Form 990 filers are required to complete Schedule O	•••	38	X	
Par					
	Check if Schedule O contains a response or note to any line in this Part V	••••	• • •		
,				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	3	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				
	reportable gaming (gambling) winnings to prize winners?	•••	10	X	

Form	990 (2023) New Alternatives for LGBT Homeless Youth Inc 27-21510	00	P	Page 5
Par	t 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 5			
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
с	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		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? • • • • • • • •	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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			
С	Enter the amount of reserves on hand			
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 Q	14b		L
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?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			l
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

	m 990 (2023) New Alternatives for LGBT Homeless Youth Inc 27-21510			age 6
Pa	art VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below,			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See ii	nstruc	ctions.
	Check if Schedule O contains a response or note to any line in this Part VI			X
Se	ction 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.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	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		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	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 Q	9		x
Sec	ction 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	x	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	x	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
b	Other officers or key employees of the organization	15b	x	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed <b>New York</b>			
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     Image: The set of the se			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
13	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.			
20	Jeffry Mummert (917)403-0113, 410 West 40th Street, New York, NY 10018			
	DETITY MANAMETE (JI/JIOJ-VIIJ, HIV WEBE HUEH DELECE, NEW IVIK, NI IVVIO			

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Part VII Compensation of Officers, Directors, 1	rustees, key Employee	s, rignest Co	ompensated Employe	es, and						
Independent Contractors				_						
Check if Schedule O contains a response or r	ote to any line in this Part V	11 <b></b>								
Section A. Officers, Directors, Trustees, Key Emp	oyees, and Highest Co	mpensated E	mployees							
1a Complete this table for all persons required to be listed. Report	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 the instructions for definition of "key employee."										
<ul> <li>List the organization's five current highest compensated emp</li> </ul>	ovees (other than an officer, di	rector. trustee. or	kev emplovee)							
who received reportable compensation (box 5 of Form W-2, box 6 o										
\$100,000 from the organization and any related organizations.										
List all of the organization's former officers, key employees, a	<b>o</b> 1 1	byees who receive	d more than							
\$100,000 of reportable compensation from the organization and any	related organizations.									
<ul> <li>List all of the organization's former directors or trustees that</li> </ul>	received, in the capacity as a	former director or	trustee of the							
organization, more than \$10,000 of reportable compensation from th	organization and any related c	rganizations.								
Pagingtructions for the order in which to light the persons above	0	0								
See instructions for the order in which to list the persons above.										
<b>x</b> Check this box if neither the organization nor any related organization	ation compensated any current	officer, director, or	trustee.							
	(C)									

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles: er and	Pos eck m s per:	son is ector	Highest compensated	n )	(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
(1)Katherine_Barnhart	40.00									
Executive Director						x		69,000	0	0
(2)Grant_Woolfolk	10.00									
Board Director		x						0	0	0
(3)Jack_Sherrat	2.00									
Board Director		x						0	0	0
_(4)Andy_Humm	2.00									
Board Director		x						0	0	0
(5)Michaela_Murphy	10.00									
Board Director		x						0	0	0
(6)Harlem Gunness	2.00									
President		x		x				0	0	0
(7)Amy Raspatello	2.00									
Secretary		x		x				0	0	0
(8) Jeffry Mummert	7.00									
Treasurer		x		x				0	0	0
_(9)										
(10)										
<u>(11)</u>										
 [12)										
<u>(13)</u>										
<u>(14)</u>										
										Eorm <b>990</b> (2023)

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Part	VII	Section A. Officers, Directors, T	rustees,	Key I	Emp	ploy	yee	s, ar	nd I	Highest Comp	ensated Emp	loyees	(con	tinued,
	(A) Name and title			(C) Position (do not check more than box, unless person is br officer and a director/tru per week (list any ours for <u>check more than</u> box, unless person is br officer and a director/tru e query ours for <u>check more than</u> officer and a director/tru e query ours for <u>check more than</u>					n )	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	co f orga	(F) nated arr of other mpensat from the unization d organiz	ion and
			organizations below dotted line)	or director	nstitutional trustee		≺ey employee	Highest compensated employee						
<u>(15)</u>														
(16)														
<u>(17)</u>														
<u>(18)</u>														
<u>(19)</u>														
(20)														
(21)														
(22)														
(23)														
(24)														
<u>(25)</u>														
1b	Subto		•••••	• • •	••	••	••	•••	•					
c d		from continuation sheets to Part VII, Sect (add lines 1b and 1c)		•••	••	••	••	•••	•	69,000	0			0
2	Total	number of individuals (including but n	ot limited to									:		
	repor	table compensation from the organiza	tion										N	0
3	Did th	e organization list any former officer, direc	tor, trustee,	key en	nploy	vee,	or h	ighest	t cor	mpensated			Yes	No
		yee on line 1a? If "Yes," complete Schedu										3		x
4		ny individual listed on line 1a, is the sum of re ization and related organizations greater th												
	-											4		x
5		ny person listed on line 1a receive or accrue						-						
Saati		rvices rendered to the organization? If "Yes	s," complete	Schec	lule .	J for	SUC	h pers	son	••••	• • • • • • • • • •	5		X
1	Com	Independent Contractors plete this table for your five highest con pensation from the organization. Repor	-	-										loor
	comp	(A)	t compens	alion		ne (	ale	nual	yea	(B)		(C)	s lax y	ear.
		Name and business addres	S							Description of servic	es	Compens	sation	
									-					
									-					
2	Total	number of independent contractors (ir	ncluding bu	ut not	limite	ed t	o th	ose li	iste	d above) who				

