2026
Accommodations Tax Funds Request Application

Organization Name: The Outside Foundation

Project/Event Name: Environmental Sustainability

Executive Summary

An ATAX Effectiveness Measurement form has been attached to this application.

The Outside Foundation (TOF) is seeking $72,000 in ATAX grant funding to expand our local environmental sustainability impact projects. We seek this funding to support our projects directed at preserving and protecting our local environment. We plan to enhance our educational outreach to tourists and visitors seeking to participate in any one of the numerous ecotourism projects we offer: (1) waterway, beach, and park clean ups, and annual #EARTHDAYHHI event, (2) an annual water festival, (3) our oyster shell recycling and bed restoration project, and (4) our multi-day Lowcountry Paddle Fest Event and Pinckney Island Wildlife Refuge Litter and Marine Debris sweep.

HHI prides itself in being a “world-class resort” with conservation written into it’s DNA. This nature-first mindset and emphasis on ecologically responsible development has drawn visitors and tourists to our beaches from all over the US and world for almost 70 years.“Eco-tourism” continues to be one of the fastest growing sectors in the travel industry. In 2014 the non-profit The Outside Foundation was created to continue, and expand, opportunities for children and their families to experience and enjoy nature, and to develop a sense of lasting environmental stewardship. TOF’s work directly enhances the visitor’s experience on this island by ensuring that our local waterways, beaches, and parks remain clean and free of litter, and by providing opportunities to engage in activities which directly protect and preserve our local environment. Our beach, park, and waterway clean ups, and #EARTHDAYHHI event, provide accessible and ideal opportunities for locals, tourists, and visitors of all ages to join in and make a difference in keeping our environment clean and protecting local wildlife. Our annual water festival was created to celebrate the deep respect locals and visitors alike have for the natural beauty of HHI and the common desire for sustainability of our pristine waterways and beaches. This year’s water festival welcomed 20 local non-profits and organizations whose work and missions are focused on environmental education and protection.

Our “Community-based Oyster Shell Recycling and Bed Restoration” project was created in 2018 to capture valuable shucked oyster shell, divert this shell away from our local landfill, and to use this shell to create “living shorelines” along HHI waterways. This first-ever project saw the establishment of a shell quarantine site and participation from 15 local restaurants. In 7 years we have collected 191 tons of shell, have 27 local restaurants participating, engaged over 1481volunteers to fill bags with shell, and partnered with the SCDNR to use nearly all of these bags to construct 34 oyster reefs along the shorelines of HHI. In 2018 we began to capture shell at the annual HHI Oyster Festival. For the past 7 festivals we have captured 20.2 tons of shucked shell for recycling, every bit of which would have ended up in the landfill. Now, this shell helps build new oyster reef habitat and stabilize our local shorelines. On April 22, 2025 we invited all local students, residents, tourists and visitors to participate in the third annual #EARTHDAYHHI. 354 volunteers participated in the litter sweep which covered all 12 miles of local beach and other natural spaces, collecting 1556.3 pounds of trash from over 20 locations on HHI.

In just 11 years TOF as made quite an impact. The programs we provide leadership to include: “Kids in Kayaks” - a kayak-based program for local middle schools (over 9044 local 7th graders have participated in this program), and the “Learn to Paddle” (kayaking and paddle boarding) programs (approximately 500 Boys & Girls Club members). During the 2024-25 school year The Outside Foundation offered every Beaufort County Public School 7th grader students in the Beaufort area, an opportunity to participate. We hosted 1105 students from 14 middle schools for the program last year.

Over the past 11 years we have hosted 112 beach, park, and waterway clean ups, with 3493 volunteers participating, and more than 15.3 tons of trash and marine debris cleaned up. Our 2025 Annual “Keep the Broad Creek Clean” Water Festival brought together 20 environmentally-focused organizations and non-profits for an afternoon of hands-on and interactive nature displays, recycling information, and a litter sweep of the park and Broad Creek shoreline. In keeping with our values this festival, as well as all events hosted by The Outside Foundation, are single-use plastic water bottle free. At this year’s water festival we proudly introduced the “Quench Buggy” a portable 300 gallon filtered, chilled hydration station made possible through multiple community partners. From September 5th through the 7th this year we will invite visitors and locals to participate in the 7th Annual ”Lowcountry Paddle Fest” event. Over the three day event we expect to welcome over 500 tourists and visitors to our island. On the final day we will partner with three other local environmentally-focused nonprofits, including US Fish & Wildlife, to remove marine debris and trash from Pinckney Island Wildlife Refuge, Haigh Landing, and the surrounding shorelines. In 2024, 102 volunteers helped remove 700 pounds of trash from the wildlife refuge and its shorelines.

Nature-loving visitors come back, year after year. Some choose to eventually live here. It is these very strong connections - to the pristine beaches, dolphin-filled waterways, clean water, and abundance of local seafood - that are the most threatened by increased development and tourism on the island. In order to sustain, and grow, the number of visitors to the island each year, as well as protect the environment they expect upon arrival, more emphasis must continue to be placed on environmental sustainability. The Town of HHI’s 2020-2040 “Our Plan” states that the environment and sustainability are the foundational values of our Island community, reminding all of us that ecotourism could be, and should be, the future of HHI tourism. TOF’s environmental sustainability impact programs are directed at protecting and preserving our local environment and uniquely aligned to deliver the Town of HHI’s “healthy, sustainable environment” vision. It is our goal to enhance the visitor experience to HHI by ensuring that our local waterways, beaches, and parks are free of litter. We also desire to be the means by which tourists, traveling to HHI for vacation with knowledge of the Island’s history of ecologically sensitive development, would be able to actively engage in nature-based sustainability-focused activities. These activities, in turn, benefit our local economy, serve to enhance protections of our wildlife, and improve the overall quality of life for locals. As our numbers of tourists has increased substantially over the past decade so has the amount trash and plastics on our beaches and along the banks of our waterways. The key to reversing this trend, we believe, is to enhance the visitor experience by creating a sense of “ownership.” People are less likely to litter on the beach if they understand how that litter adversely affects the wildlife that live there. As grassroots, community-based non-profit, The Outside Foundation is uniquely positioned to educate, involve, and empower locals and visitors, as well as our next generation of island environmental stewards, in programs which directly impact our Island’s environmental health in so many positive ways.

2026
Accommodations Tax Funds Request Application

Date Received: 09/04/2025	Time Received: 01:12 PM	By: Online Submittal

Applications will not be accepted if submitted after 4 pm on September 5, 2025

A. **SUMMARY OF GRANT REQUEST:**

ORGANIZATION NAME: The Outside Foundation

Project/Event Name: Environmental Sustainability

Contact Name: Dr. Jean Fruh Title: Executive Director

Address: 50 Shelter Cove Lane Suite H, Hilton Head Island, SC 29928

Email Address: jean@outsidefoundation.org Contact Phone: 304-642-1820

Event Date(s): January 1, 2026 Event Location(s): Hilton Head Island beaches, waterways and parks

Total Budget: $429,000.00 **Grant Requested:** $72,000.00

Provide a brief summary on the intended use of the grant and how the money would be used. *(100 words or less)*

The Outside Foundation's (TOF) programs directly impact the quality of a visitor's experience by ensuring clean waterways for kayaking, fishing, and boat-based ecotours. This grant would be used to support our efforts to sustain our local environment for the enjoyment of all who visit and who might choose to live here. With a mission to preserve and protect the local environment, TOF sponsors clean ups, an annal water festival, Paddle Festival event, and an oyster shell recycling program which provide participants of all ages with direct ways in which they can learn about, engage in, and help sustain our environment.

How does the organization/project/event either drive tourism to Hilton Head Island or enhance the visitor experience on Hilton Head Island? How is this impact being measured? *(100 words or less)*

TOF provides opportunities for people to become environmental stewards. Cleanups provide ideal opportunities for visitors to keep our environment clean and protect local wildlife. Our annual water festival was created to celebrate the deep respect locals and visitors alike have for the natural beauty of HHI and the common desire for sustainability of clean waterways. Our shell recycling program partners with 25 local restaurants to ensure sustainability of our oyster population. The Paddle Festival is a multiday event attacting competitors/visitors from the Southeast. Our impact is measured in the number of visitors who engage in any of these programs.

A. Total Number of Physical Tourists Served: 60262
A Tourist is considered a non-resident, traveling more than 50 miles to the Town of Hilton Head Island.

B. Total Number of Physical Visitors Served: 2209
A Visitor is considered a non-resident, who travels 50 miles or less to visit the Town of Hilton Head Island.

C. Total Number of Physical Residents Served: 3879
A Resident is considered any person who claims their property address within the limits of the Town of Hilton Head Island as their primary residence.

D. Total Number of Physical Patrons Served (A+B+C=D): 66350

How was the Number of visitors documented? *(250 words or less)*

2024-25 HHI Oyster Festivals ticket sales; 2025 HHI Seafood Festival - Friday ticket sales; attendance zip codes at annual water festival; electronic and paper sign-ins at beach, waterway, and park clean ups (including the 2025 #EARTHDAYHHI, Jimmy Buffett Day, Juneteenth events, and kayak-based litter sweeps); Naych and B'uhds event; electronic and paper sign-ins at shell bagging and oyster reef building events; attendance (via CRM database) at the 2025 Page Island Oyster Roast, and paddle.guru.com registrations and sign ins at 2024 Olukai Lowcountry Boil Paddle Battle events. The number of golfers who played the Harbortown Golf LInks in 2024, the number of participants in kayak, paddle board, and boat based tours departing Shelter Cove Marina on the Broad Creek. These totals do not include the number of competitors, visitors, and tourists who are scheduled to attend the 3 days of the 2025 Lowcountry Paddle Fest presented by OluKai (as of 9/1 150 participants are registered), and Pinckney Island Wildlife Refuge litter sweep scheduled for September 7.

B. **DESCRIPTION OF OPERATIONS:**

1. For state reporting purposes, give a brief description of the organization. *(250 words or less)*

The Outside Foundation (TOF) was formed in 2014 with a mission to get kids outside and to preserve and protect our local environment. Consistent with the guiding principles of its founding company, Outside Hilton Head, TOF seeks to provide to visitors and locals outdoor experiences that will have a positive impact by creating awareness, expanding knowledge, and developing responsible understanding of nature and the local environment. With the goal to foster the development of environmental stewardship TOF's focus is threefold: education, involvement, and empowerment. Our programs focus on our two most valuable resources: our children and our local environment. Our programs include: "Kids in Kayaks" with 7th graders, "Learn to Paddle" kayaking and paddle boarding and with the Boys & Girls Clubs, beach, park, and waterway cleanups, #EARTHDAYHHI, an annual water festival, and a "Community-based Oyster Shell Recycling and Bed Restoration" project. In just 11 short years we have provided envionmental immersion experiences for over 9044 local youth and engaged over 2975 volunteers to remove 15.3 tons of trash from our local parks, beaches and waterways. In just seven years our oyster shell recycling programs has partnered with 25 local restaurants, the HHI Oyster and Seafood Festivals, to capture 191 tons of shucked shell. 1481 volunters have filled over 8300 bags with shucked shell and, to date, and helped build 34 reef along the shorelines of HHI. Every one of our programs helps sustain the remarkable natural beauty that so many tourists and visitors travel to HHI to enjoy.

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2. Describe in detail how the requested grant funding would be used? *(250 words or less)*

The Outside Foundation is requesting $**72000** in The Town of HHI ATAX funds to be used for:

Category 1 Destination Advertising/Promotion $8500

General Marketing $8500 including $3500 for website enhancements; $1500 for volunteer database management; $3500 for marketing and social media staffing needs

Category 2 Tourism Related Events $35500

Beach/Park/Kayak Based Cleanups/#EARTHDAYHHI $8000 $1000 Print Advertising $3000 Digital Magazine Advertising $2000 Social Media Advertising $2000 TOF Marketing/Social Media Manager Compensation

Annual Keep the Broad Creek Clean Water Festival $8000 $500 Print Advertising $3000 Digital Magazine Advertising $2500 Social Media Advertising $1500 TOF Marketing/Social Media Manager Compensation

2026 Paddle Fest event $18000 $9000 out-of-market digital media buys; $5000 - social media marketing; $2000 event signage and local marketing materials; $2000 event website and graphic design

Continuing contract for online volunteer and email management $1500 directed at improved recruiting and commincating with regular and new volunteers for oyster shell recycling and reef building engagement and education.

Category 6 Waterfront Erosion/Control/Repair: Funds would be used to support and grow our community-based oyster shell recycling and bed restoration project allowing the program to increase the amount of shell that can be captured from local restaurants and oyster roasts. **$28000**

Community-based Oyster Shell Recycling and Bed Restoration project $9,000 $2000 Print Advertising; $2500 Digital Magazine Adverstising; $2000 Social Media Advertising; $2500 Marketing/Social Media Manager Compensation

Community-based Oyster Shell Recycling and Bed Restoration $19000 shell capture and transport

3. What impact would partial funding have on the activities, if full funding were not received? What would the organization change to account for partial funding? *(100 words or less)*

It is our goal to be the means by which visitors can actively engage in activities which promote environmental sustainability. One of the greatest challenges TOF faces as a small non-profit is the ability to reach a large audience. Reduced funding limits our ability to get our message out.

Kayaking, fishing, and boat-based eco tours are very popular activities for visitors as our water is clean and teaming with wildlife. Partial funding would greatly reduce the impact our oyster shell recycling program ("living shorelines") has on shoreline stabilization, sustaining the population of local oysters, creating habitat, and keeping our water clean.

4. What is expected economic impact and benefit to the Island's tourism? *(100 words or less)*

Accoring to survey research by the HHI Chamber of Commerce, nature-based tours, bicycling, kayaking, paddleboarding, fishing, boat-based ecotours, and access to world-class beaches are some of the most popular reasons visitors and tourists choose HHI and keep returning year after year. In order to sustain a healthy environment for these activities more support must be provided to those activities which directly impact enviromental sustainability. 25 local seafood restaurants, including those within the SERG and CRAB groups, have partnered with us for shell recycling through a mutual understanding of oyster reef as the keystone of the local seafood industry.