received more than \$100,000 of con	pensation from the organization
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Part	VIII	Statement of Rev	enu	le						
		Check if Schedule C	) cor	ntains a res	pons	e or note to any li	ne in this Part V (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .	••		1a					
s, co	b	Membership dues	••	• • • • •	1b					
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events	••		1c					
s, G Amo	d	0			1d					
Gift Iar J	e	0 (			1e					
Simi,	f		-							
her		and similar amounts not in Noncash contributions inc			1f	398,931				
d di	g	lines 1a-1f			1g	¢				
anc	h					1	398,931			
						Business Code	3307331			
	2a	Other income				900099	33,025	33,025		
ice	b						<b>,</b>			
Serv Jue	c									
Program Service Revenue	d									
Be	е									
Ť.		All other program service								
	g	Total. Add lines 2a-2f .	••	• • • • • •		•••••	33,025			
	3	Investment income (includi								
		other similar amounts)				F	9,823			9,823
	4	Income from investment of		•	•	-				
	5	Royalties	••							
	62	Gross rents	6a	(i) Real		(ii) Personal				
		Less: rental expenses								
		Rental income or (loss)	6c							
		Net rental income or (loss)								
		Gross amount from		(i) Securitie		(ii) Other				
	10	sales of assets								
		other than inventory	7a							
	b	Less: cost or other basis								
ne		and sales expenses $\ $ .	7b							
ven		Gain or (loss)								
Other Revenue		Net gain or (loss)			• • •	•••••				
ther	8a	Gross income from fundra	ising							
ō		events (not including \$								
		of contributions reported o			0.					
	h	1c). See Part IV, line 18 Less: direct expenses •			8a 8b					
		Net income or (loss) from								
		Gross income from gaming		aising event	· ·	•••••				
	Ju	activities. See Part IV, line	-		9a					
	b	Less: direct expenses .			9b					
		Net income or (loss) from			••					
		Gross sales of inventory, I	-	0						
		returns and allowances .			10a	l				
	b	Less: cost of goods sold	••		10b					
	С	Net income or (loss) from	sales	s of inventory	•••					
						Business Code				
Sno	11a	-								
and	b									
Miscellanous Revenue	C .									
Mis H	-	All other revenue								
		Total. Add lines 11a-11d					A A 1	22.025		0.000
	12	Total revenue. See instru	iciior	10 · · · ·		•••••	441,779	33,025	0	9,823

26

 $\ensuremath{\textbf{Joint costs.}}$  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)

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Form 990 (2023)		New	Alternatives	for	LGBT	Homeless	Youth	Inc
Part IX	Statement of	Fund	ctional Expense	es				

Form 990 (2023)

	t IX Statement of Functional Expenses				
Secti	ion 501(c)(3) and 501(c)(4) organizations must compl	ete all columns. All c	other organizations r	nust complete colum	n (A).
	Check if Schedule O contains a response or r	note to any line in thi	is Part IX	<u>.</u>	•••••
Do no	ot include amounts reported on lines 6b, 7b,	<b>(A)</b> Total expenses	<b>(B)</b> Program service	(C) Management and	<b>(D)</b> Fundraising
8b, 9	b, and 10b of Part VIII.	Total expenses	expenses	general expenses	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	69,000	28,483	40,517	
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	121,551	101,292		20,259
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	18,134	14,507	3,627	
10	Payroll taxes	11,464	8,025	2,293	1,146
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	5,250		5,250	
d	Lobbying				
е	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.) ••	24,349		24,349	
12	Advertising and promotion	6,292			6,292
13	Office expenses	8,385		8,385	
14	Information technology				
15	Royalties				
16		27,340	17,938	6,268	3,134
17		126	126		
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings				
20 21	Interest				
21	Depreciation, depletion, and amortization				
22		11 522		11,522	
23 24	Other expenses. Itemize expenses not covered	11,522		11,522	
24	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	Security expense	12,036	12,036		
	Client needs and program exp	51,628	51,628		
	Commission and fees	5,880	5,880		
d		5,000	5,000		
	All other expenses	7,571		7,571	
25	Total functional expenses. Add lines 1 through 24e.	380,528	239,915	109,782	30,831

	990 (20		c 27	7-215	1000 Page 11
Part	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X	••••	••••	
			(A)		(B)
	1		Beginning of year		End of year
	1	Cash - non-interest-bearing	797,195	1	145,481
	2	Savings and temporary cash investments		2	709,647
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	2,000
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 7,301			
	b	Less: accumulated depreciation		10c	
	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		15	2,000
	16	Total assets. Add lines 1 through 15 (must equal line 33)	797,195	16	859,128
	17	Accounts payable and accrued expenses	5,250	17	5,932
	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	
es	22	Loans and other payables to any current or former officer, director,			
iliti		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	5,250	26	5,932
		Organizations that follow FASB ASC 958, check here			
es		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	743,050	27	853,196
Bala	28	Net assets with donor restrictions	48,895	28	
рц		Organizations that do not follow FASB ASC 958, check here			
Fu		and complete lines 29 through 33.			
sor	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net	32	Total net assets or fund balances	791,945	32	853,196
	33	Total liabilities and net assets/fund balances	797,195	33	859,128
EEA					Form <b>990</b> (2023)