5. In order to comply with the State's Tourism Expenditure Reveiw Committee annual reporting requirements, **please classify your current grant request into the following authorized categories:**

1 - Destination Advertising/Promotion *Advertising and promotion of tourism so as to develop and increase tourist attendence through the generation of publicity.*	12 %
2 - Tourism-Related Events *Promotion of the arts and cultural events.*	49 %
3 - Tourism-Related Facilities *Construction, maintenance and operation of facilities for civic and cultural activities including construction and maintenance of access and other nearby roads and utilities for the facilities.*	0 %
4 - Tourism-Related Public Services *The criminal justice system, law enforcement, fire protection, solid waste collection and health facilities when required to serve tourists and tourist facilities. This is based on the estimated percentage of costs directly attributed to tourist. Also includes public facilities such as restrooms, dressing rooms, parks and parking lots.*	0 %
5 - Tourist Public Transportation *Tourist shuttle transportation.*	0 %
6 - Waterfront Erosion/Control/Repair *Control and repair of waterfront erosion.*	39 %
7 - Operation of Visitor Information Centers *Operating visitor information centers.*	0 %
Total:	**100** %

6. If not covered elsewhere in the application, please describe (a) how the organization will collaborate with other organizations to enhance tourism efforts, and (b) provide a venue or service not otherwise available to visitors to the Town of Hilton Head Island. *(250 words or less)*

Much of the success of The Outside Foundation, as a small grassroots non-profit, can be directly attributed to the numerous partnerships formed over the past 11 years.

For our litter sweeps we partner with Beaufort County Public Works, Towns of Bluffton and HHI, HHI Chamber of Commerce, Outside Brands, Palmetto Pride, SC Aquarium, US Fish and Wildlife, and "Turtle Trackers," as well as numerous local businesses. For our "plogging" (jog and pick up) we partner with Palmetto Running Company to host beach and park clean ups. Our 2025 #EARTHDAYHHI event gathered 354 island residents, students, teachers, service groups, and tourists to clean up 12 miles of beachfront and other natural areas. No other groups on HHI conduct as many regular litter sweeps on an annual basis.

Our annual water festival happens with the participation of over 20 local organizations, all focused on protecting our local environment and education visitors and locals about our wildlife. This summer we partnered with Island Rec to provide even more fun for visitor families through Summer Jams and fireworks. We are the only educational water festival event on HHI.

Our oyster shell recycling and reef building program makes use of a readily available natural resource, recycled oyster shells, to construct an ongoing series of reefs along our local shorelines. These reefs would not exist, and almost 200 tons of shucked shell would have ended up in the landfill, if not for our program. The Town of Hilton Head, residents and visitors, benefit tremondously from this ecologically important program.

7. Additional comments. *(250 words or less)*

To the best of our knowledge no other groups here on HHI are regularily conducting as many beach, park, and kayak-based waterway clean ups as we do, involving over 2410 volunteers across a span of 11 years to remove 15.3 tons of trash from the local environment. Our annual water festival is the only event of it's kind here on HHI and in 2025 attracted over 500 atttendees. This past April for #EARTHDAYHHI we organized an island-wide litter sweep with 354 volunteers participating. Our "Oyster Shell Recycling and Bed Restoration" program has diverted 191 tons of shell from the local landfill, every bit of the shell staying right here on HHI to build reef. At the 2024-25 HHI Oyster and Seafood Festivals we captured 6.2 tons of shell. Our program has received attention from the SC Department of Natural Resources and the South Atlantic Salt Marsh Iniative as a "model" community-based program. We engage locals and visitors, over 1497 to date, in both bagging and reef building events. We have constructed 34 reef along the HHI shorelines. This past July we added 500 more shell bags, and 1500 Spatina plants, along the 18th fairway of Harbour Town Golf Links adding to the 6-reef series. The oyster shell recycling project creates "living shorelines" through investment in nature-based infrastructure - our very own recycled oyster shells. As such, these reef will greatly decrease the amount of rock needed to be purchased to stabilize the shorelines. This in turn saves tax payers money.

C. **FUNDING:**

1. Please describe how the organization is currently funded. *(100 words or less)*

The Outside Foundation receives funding from local, Outdoor Industry, HHI and Bluffton Community grants, Environmentally-focused Organizations, and Government Grants. We host two major fundraisers each year, The Page Island Oyster Roast and the Paddle Fest event presented by OluKai, each in support of our "Kids in Kayaks" and "Learn to Paddle" scholarship funds, and our "Community-based Oyster Shell Recycling and Bed Restoration" program. We receive individual and corporate donations, and raise money through cash donation boxes and hat, refillable bottle, and tee shirt sales.

2. Please also estimate, as a percentage, the source of the organization's total annual funding.

13	Government Sources	56	Private Contributions, Donations and Grants
15	Corporate Support, Sponsors	4	Membership, Dues, Subscriptions
12	Ticket Sales, or Sales and Services	0	Other

3. Has the organization requested other ATAX or any other funding from other public sources or organizations?

   Yes **X** No ___

   If so, please list top 3 sources and amounts.

   Beaufort County Public Works grant - kayak-based litter sweeps $1,000.00

D. **FINANCIAL INFORMATION:**

Fiscal Year Disclosure: Start Month: **January 2024** End Month: **December 2024**

Financial Statement Requirements:

1. The upcoming fiscal year's **operating budget** for the organization.

   Budget Provided: **Yes**

2. The previous two fiscal years and current year-to-date **profit and loss reports** for the organization.

   Current fiscal year Profit Loss Report Provided: Yes

   Previous fiscal year Profit Loss Reports Provided:

   2023- Previous FY 1
   2022- Previous FY 2
   2024- Previous FY 1

3. The previous two fiscal years and current year-to-date **balance sheets**.

   Current fiscal year Balance Sheet Provided: Yes

   Previous fiscal year Balanace Sheets Provided:

   2023 - Previous FY 1

   2023 - Previous FY 1

2024 - Previous FY 2

2023 - Previous FY 1

2024 - Previous FY 2

4. The previous two years and current year **IRS Form 990 or 990T**.

   Current year IRS Form 990 or 990T Provided: Yes

   Previous IRS Form 990 or 990T Years Provided:

   2021 - Previous FY 1

   2022 - Previous FY 2

   2023 - Previous FY 1

   2022 - Previous FY 2

   2023 - Previous FY 1

   2024 - Previous FY 2

E. **FINANCIAL GUARANTEES AND PROCEDURES:**

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1. Provide a copy of the **official minutes** wherein the organization approves the submission of this application.

   An official set of minutes have been attached to this application.

2. Indicate whether your organiztion has procurement guidelines, which are utilized and followed in the expenditue of ATAX grant funds.
   - ○ Utilize and follow organization's own procurement guidelines
   - ◉ Our organization does not have or follow procurement guidelines

F. **MEASURING EFFECTIVENESS:**

If you received 2024 or 2025 HHI ATAX funds

1. List any ATAX award amounts received in 2024 and/or 2025.

2023	$59,480.00	Environmental Sustainability
2024	$72,000.00	Environmental Sustainability
2025	$72,000.00	Environmental Sustainability

2. How were the ATAX fundsused? To what extent were the objectives achieved? The ATAX Effectiveness Measurement spreadsheet available in the application portal will show the numerics. Use the space below for verbal comments. *(200 words or less)*

Of the $72000 approved we have spent $40310.71 thru July 31 2025

General Marketing/Social Media/Volunteer Database/Website Overhaul $12355.20

overall reach in 2025 increased (+225%) for Facebook and (13.7%) for Instagram; website traffic increased from 8982 to 9562 sessions

Beach, Park, Waterway Clean Ups, #EARTHDAYHHI - 6 events, 565 volunteers (86 tourists, 115 visitors, 364 local) removed 1.1 tons of litter. **Dest Advert/Promo/Marketing $3834.57**

Annual Keep the Broad Creek Clean Water Festival and Litter Sweep - Shelter Cove Marina/Broad Creek litter sweep 18 volunteers removed 13 pounds trash. 500 Water Festival attendees (300 tourists, 98 visitors, 102 local) **Dest Advert/Promo/Marketing $1500**

Oyster Shell Recycling Project - Page Island Oyster Roast Event - February 23, 2025 267 attendees (25 tourists, 102 visitors, 140 local) 500# shell captured and recycled. **Dest Avert/Promo/Marketing $12294.94**

2025 Paddle Fest Event Dest Avert/Promo/Marketing $4950 (2024 Paddle Battle 268 attendees, 168 tourists, 34 visitors, 66 local)

Community-based Oyster Shell Recycling and Bed Restoration 18 tons of shell captured, 2077 shell bags filled, 7 new reefs **$5376**

3. What impact did this have on the success of the organization/event and how did it benefit the community? *(200 words or less)*

Every program The Outside Foundation sponsors has a direct impact on the overall health of our surrounding environment and, as such, enhances the visitor's experience. Our beach, park, and waterway cleanups, and #EARTHDAYHHI event, provide accessible opportunies for locals and visitors of all ages to engage in tangible experiences to protect and preserve our local environment. According to survey reseach by the HHI Chamber of Commerce several of the top reasons visitors and tourists choose Hilton Head Island as a vacation destination is to enjoy the pristine beaches, clean waters, and outdoor activities. Our oyster shell recycling program extends the SC Department of Natural Resources work into our community and has the potential to significantly impact sustainability of our local oyster population, stabilization of our shorelines, and clean water to be enjoyed by all. Our oyster shell program is supported by two of the largest resturant groups on the island: SERG and CRAB. Our annual water festival attracts locals and visitors and is the first of it's kind on HHI. The festival is supported by over 20 environmentally focused non-profits and organizations, each providing hands-on educational exhibits for attendees of all ages to enjoy and learn from.

4. How does the organization measure the effectiveness of both the overall activity and of individual programs? *(200 words or less)*

For all of our beach, park, and waterway cleanups, and #EARTHDAYHHI event, we electonically register volunteers, event hours, and record how much and what type of trash is collected. We weigh all our trash and use the Litter-Free Digital Journal app in partnership with the South Carolina Aquarium.

For our annual "Keep the Broad Creek Clean" water festival and litter sweep we register as many attendees as possible and record zip codes. In keeping with our "no single-use plastics" we provide a free refillable water bottle to all attendees who register.

For our Oyster Shell Recycling and Bed Restoration Program, we partner with i2 Recycle for shell pickup at restaurants. The shell is weighed upon pickup and weights are recorded for each restaurant. TOF receives a summary report. Currently, 25 seafood resturants are enrolled for weekly pickups, We also capture shell at 5-10 local oyster roasts each year. From 2018-2024 in partnership with Island Rec, we have captured 29.95 tons of shucked shell from the HHI Oyster Festivals (4750 attendees in 2024).

For our "Paddle Fest" three day event we will have registration information on all racers, electronic volunteer registrations, and a sign-in sheet for all spectators and additional event participants.

G. **EXECUTIVE SUMMARY**

Provide an executive summary using the "ATAX Effectiveness Measurement" form provided via the link on the left, or by utilizing the text area provided below to report uses of the organization's prior ATAX grant, if applicable. If you create your own format, please refer to the "ATAX Effectiveness Measurement" form and use the criteria as a guideline in developing your executive summary below. *(1300 words or less)*

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Over the past 11 years we have hosted 112 beach, park, and waterway clean ups, with 3493 volunteers participating, and more than 15.3 tons of trash and marine debris cleaned up. Our

2025 Annual “Keep the Broad Creek Clean” Water Festival brought together 20 environmentally-focused organizations and non-profits for an afternoon of hands-on and interactive nature displays, recycling information, and a litter sweep of the park and Broad Creek shoreline. In keeping with our values this festival, as well as all events hosted by The Outside Foundation, are single-use plastic water bottle free. At this year’s water festival we proudly introduced the “Quench Buggy” a portable 300 gallon filtered, chilled hydration station made possible through multiple community partners. From September 5th through the 7th this year we will invite visitors and locals to participate in the 7th Annual ”Lowcountry Paddle Fest” event. Over the three day event we expect to welcome over 500 tourists and visitors to our island. On the final day we will partner with three other local environmentally-focused nonprofits, including US Fish & Wildlife, to remove marine debris and trash from Pinckney Island Wildlife Refuge, Haigh Landing, and the surrounding shorelines. In 2024, 102 volunteers helped remove 700 pounds of trash from the wildlife refuge and its shorelines.

Nature-loving visitors come back, year after year. Some choose to eventually live here. It is these very strong connections - to the pristine beaches, dolphin-filled waterways, clean water, and abundance of local seafood - that are the most threatened by increased development and tourism on the island. In order to sustain, and grow, the number of visitors to the island each year, as well as protect the environment they expect upon arrival, more emphasis must continue to be placed on environmental sustainability. The Town of HHI’s 2020-2040 “Our Plan” states that the environment and sustainability are the foundational values of our Island community, reminding all of us that ecotourism could be, and should be, the future of HHI tourism. TOF’s environmental sustainability impact programs are directed at protecting and preserving our local environment and uniquely aligned to deliver the Town of HHI’s “healthy, sustainable environment” vision. It is our goal to enhance the visitor experience to HHI by ensuring that our local waterways, beaches, and parks are free of litter. We also desire to be the means by which tourists, traveling to HHI for vacation with knowledge of the Island’s history of ecologically sensitive development, would be able to actively engage in nature-based sustainability-focused activities. These activities, in turn, benefit our local economy, serve to enhance protections of our wildlife, and improve the overall quality of life for locals. As our numbers of tourists has increased substantially over the past decade so has the amount trash and plastics on our beaches and along the banks of our waterways. The key to reversing this trend, we believe, is to enhance the visitor experience by creating a sense of “ownership.” People are less likely to litter on the beach if they understand how that litter adversely affects the wildlife that live there. As grassroots, community-based non-profit, The Outside Foundation is uniquely positioned to educate, involve, and empower locals and visitors, as well as our next generation of island environmental stewards, in programs which directly impact our Island’s environmental health in so many positive ways.

Signature: Jean Fruh

Title/Position: Executive Director

Mailing Address: 50 Shelter Cove Lane Suite H, Hilton Head Island, SC 29928

Email Address: jean@outsidefoundation.org

Office Phone Number: 304-642-1820

Home Phone Number: 304-642-1820

This document was exported from Numbers. Each table was converte
objects on each Numbers sheet were placed on separate worksheets.
calculations may differ in Excel.

Numbers Sheet Name	Numbers Table Name
EXECUTIVE SUMMARY	
	Table 1
Sheet2	
	Table 1
Sheet3	
	Table 1

d to an Excel worksheet. All other
Please be aware that formula

Excel Worksheet Name

EXECUTIVE SUMMARY
Sheet2
Sheet3

Please refer to the SAMPLE ATAX Effectiveness Measurement Form for examples. When completing this form, please expand, contract, or add to the sections as needed (but contain the form to a total of approximately 2 pages). You may choose to use your own format instead of this form, and if doing so, please use the criteria below as a guideline. Regardless of format, ***each applicant should choose how they measure degree of success. Applicants need to explain why this is an effective measurement technique that reflects results and how that relates to the objective.***

TOPIC	THE PLAN	BUDGET	ACTUAL SPENT	RESULTS ***When possible, provide planned results vs. actual results, and/or current year vs. prior year results*** .
Category 1: Destination Advertising/Promotion				
General Marketing	Increase messaging across various platforms for donor, volunteers, and general community engagement	$ 8,500.00		Facebook: 94 new followers (80.8% increase), 164.9K views (144% increase), reach 54.8K (225% increase), 2.1K content interaction (38.5 increase), and 51K 3 second views (194 increase)
Social Media	To create instagram and Facebook posts to record program success, educate and inform community members, solicit volunteers and donors		$ 4,900.00	Instagram: 54,846 views in 2025 so far, 13,423 accounts reach (13.7 increase), 1758 interactions, and 2,012 followers (3.4% increase) - Instagram has changed reporting metrics so it is difficult to all comparisons from 2024 and thru 3 years
				outsidefoundation.org site sessions 9562 (last year 8982); tourist sessions 7261; unique visitors 6797; tourist unique visitor 5243 earthdayhhi.com site sessions 1528 (last year 764); tourist sessions 1263; unique visitors 1284; tourist unique visitor 1072
Marketing	Increase community awareness of mission and programs		$ 7,455.20	lowcountrypaddle.com site sessions 1528 (last year 1605); tourist sessions 1401; unique visitors 1326; tourist unique visitor 1000
Volunteer database	Electronic database for volunteer sign up and waivers			817 volunteers registered on the Boomerang CRM volunteer database.
Total		$ 8,500.00	$ 12,355.20	

Category 2: Tourism Related Events				
Beach/Park/Kayak based clean ups #EARTHDAYHHI	To solicit local, visitors, and tourists participation in litter sweeps	$ 36,000.00	$ 3,834.57	Print media - litter sweeps, World Oceans Month - single-use plastic free events, #EARTHDAYHHI, Keep the Broad Creek Clean Water Festival - soliciting volunteers and
				Digital media - litter sweeps, World Oceans Month - single-use plastic free events, #EARTHDAYHHI, Keep the Broad Creek Clean Water Festival - soliciting volunteers and attendees
	To increase attendance by tourists and visitors at a HHI-based water festival			Promotional materials for litter sweeps, World Oceans Month - single-use plastic free events, #EARTHDAYHHI, Keep the Broad Creek Clean Water Festival
Keep the Broad Creek Clean Water Festival	To increase attendance by tourists and visitors at a HHI-based water festival		$ 1,500.00	Print and digital media advertising
2025 Paddle Fest event	To reach tourists and visitors interested in paddle board event participation Out-of-market ad buys		$ 4,950.00	Firetower Media will provide a live feed across their national network of the Paddle Fest races; photos and video capture will be provided to TOF for next years race
Oyster Shell Recycling and Reef Building Initiative	Community education and volunteer engagement in oyster shell recycling and reef building		$ 12,294.94	Print and digital media advertising/social media posts/promotion materials to inform community and solicit volunteers; 267 attended for the Page Island Oyster Roast (102 visitors, 25 tourists, 140 residents)
Total		$ 36,000.00	$ 22,579.51	

Category 6: Waterfront Erosion/Control/Repair				
		$ 27,500.00		
Shell transport	Capture and transport shucked shell from HHI restaurants to shell Quarantine bin for recycling		$ 5,376.00	To increase the amount of shucked oyster shell captured at local restaurants and events for recycling and use in creating new oyster reefs - 41 tons collected in 2024, 19 tons YTD 2025, 7 new oyster reefs built for a total of 34 in
Total		$ 27,500.00	$ 5,376.00	

Total		$ -	$ -	

Total		$ -	$ -	

Total Budget to Actual		$ 72,000.00	$ 40,310.71

THE Outside FOUNDATION

Become a Friend of the Foundation!

Join our mailing list to get updates on events, volunteer opportunities
And our work in the community.

Name	Email Address	Zip Code

The Outside Foundation
Board of Directors Meeting - Minutes
August 21, 2025   5:30 pm

10 Hospital Center Commons Suite 400/Google Meet

Attendees:

Mr. Ron Miele, Chair

Mr. Mike Overton, Vice-Chair (GMeet)

Mr. Brian Kinard, Treasurer

Dr. John Batson (GMeet)

Mr. John Taylor

Mr. Michael Cerrati, Secretary (GMeet)

Mr. Ted Neely (GMeet)

Dr. Jean Fruh, Executive Director

Absent:

Melissa Krauss

Guest:

Ms. Mary Heitman (Dev Director) (GMeet)

1. Call to order - Board Chair R Miele called the meeting to order 5:33pm and welcomed members of the TOF BOD.

2. Resolution: Approval of the minutes from April 24, 2025 meeting (B. Kinard, J. Taylor, second) - approved without corrections.

3. Reports from Committees:

Governance Committee - M Cerrati, Chair

M Cerrati, Chair of the Governance Committee, provided BOD members with an update on the committee's progress toward prioritizing those tasks as outlined in the Board's Strategic Planning workshop last Fall:

- Contract and job description reviews have been completed for Madeleine Cox, Marketing manager. Next reviews will be: Susan Dee, "Kids in

Kayaks" Program Manager and Jocelyn Kern, Oyster Shell Recycling and Reef Build Program Manager. Abby Wirth, Litter Program Manager and Social Media Manager and Mary Heitman, Development Director will undergo reviews in early 2026.

- TOF Executive Director, J Fruh, will also undergo a comprehensive review of her job description prior to January 1, 2026

Chair R. Miele reminded the BOD that job description reviews are the first step in the succession planning for all contractor and employee positions.

- Committee Chair M Cerrati also mentioned that the goal to have MOUs (Memorandum of Understanding) in place for all outfitter companies contracted to provide kayaking services during the "Kids in Kayaks" program were recommended by Legal Counsel Suzy Cole. These documents provide clarity concerning responsibilities of those parties hosting the "Kids in Kayaks" programs. ED J Fruh declared that MOUs have been reviewed and signed by Coastal Expeditions and Outside Brands (2025-26).

- Contractors vs Part-time employee status. One of the outcomes of the Fall 2024 BOD retreat was a commitment to move toward the part time employee status for all three program manager positions. Chair R Miele asked ED J Fruh to prepare a budget cost differential for this transition.

Chair R Miele also reiterated the importance of all BOD members and TOF contractors reviewing and signing an annual Conflict of Interest form. This form was recently updated by Legal Counsel Suzy Cole. B Kinard offered to share the form with all BOD members thru DocuSign.

M. Heitman, Development Director provided an update on the Advisory Council. Mary reported that there are 5 members and that not all members were able to attend the first meeting. She is in the process of reaching out to each member for a September meeting to review expectations and assign responsibilities. Discussion followed as to whether all BOD members should be present at this meeting and if the AC meeting should occur before or after the BOD Q4 meeting in October.

R Miele restated the importance of clear expectations for members the Advisory Council - with fundraising and community connections being the most important. "Here's how you can help" approach. M Overton stated that making the needs of TOF clear to the Advisory Council is very important.

T Neely asked what the optimal size for the Advisor Council membership is? M Heitman replied that 10 was the number agreed upon and that there are currently

5 members. She is considering three other candidates based on their support for TOF, community connections, and fundraising capabilities.

M Heitman stated that she is currently reaching out to each Advisory Council member with sponsorship information and important calendar dates for TOF events.

J Batson expressed concern that when all these meetings take place with AC members that a sponsorship packet specific to the 2026 Paddle Fest be ready to distribute. ED J Fruh assured Dr Batson that both the overall 2026 Sponsorship Packet and the Paddle Fest Sponsorship Packet would be ready within the next few weeks. M Heitman agreed and stated she is currently working on this.

Finance Committee - B. Kinard, Chair

Committee Chair B Kinard reviewed TOF's 2Q Financial statements, including the YTD P&L Statement. Committee member J Taylor reported the year over year comparison revealed total revenues were up 11%. Costs were up as well (16%) likely due to program area growth, contractor costs, and increased Executive Director salary. J Taylor stated that overall the balance sheet is healthy and he sees no problems.

B Kinard presented and reviewed the proposed 2026 Budget and discussion followed. No major issues were highlighted.

Proposal: Approval of the 2026 Budget.

A motion was made (B Kinard, R Miele, second) to approve the high level 2026 Budget as presented. The vote for approval was unanimous.

M Heitman provided an update on fundraising. We are $67K short of our goal for 2025. With the absence of a planned Fall 2025 major fundraising event at Palmetto Bluff (as originally planned) Mary stated that several smaller events are being planned both in Palmetto Bluff at a private home (October 9th) and another in Bluffton. The Women's Golf Association of HH has named TOF as their Charitable beneficiary for the September 17 tournament.

Additionally, Mary stated that she and ED J Fruh have increased the number of grant applications filed and will continue to pursue larger, capacity-building grants through the Community Foundation of the Lowcountry and TD Bank.

Finally, M Heitman will take a close look at what went well this year for fundraising and ways in which we can increase our on-line giving. M Overton had made the suggestion that we reach out to local wealth managers with information on the mission, programs, and impact of TOF so that they might in turn recommend to their clients with environmental interests donations through donor-advised funds, charitable trusts, and the like. M Heitman will immediately follow up on this recommendation.

Ed J Fruh announced plans for the annual Donor Thank You event. This year's event will be held at the SC Yacht Club and we will invite 70 guests. In addition to donors special guests will be included and J Fruh is arranging for a speaker to provide an update on Shoreline Resiliency/Living Shorelines Projects in SC.
J Fruh has asked BOD members to choose some best dates for October and she is meeting with the SCYC Event Planner on Aug 22.

4. Old Business

Discussion of the upcoming announcement and launch of the Endowment Fund was next. R Miele asked M Heitman to distribute the most recent document with his comments to all BOD members. M Heitman indicated that she had two remaining questions for E Rooney at the Community Foundation. Ed J Fruh stated that announcing the new Fund was a priority for the Donor Thank You event to be held in October.

J Batson, Race Director for the upcoming Lowcountry Paddle Fest, announced that 140 racers have registered so far, slightly down from last year's USA SUP Nationals, but still very close to the goal of 150 racers. The split of revenue between The Outside Foundation and Island Rec remains unclear at this point. Sources of event revenue include: racer registrations, sponsorships, food vendors, donations, merchandise sales, and kids activities ticket sales.

5. New Business

Chair R Miele provided an update on the planning for a “Music with Friends” fundraiser event at Palmetto Bluff. While this is an already established fundraiser event (with the PB Conservancy benefiting in the past) the estimated dollar amount (percentage of ticket sales) that will actually be donated to TOF remains unclear. R Miele will meet with event founder Steve Richards in a few weeks to attempt to clarify this. Mention of a “nominal” contribution made by the event coordinators at the last planning meeting needs to be discussed.

Chair Miele announced that John Oates has been signed to head up the event, set to take place on May 18, 2026 at Palmetto Bluff.

Tickets to a series of additional “Music with Friends” events will be made available to all Outside Foundation donors above the $300 annual contribution level.

M Overton suggested that to enhance donations, Outside Brands could offer to host musician John Oates on a boat tour of the low country salt marsh.

6. Executive Director’s Report

ED J Fruh presented the 2026 ATAX application and reviewed the highlights of the application including funding categories and projected expenses. She stated that next year’s application is very similar to the 2025 application. Use of this year’s ATAX funding continues to go smoothly in support of TOF’s work to preserve and protect Hilton Head Island’s natural beauty. TOF’s programs enhance both resident’s and visitor’s experience through shoreline restoration, salt marsh ecosystem enhancement and protection, litter sweeps, and hands on engagement opportunities for volunteers of all ages.

Proposal: Approval of the 2026 ATAX application

B Kinard (J Taylor, second) made a motion to approve the 2026 ATAX application. The vote for approval was unanimous.

Ed J Fruh provided an update on grants and donations, including carry-over funding from 2024 and grants to be submitted this Spring.