Form	990 (2023) New Alternatives for LGBT Homeless Youth Inc	27-215	51000	Р	age <b>12</b>	
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		441	,779	
2	Total expenses (must equal Part IX, column (A), line 25)	2		380	,528	
3	Revenue less expenses. Subtract line 2 from line 1	3		61,25		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		791	,945	
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		853	,196	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: 🗌 Cash 🛛 🕱 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?		28	a x		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both.					
	X Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		21	5	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		20	x		
	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?		3a	a	x	
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		31	<b>b</b>		
EEA			Fc	orm <b>990</b>	(2023)	

SCHEDULE	Α
(Form 990)	

Part I

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С

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# 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. **Open to Public** Attach to Form 990 or Form 990-EZ. Department of the Treasury Internal Revenue Service Inspection Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number New Alternatives for LGBT Homeless Youth Inc 27-2151000 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness

requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III

functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations 

	(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?		listed in your governing		listed in your governing		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No						
(A)											
(B)											
(C)											
(D)											
(E)											
Total											

OMB No. 1545-0047

Part	(Complete only if you checked th	ations Descr	<b>ibed in Sect</b> 5, 7, or 8 of	i <b>ons 170(b)(</b> 1 Part I or if the	I)(A)(iv) and organization	failed to qua	(vi)
	Part III. If the organization fails to	o qualify unde	r the tests lis	ted below, plo	ease complet	e Part III.)	
	ion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.") ••••	386,555	429,518	542,037	525,305	398,931	2,282,346
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						
4	Total. Add lines 1 through 3	386,555	429,518	542,037	525,305	398,931	2,282,346
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)						29,017
6	Public support. Subtract line 5 from line 4.						2,253,329
Secti	ion B. Total Support						
Calen	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	386,555	429,518	542,037	525,305	398,931	2,282,346
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources	3,820	2,477	474	232	9,823	16,826
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10							
10	is regularly carried on						
10	is regularly carried on <b></b> Other income. Do not include gain or						
10 11	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets						2,299,172
	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	(see instructio	ns)			12	2,299,172
11	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10						
11 12	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc.	rganization's fir	st, second, thi	rd, fourth, or fif	th tax year as a	a section 501(	c)(3)
11 12 13	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o	rganization's fir <b>re</b>	st, second, thi	rd, fourth, or fif	th tax year as a	a section 501(	c)(3)
11 12 13	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o organization, check this box and <b>stop he</b>	rganization's fir re rt Percentage	st, second, thi	rd, fourth, or fif	th tax year as : • • • • • • • • • • • •	a section 501(	c)(3)
11 12 13 Secti	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o organization, check this box and <b>stop her</b> <b>ion C. Computation of Public Suppo</b> Public support percentage for 2023 (line of Public support percentage from 2022 Sch	rganization's fir re rt Percentage 6, column (f), di redule A, Part I	st, second, thi 	rd, fourth, or fif	th tax year as :	a section 501(a	c)(3) [ 98.01 % 98.08 %
11 12 13 <u>Secti</u> 14	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o organization, check this box and <b>stop he</b> <b>ion C. Computation of Public Suppo</b> Public support percentage for 2023 (line 6	rganization's fir re rt Percentage 6, column (f), di redule A, Part I	st, second, thi 	rd, fourth, or fif	th tax year as :	a section 501(a	c)(3) [ 98.01 % 98.08 %
11 12 13 <u>Secti</u> 14 15	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o organization, check this box and <b>stop her</b> <b>ion C. Computation of Public Suppo</b> Public support percentage for 2023 (line of Public support percentage from 2022 Sch	rganization's fir re rt Percentage 5, column (f), di jedule A, Part I jization did not	st, second, thi e vided by line 1 l, line 14 check the box	rd, fourth, or fif 	th tax year as a	a section 501(  14 15 1/3% or more,	c)(3) [] 98.01 % 98.08 % check this
11 12 13 <u>Secti</u> 14 15	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o organization, check this box and <b>stop her</b> <b>ion C. Computation of Public Suppo</b> Public support percentage for 2023 (line 6 Public support percentage from 2022 Sch <b>33 1/3% support test - 2023.</b> If the organ	rganization's fir re rt Percentage 5, column (f), di ledule A, Part I lization did not lifies as a publi	st, second, thi e vided by line 1 l, line 14 check the box cly supported	rd, fourth, or fif 	th tax year as a	a section 501( 14 15 1/3% or more,	c)(3)  98.01 % 98.08 % check this X
11 12 13 <u>Secti</u> 14 15 16a	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o organization, check this box and <b>stop her</b> <b>ion C. Computation of Public Suppor</b> Public support percentage for 2023 (line 6 Public support percentage from 2022 Sch <b>33 1/3% support test - 2023.</b> If the organ box and <b>stop here.</b> The organization qua	rganization's fir re rt Percentage 5, column (f), di edule A, Part I nization did not lifies as a publi nization did not	st, second, thin e vided by line 1 I, line 14 check the box cly supported check a box o	rd, fourth, or fif 1, column (f)) on line 13, and organization . n line 13 or 16a	th tax year as a	a section 501( 14 15 1/3% or more, s 33 1/3% or n	c)(3)  98.01 % 98.08 % check this X nore, check