Program Update:

1. **<u>Kids in Kayaks</u> Fall of 2025:**

    - **35 days of programming (so far)**
    - **8 public, 1 Charter, 1 private**
    - **3 locations, 2 Assistant Program Managers hired**
    - **New: phytoplankton microscope with digital screen**

2. **<u>Oyster Shell Bagging/Reef builds 2025:</u>**

    - **18 tons of shell (from restaurants) as of 7/1**
    - **24 restaurants, 15 on HHI**
    - **12 bagging sessions, 236 vols**
    - **7 reef builds, 144 vols**
    - **Beaufort Oyster Fest 1.5 tons**
    - **HHI Oyster Fest (Nov 2024) 5.5 tons**
    - **HHI Seafood Fest 1 ton**
    - **Estimate for smaller events 3 tons**

    7 reef builds this summer: May River (PB) + 1500 plants, Haig Pt Daufuskie; Broad Creek - 3, Skull Creek, Harbour Town + 1500 plants

    - **Coca-Cola Circular Solutions - truck will tip out for more accurate totals (i2 Recycle, Arbor Nature)**

3. **<u>Litter/#EARTHDAYHHI</u>**

    - **6 sweeps so far, 5+ to go**
    - **# of trash captured 2204.3 (1.1 tons)**
    - **Volunteers 565+**
    - **#EARTHDAYHHI - 26 groups across the Island, 6 schools (200+ kids)**
    - **@Coligny - 212# trash, 56# recyclables, 72 volunteers, coverage by WSAV, partnership with Town of HHI (19 volunteers), 336 plastic straws in just 2 hours**
    - **Aug 30 Latitude Margaritaville “Jimmy Buffett” Day - Burke’s Beach/Chaplin Park 9-10am**

- **SC Aquarium - Litter Data program restarts 8/30**

4. "Keep the Broad Creek Water Festival" - in partnership with Island Rec "Summer Jams" and Fireworks night. Held on July 15th

- **500+ attendees**
- **16 non-profits, organizations**
- **Quench Buggy launch with media coverage**

Upcoming events:

Sept 5-7 **2025 Paddle Fest in partnership with Island Rec - Pint Night and racer packet pick up is hosted at the Outside Brands store 4:30-7:30 on Friday Sept 5**

full schedule of events is posted on www.paddleguru.com - "Lowcountry Paddle Fest presented by OluKai"

Sept 7 **8-10am Pinckney Island Wildlife Refuge litter sweep**

Sept 20 **May River Clean Up/TOF & Hearts of PB partner for Palmetto Bluff sweep**

Oct 16, 23 **ATAX hearings (I'll let you know our day and time slot)**

Nov 9 **Kayak-based clean up of the Broad Creek from Shelter Cove Marina**

Upcoming meeting dates:

- 4Q TOF BOD meeting: October 23, 2025
- Governance Committee: October 7
- Finance Committee: October 7

7. Adjournment - The meeting was adjourned at 7:06pm (R. Miele, J. Taylor)

Respectfully submitted - M. Cerrati, Secretary

This document was exported from Numbers. Each table was converted to an Excel worksheet. All other objects on each Numbers sheet were placed on separate worksheets. Please be aware that formula calculations may differ in Excel.

Numbers Sheet Name	Numbers Table Name	Excel Worksheet Name
Sheet 1		
	TOF 2026 Projected Budget	Sheet 1 - TOF 2026 Projected Bu
Sheet 2		
	Table 1	Sheet 2

TOF 2026 Projected Budget		
Acct Code		
	REVENUE	
4022	Grants	90,000
	Government Grants	73,000
4023	Donations	30,000
	Event & Program Sponsorships	50,000
	Hat/Water Bottles/Tee Shirt sales	3000
	Annual Memberships/Friends of the Foundation	40,000
	2026 Major Donor Events	40,000
	Annual Online Giving	20,000
	3rd Party Beneficiary events	15,000
	Fundraiser events	68,000
		429,000
	REVENUE TOTAL	
	EXPENSES	
5010	Advertising and Promotion	40,000
5030	Bank Service Charges	25
5040	Contract Labor	119,400.00
5070	Dues and Licenses	1200
5077	Event Expenses	45,000.00
5078	Fundraising Expense	3500
5080	Insurance	15,000.00
5107	Meeting Expenses	1000
5110	Printing - General	500
5120	Office Supplies	800
5140	Professional Services	8000
5145	Program Expenses	90,000
	“Kids in Kayaks”	
	Oyster Shell Recycling and Reef Building	
	#EARTHDAYHHI/LItter Sweeps	
5150	Postage & Shipping	125
5152	General Recycling - String Lights	300
5160	Public Storage x 2 units	5020
5200	Salaries - Executive Director	90,000
5235	Taxes - Property - Beaufort County	400
5260	Travel - Mileage	2500

5265	Uniform Expense	0
6600	Payroll Expenses	4500
5300	Federal Taxes - 941	800
9710	Expense - other/gifts	500
	TOTAL EXPENSE	428,570

Table 1

The Outside Foundation

Profit Loss

January - June, 2025

	TOTAL
Revenue	
4022 Grants Received	5,000.00
4022-1 Organizations	58,550.00
Total 4022 Grants Received	**63,550.00**
4022-2a Town of Hilton Head	18,716.57
4022-2d Beaufort Cty/Palmetto Pride	500.00
4023 Donations Received	36,442.50
4023-1 Sponsorships	15,000.00
4023-1a Page Island	129.37
4023-1c Kids in Kayaks	20,050.00
Total 4023-1 Sponsorships	**35,179.37**
4023-2 Retail - Logo Items	907.43
4023-3 Memberships - Annual	3,000.00
4023-3b $100 for $100	520.67
Total 4023-3 Memberships - Annual	**3,520.67**
4023-4 Online Donation	59,462.40
4023-4a Page Island	12,968.75
Total 4023-4 Online Donation	**72,431.15**
4023-7 3rd Party Beneficiary	1,706.04
4023-8 Recurring Gifts	132.96
Total 4023 Donations Received	**150,320.12**
Total Revenue	**$233,086.69**
GROSS PROFIT	**$233,086.69**
Expenditures	
5010 Advertising and Promotion	18,528.34
5030 Bank Service Charges	10.00
5040 Contract Labor	53,835.00
5070 Dues and Licenses	1,160.55
5077 Event Expenses	5,217.50
5078 Fundraising Expense	32,916.13
5080 Insurance - Liability	12,737.02
5090 Insurance - Health	206.71
5107 Meeting Expense	310.00
5108 Mileage	443.10
5110 Printing	302.90
5120 Office Supplies	312.48
5130 Operating Supplies	64.89
5140 Professional Services	4,095.70
5145 Program Expenses	34,451.88
5150 Postage & Shipping	29.20
5160 Rent - Premises	1,577.19

The Outside Foundation

Profit Loss

January - June, 2025

	TOTAL
5200 Salaries - Executive Director	37,500.00
66000 Payroll Expenses	2,868.75
5300 Fed Taxes - 941	-2,868.75
Total 66000 Payroll Expenses	**0.00**
Business License & Permits	50.00
Total Expenditures	**$203,748.59**
NET OPERATING REVENUE	**$29,338.10**
Other Revenue	
9615 Credit Card Rewards/Credits	436.53
9620 Stale Checks	5,383.27
Total Other Revenue	**$5,819.80**
NET OTHER REVENUE	**$5,819.80**
NET REVENUE	**$35,157.90**

The Outside Foundation

Balance Sheet

As of September 10, 2025

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
1052 Cash In Bank - Coastal	40,497.78
Total Bank Accounts	**$40,497.78**
Other Current Assets	
1110 Accounts Receivable - Sale	400.00
1210 Inventory - Logo Items Etc.	3,384.26
1350 Deposit at Community Foundation	746.56
Inventory Asset	29,400.00
Total Other Current Assets	**$33,930.82**
Total Current Assets	**$74,428.60**
Fixed Assets	
1530 Equipment	19,165.32
1580 Accumulated Depreciation - Equi	-11,772.69
Total Fixed Assets	**$7,392.63**
TOTAL ASSETS	**$81,821.23**
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Credit Cards	
1645 AMEX Blue - 9-02000	1,666.64
Total Credit Cards	**$1,666.64**
Other Current Liabilities	
24000 Payroll Liabilities	8,398.00
2075 Federal 941 Withholding	-10,808.25
2080 State Income Tax	408.55
Total 24000 Payroll Liabilities	**-2,001.70**
Total Other Current Liabilities	**$ -2,001.70**
Total Current Liabilities	**$ -335.06**
Total Liabilities	**$ -335.06**
Equity	
30000 Opening Balance Equity	29,400.00
3040 Retained Fund Equity	35,541.32
32000 Unrestricted Net Assets	58,369.70
Net Revenue	-41,154.73
Total Equity	**$82,156.29**
TOTAL LIABILITIES AND EQUITY	**$81,821.23**

Island Financial
ACCOUNTING & BOOKKEEPING SERVICES
2 CORPUS CHRISTIE PLACE
SUITE #104 PROFESSIONAL BUILDING
HILTON HEAD ISLAND, SC 29928
Phone: (843) 785-4018
Fax: (843) 785-7003

January 7th, 2025

The Outside Foundation
50 Shelter Cove Ln., Unit H
Hilton Head, SC 29928

Dear Jean,

Enclosed please find the December 2024 financial information for The Outside Foundation, based on the information that you have provided.

Should you have any questions or concerns, please do not hesitate to contact our office.

Very truly yours,

Tammy

Tammy Novak
Enclosure

The Outside Foundation New File

Balance Sheet

As of December 31, 2024

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
1052 Cash In Bank - Coastal	106,961.00
Total Bank Accounts	**$106,961.00**
Other Current Assets	
1080 Payroll Exchange	0.00
1110 Accounts Receivable - Sale	400.00
1210 Inventory - Logo Items Etc.	1,423.00
1350 Deposit at Community Foundation	746.56
Inventory Asset	29,400.00
Total Other Current Assets	**$31,969.56**
Total Current Assets	**$138,930.56**
Fixed Assets	
1530 Equipment	19,165.32
1580 Accumulated Depreciation - Equi	-11,772.69
Total Fixed Assets	**$7,392.63**
TOTAL ASSETS	**$146,323.19**
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Credit Cards	
1645 AMEX Blue - 9-01002	9,063.50
1650 Gold Circuit Visa	0.00
Total Credit Cards	**$9,063.50**
Other Current Liabilities	
2320 Old outstanding checks	0.00
24000 Payroll Liabilities	964.00
2075 Federal 941 Withholding	637.50
2080 State Income Tax	0.00
Total 24000 Payroll Liabilities	**1,601.50**
Total Other Current Liabilities	**$1,601.50**
Total Current Liabilities	**$10,665.00**
Total Liabilities	**$10,665.00**
Equity	
30000 Opening Balance Equity	29,400.00
3040 Retained Fund Equity	35,541.32
32000 Unrestricted Net Assets	126,184.20
Net Income	-55,467.33
Total Equity	**$135,658.19**
TOTAL LIABILITIES AND EQUITY	**$146,323.19**

The Outside Foundation New File

Profit and Loss

December 2024

	TOTAL
Income	
4022 Grants Received	10,235.00
4023 Donations Received	10,301.24
Total Income	**$20,536.24**
GROSS PROFIT	**$20,536.24**
Expenses	
5010 Advertising and Promotion	1,292.78
5040 Contract Labor	5,500.00
5078 Fundraising Expense	2,241.50
5090 Insurance - Health	185.16
5107 Meeting Expense	338.45
5120 Office Supplies	126.65
5145 Program Expenses	4,723.50
5150 Postage & Shipping	29.20
5152 Recycling Services	274.00
5160 Rent - Premises	222.00
5212 Scholarship Expense	618.20
66000 Payroll Expenses	
5300 Fed Taxes - 941	1,119.50
Total 66000 Payroll Expenses	**1,119.50**
Total Expenses	**$16,670.94**
NET OPERATING INCOME	**$3,865.30**
Other Income	
9615 Credit Card Rewards/Credits	62.96
Total Other Income	**$62.96**
Other Expenses	
9710 Unclassified	18.24
Total Other Expenses	**$18.24**
NET OTHER INCOME	**$44.72**
NET INCOME	**$3,910.02**

The Outside Foundation New File

Profit and Loss

January - December 2024

	TOTAL
Income	
4022 Grants Received	40,403.12
4022-1 Organization	7,500.00
4022-2 Government	33,501.26
Total 4022 Grants Received	**81,404.38**
4023 Donations Received	147,402.03
4023-1 Sponsorships	2,300.00
4023-2 Retail & Hats	143.91
4023-6 Annual Giving	47.00
4023-8 Recurring Gifts	50.00
Total 4023 Donations Received	**149,942.94**
4028 Fund Raising Events	140,552.63
4028-1 Page Island	6,600.00
Total 4028 Fund Raising Events	**147,152.63**
Total Income	**$378,499.95**
GROSS PROFIT	**$378,499.95**
Expenses	
5010 Advertising and Promotion	40,417.63
5040 Contract Labor	124,595.12
5070 Dues and Licenses	583.70
5077 Event Expenses	22,286.36
5078 Fundraising Expense	42,900.43
5080 Insurance - Liability	13,792.00
5090 Insurance - Health	3,101.12
5107 Meeting Expense	2,205.66
5110 Printing	1,421.39
5120 Office Supplies	869.17
5140 Professional Services	13,080.00
5145 Program Expenses	101,764.36
5150 Postage & Shipping	156.82
5152 Recycling Services	3,250.00
5160 Rent - Premises	2,256.00
5200 Salaries - Executive Director	45,833.30
5212 Scholarship Expense	9,292.20
5235 Taxes - Real Estate	368.72
5260 Travel	2,354.47
66000 Payroll Expenses	3,506.21
5300 Fed Taxes - 941	1,601.50
Total 66000 Payroll Expenses	**5,107.71**
Total Expenses	**$435,636.16**
NET OPERATING INCOME	**$ -57,136.21**

The Outside Foundation New File

Profit and Loss

January - December 2024

	TOTAL
Other Income	
9610 Interest	746.56
9615 Credit Card Rewards/Credits	1,793.87
Total Other Income	**$2,540.43**
Other Expenses	
9710 Unclassified	871.52
9830 9830 Previous Period Adjustments	0.03
Total Other Expenses	**$871.55**
NET OTHER INCOME	**$1,668.88**
NET INCOME	**$ -55,467.33**

The Outside Foundation New File

Profit and Loss

January - December 2024

	TOTAL		
	JAN - DEC 2024	JAN - DEC 2023 (PY)	CHANGE
Income			
4022 Grants Received	40,403.12	54,939.81	-14,536.69
4022-1 Organization	7,500.00		7,500.00
4022-2 Government	33,501.26		33,501.26
Total 4022 Grants Received	**81,404.38**	**54,939.81**	**26,464.57**
4023 Donations Received	147,402.03	55,559.33	91,842.70
4023-1 Sponsorships	2,300.00		2,300.00
4023-2 Retail & Hats	143.91		143.91
4023-6 Annual Giving	47.00		47.00
4023-8 Recurring Gifts	50.00		50.00
Total 4023 Donations Received	**149,942.94**	**55,559.33**	**94,383.61**
4028 Fund Raising Events	140,552.63	107,046.87	33,505.76
4028-1 Page Island	6,600.00		6,600.00
Total 4028 Fund Raising Events	**147,152.63**	**107,046.87**	**40,105.76**
Total Income	**$378,499.95**	**$217,546.01**	**$160,953.94**
GROSS PROFIT	**$378,499.95**	**$217,546.01**	**$160,953.94**
Expenses			
5010 Advertising and Promotion	40,417.63	23,542.74	16,874.89
5025 Auto Expense		290.82	-290.82
5030 Bank Service Charges		27.70	-27.70
5040 Contract Labor	124,595.12	57,657.93	66,937.19
5070 Dues and Licenses	583.70	1,059.58	-475.88
5077 Event Expenses	22,286.36		22,286.36
5078 Fundraising Expense	42,900.43	41,383.22	1,517.21
5080 Insurance - Liability	13,792.00	1,382.28	12,409.72
5090 Insurance - Health	3,101.12	5,961.98	-2,860.86
5107 Meeting Expense	2,205.66	182.51	2,023.15
5110 Printing	1,421.39	140.67	1,280.72
5120 Office Supplies	869.17	543.88	325.29
5130 Operating Supplies		8,928.50	-8,928.50
5140 Professional Services	13,080.00	6,378.00	6,702.00
5145 Program Expenses	101,764.36	52,034.90	49,729.46
5150 Postage & Shipping	156.82	113.55	43.27
5152 Recycling Services	3,250.00	3,334.12	-84.12
5160 Rent - Premises	2,256.00	1,801.00	455.00
5200 Salaries - Executive Director	45,833.30	47,000.04	-1,166.74
5212 Scholarship Expense	9,292.20		9,292.20
5235 Taxes - Real Estate	368.72	214.12	154.60
5240 Taxes - Other		1,360.69	-1,360.69
5260 Travel	2,354.47	530.16	1,824.31

The Outside Foundation New File

Profit and Loss

January - December 2024

	TOTAL		
	JAN - DEC 2024	JAN - DEC 2023 (PY)	CHANGE
5265 Uniform Expense		160.50	-160.50
66000 Payroll Expenses	3,506.21	10,118.63	-6,612.42
5300 Fed Taxes - 941	1,601.50		1,601.50
Total 66000 Payroll Expenses	**5,107.71**	**10,118.63**	**-5,010.92**
Total Expenses	**$435,636.16**	**$264,167.52**	**$171,468.64**
NET OPERATING INCOME	**$ -57,136.21**	**$ -46,621.51**	**$ -10,514.70**
Other Income			
9610 Interest	746.56		746.56
9615 Credit Card Rewards/Credits	1,793.87	440.63	1,353.24
9620 Stale Checks		8,537.00	-8,537.00
Total Other Income	**$2,540.43**	**$8,977.63**	**$ -6,437.20**
Other Expenses			
9710 Unclassified	871.52		871.52
9830 9830 Previous Period Adjustments	0.03		0.03
Total Other Expenses	**$871.55**	**$0.00**	**$871.55**
NET OTHER INCOME	**$1,668.88**	**$8,977.63**	**$ -7,308.75**
NET INCOME	**$ -55,467.33**	**$ -37,643.88**	**$ -17,823.45**

The Outside Foundation
Balance Sheet
As of December 31, 2023

	Dec 31, 23
ASSETS	
Current Assets	
Checking/Savings	
1052 · Cash In Bank - Coastal	167,185.82
Total Checking/Savings	167,185.82
Other Current Assets	
1110 · Accounts Receivable - Sale	400.00
1210 · Inventory - Logo Items Etc.	1,423.00
Total Other Current Assets	1,823.00
Total Current Assets	169,008.82
Fixed Assets	
1530 · Equipment	19,165.32
1580 · Accumulated Depreciation - Equi	-11,772.69
Total Fixed Assets	7,392.63
TOTAL ASSETS	**176,401.45**
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
2080 · State Income Tax	592.83
24000 · Payroll Liabilities	3,207.78
Total Other Current Liabilities	3,800.61
Total Current Liabilities	3,800.61
Total Liabilities	3,800.61
Equity	
3040 · Retained Fund Equity	35,541.32
32000 · Unrestricted Net Assets	163,828.08
Net Income	-26,768.56
Total Equity	172,600.84
TOTAL LIABILITIES & EQUITY	**176,401.45**

The Outside Foundation
Profit & Loss
December 2023

	Dec 23
Ordinary Income/Expense	
Income	
4022 · Grants Received	21,415.62
4023 · Donations Recieved	4,220.00
4028 · Fund Raising Events	4,486.75
Total Income	30,122.37
Gross Profit	30,122.37
Expense	
5030 · Bank Service Charges	27.70
5040 · Contract Labor	5,700.00
5090 · Insurance - Health	167.86
5145 · Program Expenses	6,393.38
5200 · Salaries - Executive Director	7,833.34
5235 · Taxes - Real Estate	214.12
66000 · Payroll Expenses	6,358.72
Total Expense	26,695.12
Net Ordinary Income	3,427.25
Other Income/Expense	
Other Income	
9620 · Stale Checks	89.00
Total Other Income	89.00
Net Other Income	89.00
Net Income	**3,516.25**

The Outside Foundation
Profit & Loss
January through December 2023

	Jan - Dec 23
Ordinary Income/Expense	
Income	
4022 · Grants Received	54,939.81
4023 · Donations Recieved	55,559.33
4028 · Fund Raising Events	107,046.87
Total Income	217,546.01
Gross Profit	217,546.01
Expense	
5010 · Advertising and Promotion	18,963.88
5025 · Auto Expense	290.82
5030 · Bank Service Charges	27.70
5040 · Contract Labor	57,657.93
5070 · Dues and Licenses	1,006.58
5078 · Fundraising Expense	41,383.22
5080 · Insurance - Liability	1,382.28
5090 · Insurance - Health	5,961.98
5107 · Meeting Expense	182.51
5120 · Office Supplies	512.86
5130 · Operating Supplies	8,928.50
5140 · Professional Services	4,678.00
5145 · Program Expenses	47,863.50
5150 · Postage & Shipping	113.55
5152 · Recycling Services	3,114.12
5160 · Rent - Premises	1,630.00
5200 · Salaries - Executive Director	47,000.04
5235 · Taxes - Real Estate	214.12
5240 · Taxes - Other	1,380.69
5260 · Travel	530.16
5265 · Uniform Expense	160.50
66000 · Payroll Expenses	10,118.63
Total Expense	253,101.57
Net Ordinary Income	-35,555.56
Other Income/Expense	
Other Income	
9615 · Credit Card Rewards/Credits	250.00
9620 · Stale Checks	8,537.00
Total Other Income	8,787.00
Net Other Income	8,787.00
Net Income	**-26,768.56**

The Outside Foundation
Profit & Loss
January through December 2023

	Jan - Dec 23	Jan - Dec 22	$ Change
Ordinary Income/Expense			
Income			
4020 · Sales - Logo Items Etc.	0.00	75.00	-75.00
4022 · Grants Received	54,939.81	175,378.59	-120,438.78
4023 · Donations Recieved	55,559.33	82,600.95	-27,041.62
4028 · Fund Raising Events	107,046.87	88,916.59	18,130.28
Total Income	217,546.01	346,971.13	-129,425.12
Cost of Goods Sold			
4520 · Purchase - Logo Items Etc.	0.00	179.00	-179.00
Total COGS	0.00	179.00	-179.00
Gross Profit	217,546.01	346,792.13	-129,246.12
Expense			
5010 · Advertising and Promotion	18,963.88	24,507.95	-5,544.07
5025 · Auto Expense	290.82	0.00	290.82
5030 · Bank Service Charges	27.70	52.00	-24.30
5040 · Contract Labor	57,657.93	31,008.24	26,649.69
5055 · Depreciation Expense	0.00	1,904.69	-1,904.69
5060 · Donations	0.00	103.06	-103.06
5070 · Dues and Licenses	1,006.58	366.00	640.58
5078 · Fundraising Expense	41,383.22	33,122.88	8,260.34
5080 · Insurance - Liability	1,382.28	1,023.88	358.40
5090 · Insurance - Health	5,961.98	0.00	5,961.98
5105 · Management Charges	0.00	0.00	0.00
5107 · Meeting Expense	182.51	414.10	-231.59
5110 · Printing	0.00	129.92	-129.92
5120 · Office Supplies	512.86	1,129.58	-616.72
5130 · Operating Supplies	8,928.50	0.00	8,928.50
5140 · Professional Services	4,678.00	2,150.00	2,528.00
5145 · Program Expenses	47,863.50	26,752.14	21,111.36
5150 · Postage & Shipping	113.55	72.96	40.59
5152 · Recycling Services	3,114.12	3,374.48	-260.36
5160 · Rent - Premises	1,630.00	1,638.39	-8.39
5200 · Salaries - Executive Director	47,000.04	47,916.71	-916.67
5205 · Salaries - Other	0.00	3,100.00	-3,100.00
5230 · Taxes - Payroll	0.00	0.00	0.00
5235 · Taxes - Real Estate	214.12	0.00	214.12
5240 · Taxes - Other	1,380.69	0.00	1,380.69
5260 · Travel	530.16	51.00	479.16
5265 · Uniform Expense	160.50	245.00	-84.50
66000 · Payroll Expenses	10,118.63	3,902.80	6,215.83
Total Expense	253,101.57	182,965.78	70,135.79
Net Ordinary Income	-35,555.56	163,826.35	-199,381.91
Other Income/Expense			
Other Income			
9610 · Interest	0.00	2.00	-2.00
9615 · Credit Card Rewards/Credits	250.00	0.00	250.00
9620 · Stale Checks	8,537.00	0.00	8,537.00
Total Other Income	8,787.00	2.00	8,785.00
Other Expense			
9705 · Interest Expense	0.00	0.27	-0.27
Total Other Expense	0.00	0.27	-0.27
Net Other Income	8,787.00	1.73	8,785.27
Net Income	**-26,768.56**	**163,828.08**	**-190,596.64**

The Outside Foundation
Trial Balance
As of December 31, 2023

	Dec 31, 23	
	Debit	Credit
1052 · Cash In Bank - Coastal	167,185.82	
1080 · Payroll Exchange	0.00	
1110 · Accounts Receivable - Sale	400.00	
1210 · Inventory - Logo Items Etc.	1,423.00	
1350 · Deposit at Community Foundation	0.00	
1530 · Equipment	19,165.32	
1580 · Accumulated Depreciation - Equi		11,772.69
1645 · AMEX Blue - 9-01002	0.00	
1650 · Gold Circuit Visa	0.00	
2080 · State Income Tax		592.83
2320 · Old outstanding checks	0.00	
24000 · Payroll Liabilities		3,207.78
3040 · Retained Fund Equity		35,541.32
32000 · Unrestricted Net Assets		163,828.08
4022 · Grants Received		54,939.81
4023 · Donations Recieved		55,559.33
4028 · Fund Raising Events		107,046.87
5010 · Advertising and Promotion	18,963.88	
5025 · Auto Expense	290.82	
5030 · Bank Service Charges	27.70	
5040 · Contract Labor	57,657.93	
5070 · Dues and Licenses	1,006.58	
5078 · Fundraising Expense	41,383.22	
5080 · Insurance - Liability	1,382.28	
5090 · Insurance - Health	5,961.98	
5107 · Meeting Expense	182.51	
5120 · Office Supplies	512.86	
5130 · Operating Supplies	8,928.50	
5140 · Professional Services	4,678.00	
5145 · Program Expenses	47,863.50	
5150 · Postage & Shipping	113.55	
5152 · Recycling Services	3,114.12	
5160 · Rent - Premises	1,630.00	
5200 · Salaries - Executive Director	47,000.04	
5235 · Taxes - Real Estate	214.12	
5240 · Taxes - Other	1,380.69	
5260 · Travel	530.16	
5265 · Uniform Expense	160.50	
66000 · Payroll Expenses	10,118.63	
9615 · Credit Card Rewards/Credits		250.00
9620 · Stale Checks		8,537.00
TOTAL	**441,275.71**	**441,275.71**

The Outside Foundation
Balance Sheet
As of December 31, 2022

	Dec 31, 22
ASSETS	
Current Assets	
Checking/Savings	
1052 · Cash In Bank - Coastal	192,419.50
Total Checking/Savings	192,419.50
Other Current Assets	
1110 · Accounts Receivable - Sale	400.00
1210 · Inventory - Logo Items Etc.	1,423.00
Total Other Current Assets	1,823.00
Total Current Assets	194,242.50
Fixed Assets	
1530 · Equipment	16,564.00
1580 · Accumulated Depreciation - Equi	-10,200.00
Total Fixed Assets	6,364.00
TOTAL ASSETS	200,606.50
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
2080 · State Income Tax	375.00
24000 · Payroll Liabilities	1,890.73
Total Other Current Liabilities	2,265.73
Total Current Liabilities	2,265.73
Total Liabilities	2,265.73
Equity	
3040 · Retained Fund Equity	32,940.00
Net Income	165,400.77
Total Equity	198,340.77
TOTAL LIABILITIES & EQUITY	200,606.50

The Outside Foundation
Profit & Loss
October through December 2022

	Oct - Dec 22	Jan - Dec 22
Ordinary Income/Expense		
Income		
4020 · Sales - Logo Items Etc.	0.00	75.00
4022 · Grants Received	141,158.91	175,378.59
4023 · Donations Recieved	27,423.38	82,600.95
4028 · Fund Raising Events	13,373.81	88,916.59
Total Income	181,956.10	346,971.13
Cost of Goods Sold		
4520 · Purchase - Logo Items Etc.	0.00	179.00
Total COGS	0.00	179.00
Gross Profit	181,956.10	346,792.13
Expense		
5010 · Advertising and Promotion	-833.94	24,507.95
5030 · Bank Service Charges	0.00	52.00
5040 · Contract Labor	10,381.58	31,008.24
5055 · Depreciation Expense	0.00	332.00
5060 · Donations	0.00	103.06
5070 · Dues and Licenses	0.00	366.00
5078 · Fundraising Expense	540.67	33,122.88
5080 · Insurance - Liability	25.88	1,023.88
5105 · Management Charges	0.00	0.00
5107 · Meeting Expense	39.24	414.10
5110 · Printing	75.92	129.92
5120 · Office Supplies	618.32	1,129.58
5140 · Professional Services	200.00	2,150.00
5145 · Program Expenses	8,960.86	26,752.14
5150 · Postage & Shipping	17.15	72.96
5152 · Recycling Services	630.36	3,374.48
5160 · Rent - Premises	504.39	1,638.39
5200 · Salaries - Executive Director	8,750.01	47,916.71
5205 · Salaries - Other	0.00	3,100.00
5230 · Taxes - Payroll	0.00	0.00
5260 · Travel	0.00	51.00
5265 · Uniform Expense	0.00	245.00
66000 · Payroll Expenses	669.37	3,902.80
Total Expense	30,579.81	181,393.09
Net Ordinary Income	151,376.29	165,399.04
Other Income/Expense		
Other Income		
9610 · Interest	0.00	2.00
Total Other Income	0.00	2.00
Other Expense		
9705 · Interest Expense	0.00	0.27
Total Other Expense	0.00	0.27
Net Other Income	0.00	1.73
Net Income	**151,376.29**	**165,400.77**