11 12 13 <u>Secti</u> 14 15 16a	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o organization, check this box and <b>stop her</b> <b>ion C. Computation of Public Suppor</b> Public support percentage from 2022 Sch <b>33 1/3% support test - 2023.</b> If the organ box and <b>stop here.</b> The organization qua <b>33 1/3% support test - 2022.</b> If the organ	rganization's fir re rt Percentage 5, column (f), di edule A, Part I nization did not lifies as a publi nization did not qualifies as a p	st, second, this e vided by line 1 I, line 14 check the box cly supported check a box o publicly suppor	rd, fourth, or fif 1, column (f)) on line 13, and organization . n line 13 or 16a ted organizatio	th tax year as a d line 14 is 33 a, and line 15 i	a section 501(d         14         15         1/3% or more,         s 33 1/3% or n	c)(3) 98.01 % 98.08 % check this X hore, check 
11 12 13 <u>Secti</u> 14 15 16a b	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o organization, check this box and <b>stop her</b> <b>ion C. Computation of Public Suppo</b> Public support percentage for 2023 (line 6 Public support percentage from 2022 Sch <b>33 1/3% support test - 2023.</b> If the organ box and <b>stop here.</b> The organization qua <b>33 1/3% support test - 2022.</b> If the organ this box and <b>stop here.</b> The organization	rganization's fir re rt Percentage 5, column (f), di edule A, Part I nization did not lifies as a publi nization did not qualifies as a p 23. If the organ	st, second, thin vided by line 1 l, line 14 check the box cly supported check a box of publicly support ization did not	rd, fourth, or fif 1, column (f)) on line 13, and organization n line 13 or 16 ted organizatic check a box o	th tax year as a d line 14 is 33 a, and line 15 i on	a section 501(0         14         15         1/3% or more,         s 33 1/3% or n         or 16b, and lin	c)(3)  98.01 % 98.08 % check this X nore, check I te 14 is
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11 12 13 <u>Secti</u> 14 15 16a b 17a	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o organization, check this box and <b>stop her</b> <b>ion C. Computation of Public Suppo</b> Public support percentage for 2023 (line 6 Public support percentage from 2022 Sch <b>33 1/3% support test - 2023.</b> If the organ box and <b>stop here.</b> The organization qua <b>33 1/3% support test - 2022.</b> If the organ this box and <b>stop here.</b> The organization <b>10%-facts-and-circumstances test - 20</b> 10% or more, and if the organization meet Part VI how the organization meets the fa organization	rganization's fir re rt Percentage 5, column (f), di edule A, Part I nization did not lifies as a publi nization did not qualifies as a p 23. If the organ ts the facts-and cts-and-circum 22. If the organ n meets the fact	st, second, this vided by line 1 l, line 14 check the box cly supported check a box of publicly suppor ization did not d-circumstance stances test. T ization did not ts-and-circumst	rd, fourth, or fif	th tax year as a d line 14 is 33 a, and line 15 i on	a section 501(0         14         15         1/3% or more,         s 33 1/3% or more,         or 16b, and lin         op here. Expla         a publicly supp         16b, or 17a, a         nd stop here.	98.01 %         98.08 %         check this         I         nore, check         I         nore, check         I         norted         I         norted         I         norted         I         norted         I         nd line         Explain
11 12 13 <u>Secti</u> 14 15 16a b 17a	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o organization, check this box and <b>stop her</b> <b>ion C. Computation of Public Suppo</b> Public support percentage for 2023 (line 6 Public support percentage from 2022 Sch <b>33 1/3% support test - 2023.</b> If the organ box and <b>stop here.</b> The organization qua <b>33 1/3% support test - 2022.</b> If the organ this box and <b>stop here.</b> The organization <b>10%-facts-and-circumstances test - 20</b> 10% or more, and if the organization meet Part VI how the organization meets the fa organization	rganization's fir re	st, second, this vided by line 1 l, line 14 check the box cly supported check a box of publicly suppor ization did not d-circumstance stances test. T  ization did not stances test. T 	rd, fourth, or fif 1, column (f)) on line 13, and organization n line 13 or 16a ted organizatic check a box o es test, check t The organizatio check a box o stances test, check The organizatio	th tax year as a d line 14 is 33 a, and line 15 i on n line 13, 16a, his box and <b>st</b> on qualifies as a n line 13, 16a, heck this box a tion qualifies as	a section 501(d         14         15         1/3% or more,         s 33 1/3% or more,         or 16b, and lin         op here. Expla         a publicly supp         16b, or 17a, a         nd stop here.         us a publicly sup	98.01 %         98.08 %         check this         I         nore, check         I         norted         I         ported         I         ported
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11 12 13 <u>Secti</u> 14 15 16a b 17a	is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First 5 years.</b> If the Form 990 is for the o organization, check this box and <b>stop her</b> <b>ion C. Computation of Public Suppo</b> Public support percentage for 2023 (line 6 Public support percentage from 2022 Sch <b>33 1/3% support test - 2023.</b> If the organ box and <b>stop here.</b> The organization qua <b>33 1/3% support test - 2022.</b> If the organ this box and <b>stop here.</b> The organization <b>10%-facts-and-circumstances test - 20</b> 10% or more, and if the organization meet Part VI how the organization meets the fa organization	rganization's fir re	st, second, this vided by line 1 l, line 14 check the box cly supported check a box of bublicly suppor ization did not d-circumstance stances test. T ization did not ts-and-circums umstances test box on line 13,	rd, fourth, or fif	th tax year as a d line 14 is 33 a, and line 15 i on. n line 13, 16a, his box and <b>st</b> on qualifies as a n line 13, 16a, heck this box a tion qualifies as o, or 17b, check	a section 501 (display="block"/>          14         15         1/3% or more,         s 33 1/3% or more,         or 16b, and lin         op here. Explate         a publicly supp         16b, or 17a, a         nd stop here.         us a publicly sup         is a publicly sup         is this box and stop	98.01 %         98.08 %         check this         x         nore, check               nore, check               nore, check               nore, check               norted               nd line         Explain         pported

Schedu	le A (Form 990) 2023 New Alterna					27-215100	0 Page 3
Part	III Support Schedule for Organiza	ations Desc	ribed in Sect	tion 509(a)(2)	)		
	(Complete only if you checked th	e box on line	e 10 of Part I	or if the organ	nization failed	I to qualify un	der Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	mplete Part I	I.)	
Secti	on A. Public Support			<i>.</i> .	•	,	
	dar 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	(1) _ 1 1 1	(,	(0) _0_1	(0) = 0 = =	(0) = 0 = 0	(1) 1 0 000
-	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	<b>Total.</b> Add lines 1 through 5						
-	Amounts included on lines 1, 2, and 3						
74	received from disqualified persons						
b	Amounts included on lines 2 and 3						
D	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						
0							
-	on B. Total Support	( )	(1)	()	(	()	
	dar year (or fiscal year beginning in)	<b>(a)</b> 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						
С	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 or	anization's fi	rst. second. th	ird, fourth, or fi	fth tax vear as	a section 501(	c)(3)
••	organization, check this box and <b>stop her</b>	0			5	•••••	
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2023 (line 8	-		13 column (f))		15	%
16	Public support percentage from 2022 Sch		-			16	%
	on D. Computation of Investment In					10	/0
17	Investment income percentage for 2023 (I			v line 12 colu	mn (f))	17	%
				-			%
18	Investment income percentage from 2022					18	
19a	<b>33 1/3% support tests - 2023.</b> If the orga						
1-	17 is not more than 33 1/3%, check this b	-	-	-		• • •	
b	33 1/3% support tests - 2022. If the organizati						
	line 18 is not more than 33 1/3%, check this bo	-	-			-	
20	Private foundation. If the organization di	a not check a	box on line 14	, 19a, or 19b, c	CRECK THIS BOX a	and see instruc	tions

Page 4

No

Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

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

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedu	le A (Form 990) 2023 New Alternatives for LGBT Homeless Youth Inc 27-2151000		F	age 5
Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in <b>Part VI.</b>	11c		
ecti	on 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.

#### Section C. Type II Supporting Organizations

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).* 

#### 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 in 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 government 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.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. *Answer lines 3a and 3b below.*
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

Schedule A (Form 990) 2023

2a

2b

3a

3b

Yes

No

2

1

Yes No

EEA

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

Secti	on 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
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		
Secti	on 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-functional	llv int	egrated Type III suppo	rting organization

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

EEA

Schedule A (Form 990) 2023

	e A (Form 990) 2023 New Alternatives for LGBT			21510	000 Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	supporting Organ	zations (continu	ea)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer		ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organ	zations	3	
4	Amounts paid to acquire exempt-use assets	<u>_</u>		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 resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2023	ons	(iii) Distributable Amount for 2023
	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023				
	(reasonable cause required - <i>explain in Part VI</i> ). See				
	instructions.				
3	Excess distributions carryover, if any, to 2023				
	From 2018 From 2019				
b	European 0000				
d	From 2020				
d	F 0000				
e					
f	Total of lines 3a through 3e				
<u> </u>	Applied to underdistributions of prior years Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
- <u>+</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
	Distributions for 2023 from				
-	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
J	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
U	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
,	and 4c.				
8	Breakdown of line 7:				
a	Europe from 0010				
a	Excess from 2019				
C	Excess from 2021				
d	Excess from 2022				
e	Excess from 2023				

EEA

Schedule A (Form 990) 2023

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

### Schedule B (Form 990)

Department of the Treasury

Internal Revenue Service

# Schedule of Contributors

OMB No. 1545-0047

### Attach to Form 990, 990-EZ, or Form 990-PF.

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

2023

Name of the organization	Employer identification number
New Alternatives for LGBT Homeless Youth Inc	27-2151000
Organization type (check one):	

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

#### Check if your organization is covered by the General Rule or a Special Rule.

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

#### General Rule

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

#### Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year .....\$

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

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

Part I	<b>Contributors</b> (see instructions). Use duplicate co	pies of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	Sarah Belin-Zerbib 448 9th Street Apt 4	\$5,230	Person x Payroll Noncash
	Brooklyn NY 11215		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	PersonPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	PersonPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	PersonIPayrollINoncashI(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023) Name of organization