The Outside Foundation
Profit & Loss
January through December 2022

	Jan - Dec 22	Jan - Dec 22
Ordinary Income/Expense		
Income		
4020 · Sales - Logo Items Etc.	75.00	75.00
4022 · Grants Received	175,378.59	175,378.59
4023 · Donations Recieved	82,600.95	82,600.95
4028 · Fund Raising Events	88,916.59	88,916.59
Total Income	346,971.13	346,971.13
Cost of Goods Sold		
4520 · Purchase - Logo Items Etc.	179.00	179.00
Total COGS	179.00	179.00
Gross Profit	346,792.13	346,792.13
Expense		
5010 · Advertising and Promotion	24,507.95	24,507.95
5030 · Bank Service Charges	52.00	52.00
5040 · Contract Labor	31,008.24	31,008.24
5055 · Depreciation Expense	332.00	332.00
5060 · Donations	103.06	103.06
5070 · Dues and Licenses	366.00	366.00
5078 · Fundraising Expense	33,122.88	33,122.88
5080 · Insurance - Liability	1,023.88	1,023.88
5105 · Management Charges	0.00	0.00
5107 · Meeting Expense	414.10	414.10
5110 · Printing	129.92	129.92
5120 · Office Supplies	1,129.58	1,129.58
5140 · Professional Services	2,150.00	2,150.00
5145 · Program Expenses	26,752.14	26,752.14
5150 · Postage & Shipping	72.96	72.96
5152 · Recycling Services	3,374.48	3,374.48
5160 · Rent - Premises	1,638.39	1,638.39
5200 · Salaries - Executive Director	47,916.71	47,916.71
5205 · Salaries - Other	3,100.00	3,100.00
5230 · Taxes - Payroll	0.00	0.00
5260 · Travel	51.00	51.00
5265 · Uniform Expense	245.00	245.00
66000 · Payroll Expenses	3,902.80	3,902.80
Total Expense	181,393.09	181,393.09
Net Ordinary Income	165,399.04	165,399.04
Other Income/Expense		
Other Income		
9610 · Interest	2.00	2.00
Total Other Income	2.00	2.00
Other Expense		
9705 · Interest Expense	0.27	0.27
Total Other Expense	0.27	0.27
Net Other Income	1.73	1.73
Net Income	165,400.77	165,400.77

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: OCT 02 2014

THE OUTSIDE FOUNDATION
C/O MICHAEL P OVERTON
32 SHELTER COVE LN STE H
HILTON HEAD ISLAND, SC 29928

Employer Identification Number:
46-4305638
DLN:
17053210306044
Contact Person:
KAREN A BATEY ID# 31641
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
October 31, 2013
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Tamera Ripperda

Director, Exempt Organizations

Letter 947

Form **990** Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047 **2024** Open to Public Inspection

A For the 2024 calendar year, or tax year beginning , and ending

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

C Name of organization: The Outside Foundation

Doing business as:

Number and street (or P.O. box if mail is not delivered to street address): 50 Shelter Cove Lane Suite H — Room/suite:

City or town, state or province, country, and ZIP or foreign postal code: Hilton Head Island SC 29928

D Employer identification number: 46-4305638

E Telephone number: 843-686-6996

G Gross receipts $ 381,041

F Name and address of principal officer: Dr. Jean Fruh, 50 Shelter Cove Lane, Hilton Head Island SC 29928

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

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

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

J Website: www.outsidefoundation.org

H(c) Group exemption number

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other — L Year of formation: 2014 — M State of legal domicile: SC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
Public Education

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	8
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	8
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	1
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	110,499	231,347
	9	Program service revenue (Part VIII, line 2g)		0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		747
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	74,451	106,047
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	184,950	338,141
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	57,119	47,435
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) 0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	155,889	344,870
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	213,008	392,305
	19	Revenue less expenses. Subtract line 18 from line 12	-28,058	-54,164
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	175,114	150,442
	21	Total liabilities (Part X, line 26)	3,801	10,666
	22	Net assets or fund balances. Subtract line 21 from line 20	171,313	139,776

Part II Signature Block

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

Sign Here

Signature of officer: M. Fruh — Date: 7/22/25

Dr. Jean Fruh — Executive Director

Type or print name and title

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Patrick P. Carey, Jr., CPA	Patrick P. Carey, Jr., CPA	7/18/25		P00033247

Firm's name: Carey & Company P.A. — Firm's EIN: 57-0927046

Firm's address: 70 Main Street, Suite 100, Hilton Head Island, SC 29926 — Phone no. 843-681-4430

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Public Education

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 101,764 including grants of $) (Revenue $)

Education

4b (Code:) (Expenses $ including grants of $) (Revenue $)

N/A

4c (Code:) (Expenses $ including grants of $) (Revenue $)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses $ 256,588 including grants of $) (Revenue $)

4e Total program service expenses 358,352

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		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 debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		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 IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 8			
	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 on line 1a, above, who are independent	1b 8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*		9		X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c	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?			
a	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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed None

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

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records.
Dr. Jean Fruh 32 Shelter Cove Lane
Hilton Head Island SC 29928 843-686-6996

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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) Dr. Jean Fruh Executive Director	30.00 0.00	X		X				45,833	0	0
(2) Ron Miele Chairperson	3.00 0.00	X		X				0	0	0
(3) Michael Overton Vice Chairperson	1.00 0.00	X		X				0	0	0
(4) Brian Kinard Treasurer	1.00 0.00	X		X				0	0	0
(5) Michael Cerrati Secretary	1.00 0.00	X						0	0	0
(6) Melissa Krauss Board Member	1.00 0.00	X						0	0	0
(7) Dr. John Batson Board Member	1.00 0.00	X						0	0	0
(8) John Taylor Board Member	1.00 0.00	X						0	0	0
(9) Ted K. Neely II Board Member	1.00 0.00	X						0	0	0
(10)										
(11)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal								45,833		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								45,833		

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 0

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

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	231,347				
	g Noncash contributions included in lines 1a-1f	1g	$ 53,000				
	h Total. Add lines 1a–1f			231,347			
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a–2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			747	747		
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
			(i) Real / (ii) Personal				
	6a Gross rents	6a					
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
			(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	7a					
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18	8a	147,153				
	b Less: direct expenses	8b	42,900				
	c Net income or (loss) from fundraising events			104,253			
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
	11a Credit Card Rewards/Credits			1,794	1,794		
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a–11d			1,794			
	12 Total revenue. See instructions			338,141	2,541	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	45,833	45,833		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	1,602		1,602	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	13,080		13,080	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	40,418	40,418		
13 Office expenses	2,290	1,421	869	
14 Information technology				
15 Royalties				
16 Occupancy	2,256		2,256	
17 Travel	2,354		2,354	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	15,498	15,498		
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a Contract Labor	124,595	124,595		
b Program Expenses	101,764	101,764		
c Event expense	22,286	22,286		
d Insurance	13,792		13,792	
e All other expenses	6,537	6,537		
25 **Total functional expenses.** Add lines 1 through 24e	392,305	358,352	33,953	0
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		167,184	1	106,963
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		400	4	400
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 40,065			
	b	Less: accumulated depreciation	10b 28,556	6,107	10c	11,509
	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		1,423	15	31,570
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		175,114	16	150,442
Liabilities	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		3,801	25	10,666
	26	**Total liabilities.** Add lines 17 through 25		3,801	26	10,666
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☒ **and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		171,313	27	139,776
	28	Net assets with donor restrictions			28	
		Organizations that do not follow FASB ASC 958, check here ☐ **and complete lines 29 through 33.**				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		171,313	32	139,776
	33	Total liabilities and net assets/fund balances		175,114	33	150,442

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	338,141
2	Total expenses (must equal Part IX, column (A), line 25)	2	392,305
3	Revenue less expenses. Subtract line 2 from line 1	3	-54,164
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	171,313
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	22,627
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	139,776

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII [ ]

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other ____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	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		
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	3b		

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization: The Outside Foundation

Employer identification number: 46-4305638

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 ☒ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

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

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) 14 %

15 Public support percentage from 2023 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test — 2024.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support test — 2023.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10%-facts-and-circumstances test — 2024.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b **10%-facts-and-circumstances test — 2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	102,310	124,491	257,980	110,499	231,347	826,627
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		55,602	88,994	115,834	149,694	410,124
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	102,310	180,093	346,974	226,333	381,041	1,236,751
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						1,236,751

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6	102,310	180,093	346,974	226,333	381,041	1,236,751
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	90		2			92
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	90		2			92
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.)	102,400	180,093	346,976	226,333	381,041	1,236,843

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	99.99 %
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	99.96 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2024** (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from **2023** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests — 2024.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☒

b **33 1/3% support tests — 2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *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.*	1		
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).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in **Part VI** when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
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.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI,** including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
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.***	6		
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).*	7		
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).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in **Part VI.***	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
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.)*	10b		

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**).*

a ☐ The organization satisfied the Activities Test. *Complete **line 2** below.*
b ☐ The organization is the parent of each of its supported organizations. *Complete **line 3** below.*
c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a governmental entity (see instructions).*

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

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

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

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

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

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

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

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

Section D – Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required—*provide details in* **Part VI**)	5	
6	Other distributions (*describe in* **Part VI**). See instructions.	6	
7	**Total annual distributions.** Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (*provide details in* **Part VI**). See instructions.	8	
9	Distributable amount for 2024 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required–*explain in* **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f **Total** of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in* **Part VI.** See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* **Part VI.** See instructions.			
7 **Excess distributions carryover to 2025.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

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 D (Form 990) (Rev. December 2024) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: The Outside Foundation

Employer identification number: 46-4305638

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

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

- ☐ Preservation of land for public use (for example, recreation or education)
- ☐ Protection of natural habitat
- ☐ Preservation of open space
- ☐ Preservation of a historically important land area
- ☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included on line 2a	2c	
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conversation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year $

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 $

(ii) Assets included in Form 990, Part X $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

a Revenue included on Form 990, Part VIII, line 1 $

b Assets included in Form 990, Part X $

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

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

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

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

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

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

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

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment %
b Permanent endowment %
c Term endowment %
The percentages on lines 2a, 2b, and 2c should equal 100%.

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

		Yes	No
(i) Unrelated organizations?	3a(i)		
(ii) Related organizations?	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI **Land, Buildings, and Equipment**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		40,065	28,556	11,509
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				11,509

Part VII Investments – Other Securities

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

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

Part VIII Investments – Program Related

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

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

Part IX Other Assets

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

(a) Description	(b) Book value
(1) Inventory asset	29,400
(2) Inventory - Logo Items	1,423
(3) Deposits at Community Foundation	747
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 15, col. (B))*	31,570

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Credit cards	9,064
(3) Payroll Liabilities	1,602
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	10,666

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

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

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

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

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

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

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

Part XIII Supplemental Information

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

Part XIII Supplemental Information *(continued)*

SCHEDULE G (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19; or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
Attach to Form 990 or Form 990-EZ.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: The Outside Foundation

Employer identification number: 46-4305638

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

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

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

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

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

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

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		Fundraising (event type)	(event type)	None (total number)	
Revenue	1 Gross receipts	147,153			147,153
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	147,153			147,153
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	42,900			42,900
	10 Direct expense summary. Add lines 4 through 9 in column (d)				42,900
	11 Net income summary. Subtract line 10 from line 3, column (d)				104,253

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

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

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

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

b If "No," explain:

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

b If "Yes," explain:

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary, or trustee of a trust; or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

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

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

Name

Address

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization $ and the amount of gaming revenue retained by the third party $

c If "Yes," enter tha name and address of the third party:

Name

Address

16 Gaming manager information:

Name

Gaming manager compensation $

Description of services provided

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year $

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

SCHEDULE L
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.
Attach to Form 990 or Form 990-EZ.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: The Outside Foundation

Employer identification number: 46-4305638

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 .... $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization .... $

Part II Loans to and/or From Interested Persons

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org.? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						$						

Part III Grants or Assistance Benefiting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Part IV **Business Transactions Involving Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org. revenues? Yes	No
(1) Hilton Head Kayak Company	BOD Operated	8,080			X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V **Supplemental Information**

Provide additional information for responses to questions on Schedule L. See instructions.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2024

Open To Public Inspection

Name of the organization: The Outside Foundation

Employer identification number: 46-4305638

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded				
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (Outside Brands)	X	39000	53,000	Page Island Oyster Roast
26 Other (Outside Brands)	X	14000		Paddle Battle
27 Other ( )				
28 Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement . . . 29

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

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

SCHEDULE O (Form 990) (Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: The Outside Foundation

Employer identification number: 46-4305638

Form 990, Part III, Line 4d - All Other Accomplishments
Other

Form 990, Part VI, Line 7a - Election of Members and Their Rights
The Board elects Board members.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
A draft of form 990 is circulated to the Financial Committee for review and comments prior to approval by the full Board of Directors.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
The Governance Committee regularly and consistently monitors and enforces compliance with the policy.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
No documents available to the public

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

Prior period adjustment	$	19,813
Prior period depreciation adj.	$	-1,286
Prior period fixed asset adj.	$	4,100
Total	$	22,627

Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)
Attach to your tax return.
Go to *www.irs.gov/Form4562* for instructions and the latest information.