New Alternatives for LGBT Homeless Youth Inc

Schedule B (Form 990) (2023)

Employer identification number

27-2151000

SCHEDULE D (Form 990)		Supplemental Financial Statements					OMB No. 1545-0047		
		Complete if the organization answered "Yes" on Form 990,					202	2	
			10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.						
	nent of the Treasury		Attach to Form 990. 990 for instructions and the latest information.				Open to F		
	Revenue Service f the organization	Go to www.irs.gov/Forms	190 for instructions and			identifica	Inspection ation number	n	
	-	for LGBT Homeless Youth In	~			-21510			
Pa		ations Maintaining Donor Advised		ilar Funds or Acc		.21510	00		
Iu		te if the organization answered "Yes" of			ounts				
	Complet		(a) Donor adv			(b) Funds	and other account	s	
1	Total number at	end of year	(1)					-	
2		of contributions to (during year)							
3	Aggregate value	of grants from (during year)							
4	Aggregate value	at end of year							
5	Did the organiza	tion inform all donors and donor advisors in	writing that the assets h	held in donor advised					
	funds are the org	ganization's property, subject to the organization	ation's exclusive legal co	ontrol?			🗌 Yes	🗌 No	
6	Did the organiza	tion inform all grantees, donors, and donor a	advisors in writing that g	rant funds can be use	ed				
	only for charitable	e purposes and not for the benefit of the do	nor or donor advisor, or	for any other purpose				_	
		missible private benefit?	••••		• • • •	• • • • •	· · Ves	No	
Par		rvation Easements							
		te if the organization answered "Yes"							
1		nservation easements held by the organiza							
	_	of land for public use (for example, recreation	on or education)	Preservation of a h Preservation of a h					
		natural habitat of open space	L	Preservation of a c	certified r	ISTOLIC ST	ucture		
2		a through 2d if the organization held a quali	fied conconvation contrib	oution in the form of a	conconv	otion			
2	•	last day of the tax year.					at the End of the	- Tay Vear	
а		conservation easements			. 2				
b		stricted by conservation easements			. 2				
c		ervation easements on a certified historic st							
d		ervation easements included on line 2c, acq							
		cture listed in the National Register			. 20	ь			
3	Number of conse	ervation easements modified, transferred, re	eleased, extinguished, o	r terminated by the o	rganizatio	on during	the		
	tax year								
4	Number of states	s where property subject to conservation ea	sement is located						
5	Does the organiz	ation have a written policy regarding the pe	eriodic monitoring, inspec	ction, handling of					
		nforcement of the conservation easements i						No	
6	Staff and volunte	er hours devoted to monitoring, inspecting,	handling of violations, a	nd enforcing conserva	ation eas	ements du	uring the year		
7	Amount of exper	ises incurred in monitoring, inspecting, hand	dling of violations, and e	nforcing conservation	easeme	nts during	g the year		
-									
8		ervation easement reported on line 2d abov	• •		,,,,,,				
•	•	(h)(4)(B)(ii)?					•• 🗌 Yes	∐ No	
9		ribe how the organization reports conserva		•			ice		
		e, if applicable, the text of the footnote to th counting for conservation easements	e organization s intancia		sindes the				
Par		zations Maintaining Collections	of Art Historical	Treasures or O	ther Si	milar <i>L</i>	Assets		
		te if the organization answered "Yes" of	-						
1a		n elected, as permitted under FASB ASC 9			balance	sheet wo	rks		
	-	reasures, or other similar assets held for pu							
		in Part XIII the text of the footnote to its fina							
b		n elected, as permitted under FASB ASC 9			ance she	et works (	of		
	-	asures, or other similar assets held for publi							
		ving amounts relating to these items:							
	(i) Revenue inc	luded on Form 990, Part VIII, line 1				\$			
		ded in Form 990, Part X • • • • • • • • •				-			
2	If the organizatio	n received or held works of art, historical tre	easures, or other similar	assets for financial g	ain, provi	de the			
	following amount	ts required to be reported under FASB ASC	0 958 relating to these it	tems:					
а	Revenue include	d on Form 990, Part VIII, line 1				\$			

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

b	Assets included in Form 990, Part X						
For Paperwork Reduction Act Notice, see the Instructions for Form 990.							

Schedule D (Form 990) 2023

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Schedu	le D (Form 990) 2023 New Alternative					27-215		Page <b>2</b>	
Par	t III Organizations Maintaining	<b>Collections of</b>	Art, Historical	Treasures	, or Otl	her Similar A	Assets (co	ontinued)	
3	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):								
а	a Public exhibition d Loan or exchange program								
b	b Scholarly research e Other								
с	c Preservation for future generations								
4	4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part								
	XIII.	·	,	0	'				
5									
	assets to be sold to raise funds rather than						. 🗌 Yes	s 🗌 No	
Par	t IV Escrow and Custodial Arra								
	Complete if the organization		' on Form 990.	Part IV. line	9. or r	eported an a	mount on	Form	
	990, Part X, line 21.		,	, ,	-, -			-	
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contributior	ns or other asse	ets not				
	included on Form 990, Part X?						🗌 Yes	s 🗌 No	
b	If "Yes," explain the arrangement in Part XII								
-			sherring tablet			Α	mount		
с	Beginning balance				. 1c				
d	Additions during the year								
e	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on F							s 🗌 No	
b	If "Yes," explain the arrangement in Part XII					•			
Par			explanation has bee			•••••	•••••	•	
I UI	Complete if the organization	answered "Yes'	' on Form 990	Part IV line	10				
		(a) Current year	(b) Prior year	(c) Two year		(d) Three years bac		years back	
1a	Beginning of year balance	(a) Current year	(b) Fliol year	(C) Two year	SDACK	(u) Three years bac		years back	
b	Contributions								
	Net investment earnings, gains, and								
С									
Ы									
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
4	Administrative expenses								
f	End of year balance								
g	,	wont yoor and halans							
2	Provide the estimated percentage of the cur	-	e (line 19, column	(a)) neid as.					
a 5	Board designated or quasi-endowment								
b	· · · · · · · · · · · · · · · · · · ·								
С		and agend 100%							
20	The percentages on lines 2a, 2b, and 2c sho		ation that are hold	and administer	ad for the				
3a	Are there endowment funds not in the poss	ession of the organiz	ation that are new	and administer	ed for the	;		Vac Na	
	organization by: (i) Unrelated organizations?						20(1)	Yes No	
	<ul><li>(i) Unrelated organizations? (ii) Related organizations?</li></ul>						••• 3a(i)		
<b>b</b>							••• 3a(ii)		
b	If "Yes" on line 3a(ii), are the related organi.	•		1?••••	• • • • •	•••••	. 3b		
4 Dor	Describe in Part XIII the intended uses of the		iowment tunas.						
Par			on Form 000	Dort IV line	110 0	oo Earm 000		ina 10	
	Complete if the organization								
	Description of property	(a) Cost or oth (investme		at or other basis (other)		Accumulated preciation	( <b>d</b> ) Boo	k valuē	
	Land				de				
1a									
b	Buildings	••							
C	Leasehold improvements	••							
d		••		7,301		7,301			
e	Other								
Total.	Add lines 1a through 1e. (Column (d) must	equal Form 990, Pa	rt X, line 10c, colur	mn (B) • • • •		• • • • • •			

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Schedule D	(FOIIII	330	) ZUZJ

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Schedule D (Fo	rm 990) 2023	New Alternatives for LGBT Ho	omeless Youth Inc	27-2151000	Page 3
Part VII	Investments	- Other Securities			
	Complete if t	he organization answered "Yes" on For	m 990, Part IV, line 1	1b. See Form 990, Part X, lir	ne 12.
		scription 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-h	eld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Colum	nn (b) must equal F	orm 990, Part X, line 12, col.(B)) • • • • • • •			
Part VIII	Investments	- Program Related			
	Complete if t	he organization answered "Yes" on For	m 990, Part IV, line 1	1c. See Form 990, Part X, lir	1e 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. (Colum	nn (b) must equal F	Form 990, Part X, line 13, col. (B))			
Part IX	Other Asset	S			
	Complete if t	he organization answered "Yes" on For	m 990, Part IV, line 1	<u>1d. See Form 990, Part X, lir</u>	ne 15.
		(a) Description		(b) Book val	lue
(1)Securi	ty deposit				2,000
(2)					
(3)					

(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15 col. (B))	2,000

<b>otal.</b> (00	numin (D) musi	equal Form 990
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) Fede	ral income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Colu	mn (b) must equal Form 990, Part X, line 25 col. (B),	)

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....

Schedu	D (Form 990) 2023 New Alternatives for LGBT Homeless Youth Inc 27	7-2151000	Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per I	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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	
Part		er Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
C	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
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.

#### SCHEDULE O (Form 990)

#### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. 2023 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

#### New Alternatives for LGBT Homeless Youth Inc

Employer identification number 27-2151000

#### 01. Form 990 governing body review (Part VI, line 11)

Management and selected board members review the 990 and the related schedules prior to

submittal to the respective agencies.

02. Conflict of interest policy compliance (Part VI, line 12c)

All board members and employees are required to immediately disclose any relationship that

may potentially give rise to a conflict of interest.

03. CEO, executive director, top management comp (Part VI, line 15a)

Compensation and potential pay raises are reviewed and evaluated by the board and

management on an annual basis. Compensation levels and raises are determined by

considering industry averages and cost of living adjustments.

04. Other officer or key employee compensation (Part VI, line 15b

Compensation and potential pay raises are reviewed and evaluated by the board and

management on an annual basis. Compensation levels and raises are determined by

considering industry averages and cost of living adjustments.

05. Governing documents, etc, available to public (Part VI, line 19)

The financial statements are provided to the requesting party upon request. Governing

documents are also provided upon request. The federal form 990 is provided upon request

and is also made available on Guidestar.com, which is a website that makes available

nonprofit information.

06. Explanation of other changes in net assets or fund balances (Part XI, line 9)

Rounding difference.