OMB No. 1545-0172
2024
Attachment Sequence No. **179**

Name(s) shown on return: The Outside Foundation
Identifying number: 46-4305638

Business or activity to which this form relates: Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

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

1	Maximum amount (see instructions)	1	1,220,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	3,050,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2023 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12	13	

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	12,540
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,286

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2024	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ☐		

Section B—Assets Placed in Service During 2024 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		8,360	5.0	HY	200DB	1,672
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System

(a) Classification of property	(b)	(c)	(d)	(e)	(f)	(g)
20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	15,498
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

There are no amounts for Page 2

Form **990**

Event Income and Deduction Worksheet

2024

Description Fundraising

Name: The Outside Foundation

Taxpayer Identification Number: 46-4305638

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	147,153
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	
7. **Total revenue.** Add lines 1 through 6	7.	147,153
8. Cost of Goods Sold	8.	42,900
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	
15. **Total expenses.** Add lines 8 through 14	15.	42,900
16. **Net Income/Loss.** Line 7 minus Line 15	16.	104,253

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	42,900
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	42,900

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Information is indicated for use on Form 990-T, Schedule A:

Schedule A, UBIT Activity Code________ Seq #_____

- ☐ Part V, Debt Financing
- ☐ Part VI, Controlled Org Income
- ☐ Part VII, Investments for C(7)(9)(17)
- ☐ Part VIII, Exploited Activities
- ☐ Part IX, Advertising Income

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Federal Statements

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
Scholarship expense	$ 9,292	$ 9,292	$	$
Payroll expense	3,506	3,506		
Recycling Services	3,250	3,250		
Insurance - health	3,101	3,101		
Meeting Expense	2,206	2,206		
Other expense	872	872		
Dues & Licenses	584	584		
Taxes - Real Estate	369	369		
Postage	157	157		
Trailer realloaction	-16,800	-16,800		
Total	$ 6,537	$ 6,537	$ 0	$ 0

Schedule A, Part III, Line 1(e)

Description	Amount
Grants Received	$ 81,404
Donations Received	96,943
Donations Received	39,000
Donations Received	14,000
Total	$ 231,347

Schedule A, Part III, Line 2(e)

Description	Amount
Taxable Interest on Savings and Temporary Cash Investments	$ 747
Credit Card Rewards/Credits	1,794
Stale Checks	
Fundraising	147,153
Total	$ 149,694

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Form **990** — Department of the Treasury, Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047 — **2023** — **Open to Public Inspection**

A For the 2023 calendar year, or tax year beginning , and ending

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

C Name of organization: The Outside Foundation

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 50 Shelter Cove Lane Suite H — Room/suite

City or town, state or province, country, and ZIP or foreign postal code: Hilton Head Island SC 29928

D Employer identification number: 46-4305638

E Telephone number: 843-686-6996

G Gross receipts $ 226,333

F Name and address of principal officer: Dr. Jean Fruh, 50 Shelter Cove Lane, Hilton Head Island SC 29928

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

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

H(c) Group exemption number

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

J Website: www.outsidefoundation.org

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

L Year of formation: 2014 **M** State of legal domicile: SC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
Public Education

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	8
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	8
5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	1
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

		Prior Year	Current Year
Revenue 8	Contributions and grants (Part VIII, line 1h)	257,980	110,499
9	Program service revenue (Part VIII, line 2g)		0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2	0
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	55,690	74,451
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	313,672	184,950
Expenses 13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
14	Benefits paid to or for members (Part IX, column (A), line 4)		0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	54,920	57,119
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) 0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	94,923	155,889
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	149,843	213,008
19	Revenue less expenses. Subtract line 18 from line 12	163,829	-28,058
		Beginning of Current Year	**End of Year**
Net Assets or Fund Balances 20	Total assets (Part X, line 16)	201,637	175,114
21	Total liabilities (Part X, line 26)	2,266	3,801
22	Net assets or fund balances. Subtract line 21 from line 20	199,371	171,313

Part II Signature Block

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

Sign Here

Signature of officer — Date

Dr. Jean Fruh — Executive Director

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Patrick P. Carey, Jr., CPA	Patrick P. Carey, Jr., CPA			P00033247

Firm's name: Carey & Company P.A. — Firm's EIN: 57-0927046

Firm's address: 70 Main Street, Suite 100, Hilton Head Island, SC 29926 — Phone no. 843-681-4430

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Public Education

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 47,864 including grants of $) (Revenue $)

Education

4b (Code:) (Expenses $ including grants of $) (Revenue $)

N/A

4c (Code:) (Expenses $ including grants of $) (Revenue $)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses $ 140,330 including grants of $) (Revenue $)

4e Total program service expenses 188,194

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		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 debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		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 IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

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

Part VI Governance, Management, and Disclosure *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.*

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

Section A. Governing Body and Management

				Line	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	1a	8			
b	Enter the number of voting members included on line 1a, above, who are independent	1b	8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:					
a	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*			9		X

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

		Line	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	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c	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?			
a	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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **None**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☐ Upon request ☐ Other *(explain on Schedule O)*

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

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

Dr. Jean Fruh 32 Shelter Cove Lane

Hilton Head Island SC 29928 843-686-6996

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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) Dr. Jean Fruh Executive Director	30.00 0.00	X		X				47,000	0	0
(2) Ron Miele Chairperson	3.00 0.00	X		X				0	0	0
(3) Michael Overton Vice Chairperson	1.00 0.00	X		X				0	0	0
(4) Brian Kinard Treasurer	2.00 0.00	X		X				0	0	0
(5) Dr. John Batson Board Member	1.00 0.00	X						0	0	0
(6) Melissa Krauss Board Member	1.00 0.00	X						0	0	0
(7) Michael Cerrati Board Member	1.00 0.00	X						0	0	0
(8) John Taylor Board Member	1.00 0.00	X						0	0	0
(9) Jake Gartner Board Member	1.00 0.00	X						0	0	0
(10) Ted K. Neely II Board Member	1.00 0.00	X						0	0	0
(11)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal								47,000		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								47,000		

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 0

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

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	110,499				
	g Noncash contributions included in lines 1a-1f	1g	$ 26,518				
	h Total. Add lines 1a–1f			110,499			
Program Service Revenue		Business Code					
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a–2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
		(i) Real	(ii) Personal				
	6a Gross rents	6a					
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory	7a					
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18	8a	107,047				
	b Less: direct expenses	8b	41,383				
	c Net income or (loss) from fundraising events			65,664			
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
	11a Stale Checks			8,537	8,537		
	b Credit Card Rewards/Credits			250	250		
	c						
	d All other revenue						
	e Total. Add lines 11a–11d			8,787			
	12 Total revenue. See instructions			184,950	8,787	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	47,000	47,000		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	10,119		10,119	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	4,678		4,678	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	18,964	18,964		
13 Office expenses	627	114	513	
14 Information technology				
15 Royalties				
16 Occupancy	1,630		1,630	
17 Travel	530		530	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,286	1,286		
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Contract Labor	57,658	57,658		
b Program Expenses	47,864	47,864		
c Operating Supplies	8,929	8,929		
d Insurance	7,344		7,344	
e All other expenses	6,379	6,379		
25 **Total functional expenses.** Add lines 1 through 24e	213,008	188,194	24,814	0
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			192,421	1	167,184
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			400	4	400
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	19,165			
	b	Less: accumulated depreciation	10b	13,058	7,393	10c	6,107
	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			1,423	15	1,423
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)			201,637	16	175,114
Liabilities	17	Accounts payable and accrued expenses				17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			2,266	25	3,801
	26	**Total liabilities.** Add lines 17 through 25			2,266	26	3,801
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☒ **and complete lines 27, 28, 32, and 33.**					
	27	Net assets without donor restrictions			199,371	27	171,313
	28	Net assets with donor restrictions				28	
		Organizations that do not follow FASB ASC 958, check here ☐ **and complete lines 29 through 33.**					
	29	Capital stock or trust principal, or current funds				29	
	30	Paid-in or capital surplus, or land, building, or equipment fund				30	
	31	Retained earnings, endowment, accumulated income, or other funds				31	
	32	Total net assets or fund balances			199,371	32	171,313
	33	Total liabilities and net assets/fund balances			201,637	33	175,114

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	184,950
2	Total expenses (must equal Part IX, column (A), line 25)	2	213,008
3	Revenue less expenses. Subtract line 2 from line 1	3	-28,058
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	199,371
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	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	171,313

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII [ ]

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other ____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis	2a		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis	2b		X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c		
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		
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	3b		

4365 06/16/2023 10:10 AM

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning , and ending

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

C Name of organization: The Outside Foundation

Doing business as:

Number and street (or P.O. box if mail is not delivered to street address): 50 Shelter Cove Lane Suite H

Room/suite:

City or town, state or province, country, and ZIP or foreign postal code: Hilton Head Island SC 29928

D Employer identification number: 46-4305638

E Telephone number: 843-686-6996

G Gross receipts $ 346,974

F Name and address of principal officer:
Jean Fruh
50 Shelter Cove Lane
Hilton Head Island SC 29928

H(a) Is this a group return for subordinates? [ ] Yes [X] No

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

H(c) Group exemption number

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: www.outsidefoundation.org

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other

L Year of formation: 2014

M State of legal domicile: SC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
Public Education

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	9
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	2
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	73,442	257,980
	9	Program service revenue (Part VIII, line 2g)		0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	37,972	55,690
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	111,414	313,672
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	36,961	54,920
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) 0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	71,866	94,923
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	108,827	149,843
	19	Revenue less expenses. Subtract line 18 from line 12	2,587	163,829
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	34,768	201,637
	21	Total liabilities (Part X, line 26)	1,827	2,266
	22	Net assets or fund balances. Subtract line 21 from line 20	32,941	199,371

Part II Signature Block

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

Sign Here

Signature of officer | Date

Jean Fruh Executive Director

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
Patrick P. Carey, Jr., CPA	Patrick P. Carey, Jr., CPA			P00033247

Firm's name: Carey & Company P.A. — Firm's EIN: 57-0927046

Firm's address: 70 Main Street, Suite 100, Hilton Head Island, SC 29926 — Phone no. 843-681-4430

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [ ] No

For Paperwork Reduction Act Notice, see the separate instructions.
DAA

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Public Education

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? .... [ ] Yes [X] No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? .... [ ] Yes [X] No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 26,752 including grants of $) (Revenue $)

Education

4b (Code:) (Expenses $ including grants of $) (Revenue $)

N/A

4c (Code:) (Expenses $ including grants of $) (Revenue $)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses $ 104,766 including grants of $) (Revenue $)

4e Total program service expenses 131,518

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors?* See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		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 debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		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 IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

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

Part VI Governance, Management, and Disclosure *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.*

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 9			
	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 on line 1a, above, who are independent	1b 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*		9		X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **None**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☐ Upon request ☐ Other *(explain on Schedule O)*

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

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

Foundation 32 Shelter Cove Lane
Hilton Head Island SC 29928 843-686-6996

Part VII **Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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) Jean Fruh Executive Director	30.00 0.00	X		X				47,917	0	0
(2) Denise Spencer Chairperson	3.00 0.00	X		X				0	0	0
(3) Michael Overton Vice Chairperson	1.00 0.00	X		X				0	0	0
(4) Brian Kinard Treasurer	2.00 0.00	X		X				0	0	0
(5) Dr. John Batson Board Member	1.00 0.00	X						0	0	0
(6) Melissa Krauss Board Member	1.00 0.00	X						0	0	0
(7) Michael Cerrati Board Member	1.00 0.00	X						0	0	0
(8) John Taylor Board Member	1.00 0.00	X						0	0	0
(9) Ron Miele Board Member	2.00 0.00	X						0	0	0
(10)										
(11)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
1b Subtotal								47,917		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								47,917		

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 0

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

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	257,980				
	g	Noncash contributions included in lines 1a-1f	1g	$				
	h	**Total.** Add lines 1a–1f			257,980			
Program Service Revenue			Business Code					
	2a							
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a–2f						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			2	2		
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
				(i) Real / (ii) Personal				
	6a	Gross rents	6a					
	b	Less: rental expenses	6b					
	c	Rental inc. or (loss)	6c					
	d	Net rental income or (loss)						
				(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	7a					
	b	Less: cost or other basis and sales exps.	7b					
	c	Gain or (loss)	7c					
	d	Net gain or (loss)						
	8a	Gross income from fundraising events (not including $ .... of contributions reported on line 1c). See Part IV, line 18	8a	88,917				
	b	Less: direct expenses	8b	33,123				
	c	Net income or (loss) from fundraising events			55,794			
	9a	Gross income from gaming activities. See Part IV, line 19	9a					
	b	Less: direct expenses	9b					
	c	Net income or (loss) from gaming activities						
	10a	Gross sales of inventory, less returns and allowances	10a	75				
	b	Less: cost of goods sold	10b	179				
	c	Net income or (loss) from sales of inventory			-104	-104		
Miscellaneous Revenue			Business Code					
	11a							
	b							
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a–11d						
	12	**Total revenue.** See instructions			313,672	-102	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	51,017	51,017		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	3,903		3,903	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	2,150		2,150	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	24,508	17,156	7,352	
13 Office expenses	1,333	203	1,130	
14 Information technology				
15 Royalties				
16 Occupancy	1,638		1,638	
17 Travel	51		51	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,905	1,905		
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Contract Labor	31,008	31,008		
b Supplies	26,752	26,752		
c Recycling Services	3,374	3,374		
d Insurance	1,024		1,024	
e All other expenses	1,180	103	1,077	
25 Total functional expenses. Add lines 1 through 24e	149,843	131,518	18,325	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		26,249	1	192,421
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		400	4	400
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 19,165			
	b	Less: accumulated depreciation	10b 11,772	6,696	10c	7,393
	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		1,423	15	1,423
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		34,768	16	201,637
Liabilities	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		1,827	25	2,266
	26	**Total liabilities.** Add lines 17 through 25		1,827	26	2,266
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☒ **and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		32,941	27	199,371
	28	Net assets with donor restrictions			28	
		Organizations that do not follow FASB ASC 958, check here ☐ **and complete lines 29 through 33.**				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		32,941	32	199,371
	33	Total liabilities and net assets/fund balances		34,768	33	201,637

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	313,672
2	Total expenses (must equal Part IX, column (A), line 25)	2	149,843
3	Revenue less expenses. Subtract line 2 from line 1	3	163,829
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	32,941
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	2,601
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	199,371

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII [ ]

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	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		
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	3b		

HUBERT L. BERNHEIM, CPA
POST OFFICE DRAWER NINE
HILTON HEAD ISLAND, SC 29938
(843) 671-6005
OLDRENBERT5135@AOL.COM

June 22, 2022

THE OUTSIDE FOUNDATION
50 SHELTER COVE LANE, H
HILTON HEAD ISLAND, SC 29928

Statement of Charges for Services Rendered:

Tax Preparation Fees:		
TAX RETURN PREPARATION FEE-2021	$	850.00
Miscellaneous Fees and Adjustments:		
LESS: CHARITABLE ORGANIZATION DISCOUNT		-425.00
Total fee	$	425.00

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form, as it may be made public.