CHAR500 Online For new annual filings, and amendments	e New York State Office of the Attorney General Charities Bureau - Registration Section 28 Liberty Street New York NY 10005						
Filing Type: ONew Fi	ling OAm	endment	Filing Year: 202	3	_		
General Information							
Current Organization Name	. New Alternatives	For LGBT Homeless Youth,	Inc. Updated Nam	۵.	N/A		
NY Registration Number:	43-10-68		Registration C		DUAL		
Organization Type:	Corporation	ı	EIN:		272151000		
Current Fiscal Year End:	12/31		Updated Fisca	Year End:	N/A		
Organization Email:	jeff@newal	ternativesnyc.org	Organization's		9174030113		
Tax Exempt Status: 501(c)(3)			Website:		www.newalternativesnyc.org		
Organization Address							
	-	Duin sins			NY State Address		
Mailing Addres 410 WEST 40TH STI NEW YORK NY 10018 UNITED STATES		410 WEST 40 [°] NEW YORK NY 10018 UNITED STAT	-	NA			
Primary Contact Information	on						
First Name: Jeff Phone: 9174030113	_	— Last Name: - — Email: -	Mummert jeff@newalternatives	— Intie: –	Treasurer		
Organization Type							
Type of IRS document filed	with IRS:	RS990 C	Organization Type: <u>F</u>	ublic			
Third Party Preparer	Informatio	n					
First Name: N/A		Last Name:	N/A	Title:	N/A		
Firm Name: N/A		Phone:		Email:			
Third Party Address		-					
Street: <u>N/A</u>							

City:	Ν/Α	State:	N/A
Zip:	Ν/Α	Country:	N/A

# **Registration Category**

- Does the organization conduct activity in New York State other than soliciting? This may include, but is not limited to, maintaining an office, having employees or staff, or running a program.
   Yes
- Does the organization have assets in New York State?
   Yes
   No
- 3. Is the organization incorporated or formed in New York State?
   Yes No
- 4. Has the organization received more than \$25,000 in total contributions from New York State residents, foundations, corporations or government agencies or other entities in the period covered by this filing?
   Yes O No
- 5. Does the organization plan to receive more than \$25,000 annually in total contributions from New York State residents,

foundations, corporations, government agencies or other entities?

⊙Yes ONo

6. Does the organization use a professional fundraiser or fundraising counsel?

OYes 

No

Based on your responses to the above questions, this organization's registration category remains as DUAL

# **Contribution Information**

1. Did the organization solicit or receive contributions during the fiscal year in New York State?

● Yes O No

3. Choose the total contributions in New York State this fiscal year: \$250,000-\$749,000

# **Annual Exemptions**

1. Were the total contributions from New York State, including residents, foundations, government agencies, etc. under \$25,000 during the fiscal year?

O Yes O No N/A

- 2. Did the organization use a professional fundraiser or fundraising counsel during the fiscal year? O Yes O No  $\,$  N/A
- 3. Were the organization's gross receipts under \$25,000 and the market value of its assets under \$25,000 during the fiscal year?

OYes 
No

Based on your responses to annual exemption questions, this organization is required to file under <u>DUAL</u> during this fiscal year.

Financial Information			
Type of IRS document filed with IRS	IRS990	Organization's total reven	ue: <u>441,779</u>
Organization's total contributions:	398,931	Organization's total asset	s: <u>N/A</u>
Organization's net assets:	853,196	_ Organization's total rever	nue N/A
Organization's total liabilities:	N/A	and contributions:	s/ N/A
Organization's total income:	N/A	<ul> <li>Organization's total asset worth:</li> </ul>	S/ <u>IV/A</u>
For this filing year, does your organ	ization plan to complete a	ny of the following with the I	New York State Charities Bureau
□Closing □ Withdrawing	Dissolving	lone	
Is this your final filing with New Yor	rk State? OYes C	ΟΝο Ν/Α	
Filing Information			
Did your organization use a profess	ional fundraiser or fundrai	ising counsel for fundraising	activity in New York State?
O _{Yes} O _{NO}			
General Informa Name of Firm: N/A		Description of Services	Description of Compensation N/A
	Number: <u>N/A</u>		
_	ract End: N/A		
Amount Paid: N/A	Phone : N/A		
Mailing Address: N/A			
Name of Firm: N/A		1/A	N/A
Type: <u>N/A</u> Registi			
Contract Start: <u>N/A</u> Contr			
Amount Paid: N/A	Phone : N/A		
Mailing Address: N/A			
Name of Firm: <u>N/A</u>	1	1/A	N/A
	ration ID: <u>N/A</u>		
	ract End: <u>N/A</u>		
Amount Paid: <u>N/A</u>	Phone : N/A		
Mailing Address: N/A			
Initiality Audi 255.			

# Did the organization receive government grants during this fiscal year?

### O Yes 💿 No

Government Grant Agency	Grant Amount
N/A	N/A

### Documents

Attached organization's required documents:

- ☑ IRS document
- Certified Public Accountant's Audit Report
- Certified Public Accountant's Review Report
- Complete Certificate of Amendment or other document amending the name
- Other documents

## Signatures

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

Role	First Name	Last Name	Email	
President	Andy	Humm	andyhumm@aol.com	
Treasurer	Jeff	Mummert	jeff@newalternatives	snyc.org
Signature of President	DocuSigned by: And African African	<b>`</b>	Date:	8/20/2024
Signature of Treasurer	— DocuSigned by: Jeff Mummert — 1550.6820030.6546.0		Date:	8/20/2024