▶ Go to *www.irs.gov/Form990EZ* for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning , 2021, and ending , 20

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

C Name of organization: THE OUTSIDE FOUNDATION

Number and street (or P.O. box if mail is not delivered to street address): 50 SHELTER COVE LANE — Room/suite: H

City or town, state or province, country, and ZIP or foreign postal code: HILTON HEAD ISLAND, SC 29928

D Employer identification number: 46-4305638

E Telephone number: 8436866996

F Group Exemption Number ▶

G Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶

H Check ▶ ☒ if the organization is **not** required to attach Schedule B (Form 990).

I Website: ▶ WWW.OUTSIDEFOUNDATION.ORG

J Tax-exempt status (check only one) — ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

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

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column (B)) are $500,000 or more, file Form 990 instead of Form 990-EZ . . . ▶ $ 131,790.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I . . . ☒

Revenue	1	Contributions, gifts, grants, and similar amounts received			1	73,442.
	2	Program service revenue including government fees and contracts			2	
	3	Membership dues and assessments			3	
	4	Investment income			4	
	5a	Gross amount from sale of assets other than inventory	5a			
	b	Less: cost or other basis and sales expenses	5b			
	c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)			5c	
	6	Gaming and fundraising events:				
	a	Gross income from gaming (attach Schedule G if greater than $15,000)	6a			
	b	Gross income from fundraising events (not including $ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)	6b	48,302.		
	c	Less: direct expenses from gaming and fundraising events	6c	18,233.		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)			6d	30,069.
	7a	Gross sales of inventory, less returns and allowances	7a	2,746.		
	b	Less: cost of goods sold	7b	2,143.		
	c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)			7c	603.
	8	Other revenue (describe in Schedule O) See Line 8 Stmt			8	7,300.
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶			9	111,414.
Expenses	10	Grants and similar amounts paid (list in Schedule O)			10	
	11	Benefits paid to or for members			11	0.
	12	Salaries, other compensation, and employee benefits			12	36,961.
	13	Professional fees and other payments to independent contractors			13	1,850.
	14	Occupancy, rent, utilities, and maintenance			14	1,201.
	15	Printing, publications, postage, and shipping			15	
	16	Other expenses (describe in Schedule O) See Line 16 Stmt			16	68,815.
	17	**Total expenses.** Add lines 10 through 16 ▶			17	108,827.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)			18	2,587.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)			19	84,824.
	20	Other changes in net assets or fund balances (explain in Schedule O)			20	-54,470.
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶			21	32,941.

For Paperwork Reduction Act Notice, see the separate instructions.

Part II **Balance Sheets** (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II . . . ☒

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	84,014.	22	26,249.
23	Land and buildings	8,062.	23	6,696.
24	Other assets (describe in Schedule O)	3,523.	24	1,823.
25	**Total assets**	95,599.	25	34,768.
26	**Total liabilities** (describe in Schedule O)	10,775.	26	1,827.
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	84,824.	27	32,941.

Part III **Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III . . ☐

What is the organization's primary exempt purpose? PUBLIC EDUCATION

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28	EDUCATION (Grants $ 0.) If this amount includes foreign grants, check here . . . ▶ ☐	28a	19,116.
29	(Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	29a	
30	(Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	30a	
31	Other program services (describe in Schedule O) (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	31a	
32	**Total program service expenses** (add lines 28a through 31a) . . . ▶	32	19,116.

Part IV **List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV . . . ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
JEAN FRUH EXECUTIVE DIRECTOR-SECRETARY	20.00	26,667.	0.	0.
DENISE SPENCER CHAIRPERSON	1.00	0.	0.	0.
MICHAEL OVERTON VICE CHAIRPERSON	1.00	0.	0.	0.
MELISSA KRAUSS DIRECTOR	1.00	0.	0.	0.
BRIAN KINARD TREASURER	1.00	0.	0.	0.
DR. JOHN BATSON BOARD MEMBER	1.00	0.	0.	0.
MICHAEL CERRATI BOARD MEMBER	1.00	0.	0.	0.

Part V **Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V . ☐

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		×
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		×
35a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		×
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		×
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		×
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		×
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; **or** were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		×
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		×
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		×

41 List the states with which a copy of this return is filed ▶

42a The organization's books are in care of ▶ FOUNDATION Telephone no. ▶ (843)686-6996
Located at ▶ 32 SHELTER COVE LANE, HILTON HEAD ISLAND SC ZIP + 4 ▶ 29928

			Yes	No
b	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)?	42b		×
	If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
c	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶	42c		×

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041—**Check here ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43

			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		×
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		×
c	Did the organization receive any payments for indoor tanning services during the year?	44c		×
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		×
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b		×

			Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46		X

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

			Yes	No
47	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	47		X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		X
b	If "Yes," was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	**(b)** Average hours per week devoted to position	**(c)** Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC)	**(d)** Health benefits, contributions to employee benefit plans, and deferred compensation	**(e)** Estimated amount of other compensation
NONE				

f Total number of other employees paid over $100,000 ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	**(b)** Type of service	**(c)** Compensation
NONE		

d Total number of other independent contractors each receiving over $100,000 ▶

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ▶ ☒ **Yes** ☐ **No**

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

Sign Here

Signature of officer — Date: 05/25/2022

Type or print name and title: JEAN FRUH, EXECUTIVE DIRECTOR

Paid Preparer Use Only				
Print/Type preparer's name: HUBERT L BERNHEIM	Preparer's signature	Date: 05/25/2022	Check ☒ if self-employed	PTIN: P01284405
Firm's name ▶ HUBERT L. BERNHEIM, CPA			Firm's EIN ▶ 36-2750133	
Firm's address ▶ POST OFFICE DRAWER NINE, HILTON HEAD ISLAND, SC 29938			Phone no. (843)671-6005	

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

Additional information from your Form 990-EZ: Short Form Return of Organization Exempt from Income Tax

Form 990-EZ: Short Form Return of Organization Exempt from Income Tax
Line 8: Other Revenue — Continuation Statement

Description	Amount
WAIVER OF PPP GRANT	7,300.
Total	7,300.

Form 990-EZ: Short Form Return of Organization Exempt from Income Tax
Line 16: Other Expenses — Continuation Statement

Description	Amount
BANK CHARGES	67.
DUES AND LICENSES	394.
INSURANCE-LIABILITY	510.
MEETING EXPENSE	217.
OFFICE SUPPLIES	361.
OPERATING SUPPLIES	237.
POSTAGE AND SHIPPING	73.
RECYCLING SERVICE EXPENSE	2,518.
PROGRAM SERVICE EXPENSE	16,598.
CHRISTMAS EXPENSE	300.
REPAIRS AND MAINTENANCE	112.
PUBLIC EDUCATION EXPENSE	46,062.
Depreciation	1,366.
Total	68,815.

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2021
Open to Public Inspection

Name of the organization
THE OUTSIDE FOUNDATION

Employer identification number
46-4305638

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
10 ☒ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . .

g Provide the following information about the supported organization(s).

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

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	**(a)** 2017	**(b)** 2018	**(c)** 2019	**(d)** 2020	**(e)** 2021	**(f)** Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	**(a)** 2017	**(b)** 2018	**(c)** 2019	**(d)** 2020	**(e)** 2021	**(f)** Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) . . . 12 ______

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) . . . 14 ______ %

15 Public support percentage from 2020 Schedule A, Part II, line 14 . . . 15 ______ %

16a **33$\frac{1}{3}$% support test—2021.** If the organization did not check the box on line 13, and line 14 is 33$\frac{1}{3}$% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . ▶ ☐

b **33$\frac{1}{3}$% support test—2020.** If the organization did not check a box on line 13 or 16a, and line 15 is 33$\frac{1}{3}$% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . ▶ ☐

17a **10%-facts-and-circumstances test—2021.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . ▶ ☐

b **10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . ▶ ☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	69,810.	104,451.	89,427.	102,310.	124,491.	490,489.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	69,810.	104,451.	89,427.	102,310.	124,491.	490,489.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						490,489.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6	69,810.	104,451.	89,427.	102,310.	124,491.	490,489.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		217.	313.	90.		620.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b		217.	313.	90.		620.
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.)	69,810.	104,668.	89,740.	102,400.	124,491.	491,109.

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	99.87 %
16	Public support percentage from 2020 Schedule A, Part III, line 15	16	99.85 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2021** (line 10c, column (f), divided by line 13, column (f))	17	0.13 %
18	Investment income percentage from **2020** Schedule A, Part III, line 17	18	0.15 %

19a **33 1/3% support tests—2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support tests—2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *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.*	1		
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).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
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.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in* ***Part VI****, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
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.***	6		
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).*	7		
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).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
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.)*	10b		

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**).*

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a governmental entity (see instructions).*

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

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

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

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

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

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

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

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

Section D—Distributions			**Current Year**
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required—*provide details in* ***Part VI***)	5	
6	Other distributions (*describe in* ***Part VI***). See instructions.	6	
7	**Total annual distributions.** Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (*provide details in* ***Part VI***). See instructions.	8	
9	Distributable amount for 2021 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E—Distribution Allocations (see instructions)		**(i)** Excess Distributions	**(ii)** Underdistributions Pre-2021	**(iii)** Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required—*explain in* ***Part VI***). See instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016			
b	From 2017			
c	From 2018			
d	From 2019			
e	From 2020			
f	**Total** of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in* ***Part VI***. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* ***Part VI***. See instructions.			
7	**Excess distributions carryover to 2022.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2017 . . .			
b	Excess from 2018 . . .			
c	Excess from 2019 . . .			
d	Excess from 2020 . . .			
e	Excess from 2021 . . .			

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 G (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization: THE OUTSIDE FOUNDATION

Employer identification number: 46-4305638

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

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

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

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

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

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

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

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

		(a) Event #1 PAGE ISLAND (event type)	(b) Event #2 PADDLE BATTLE (event type)	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts		44,370.		44,370.
	2 Less: Contributions		14,953.		14,953.
	3 Gross income (line 1 minus line 2)		29,417.		29,417.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				29,417.

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

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

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

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

b If "No," explain: ____

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

b If "Yes," explain: ____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

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

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

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ______ and the amount of gaming revenue retained by the third party ▶ $ ______

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

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

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization	Employer identification number
THE OUTSIDE FOUNDATION	46-4305638

Pt I, Line 8:

Description: WAIVER OF PPP GRANT $7,300

Pt I, Line 16:

Description: BANK CHARGES $67

Description: DUES AND LICENSES $394

Description: INSURANCE-LIABILITY $510

Description: MEETING EXPENSE $217

Description: OFFICE SUPPLIES $361

Description: OPERATING SUPPLIES $237

Description: POSTAGE AND SHIPPING $73

Description: RECYCLING SERVICE EXPENSE $2,518

Description: PROGRAM SERVICE EXPENSE $16,598

Description: CHRISTMAS EXPENSE $300

Description: REPAIRS AND MAINTENANCE $112

Description: PUBLIC EDUCATION EXPENSE $46,062

Description: Depreciation $1,366

Pt I, Line 20:

Description: TRANSFER OF INVESTMENT FUND TO COMMUNITY FOUNDATION -$54,470

Pt II, Line 24:

Description: INVENTORY Beginning of Year: $3,523 End of Year: $1,823

Pt II, Line 26:

Description: PAYROLL TAXES WITHHELD Beginning of Year: $1,280 End of Year: $1,827

Description: CREDIT CARD PAYABLE Beginning of Year: $2,195 End of Year: $0

Description: ADVANCE FROM SBA OF PPP FUNDS Beginning of Year: $7,300 End of Year: $0

Form **8879-TE**

Department of the Treasury
Internal Revenue Service

IRS *e-file* Signature Authorization for a Tax Exempt Entity

For calendar year 2021, or fiscal year beginning ______, 2021, and ending ______, 20____

▶ **Do not send to the IRS. Keep for your records.**

▶ **Go to *www.irs.gov/Form8879TE* for the latest information.**

OMB No. 1545-0047

2021

Name of filer: THE OUTSIDE FOUNDATION

EIN or SSN: 46-4305638

Name and title of officer or person subject to tax: JEAN FRUH, EXECUTIVE DIRECTOR

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a,** or **10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b,** or **10b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	**Form 990** check here ▶ ☐	b	**Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	1b	
2a	**Form 990-EZ** check here ▶ ☒	b	**Total revenue,** if any (Form 990-EZ, line 9)	2b	111,414.
3a	**Form 1120-POL** check here ▶ ☐	b	**Total tax** (Form 1120-POL, line 22)	3b	
4a	**Form 990-PF** check here ▶ ☐	b	**Tax based on investment income** (Form 990-PF, Part V, line 5)	4b	
5a	**Form 8868** check here ▶ ☐	b	**Balance due** (Form 8868, line 3c)	5b	
6a	**Form 990-T** check here ▶ ☐	b	**Total tax** (Form 990-T, Part III, line 4)	6b	
7a	**Form 4720** check here ▶ ☐	b	**Total tax** (Form 4720, Part III, line 1)	7b	
8a	**Form 5227** check here ▶ ☐	b	**FMV of assets at end of tax year** (Form 5227, Item D)	8b	
9a	**Form 5330** check here ▶ ☐	b	**Tax due** (Form 5330, Part II, line 19)	9b	
10a	**Form 8038-CP** check here ▶ ☐	b	**Amount of credit payment requested** (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) ______, (EIN) ______ and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☐ I authorize ______ (**ERO firm name**) to enter my PIN ☐☐☐☐☐ as my signature (**Enter five numbers, but do not enter all zeros**)

on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☒ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶ Date ▶ 05/25/2022

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

5 7 0 4 1 2 5 1 3 5 5

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ▶ Date ▶ 05/25/2022

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So