### **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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. 2022 Open to Public Inspection

|                                | artment of I<br>mal Revenu  | the Treasury<br>Le Service |                                      |                              | m990 for instruction                       |                                                     |             |                       |                | Inspe                                  |         |          |
|--------------------------------|-----------------------------|----------------------------|--------------------------------------|------------------------------|--------------------------------------------|-----------------------------------------------------|-------------|-----------------------|----------------|----------------------------------------|---------|----------|
| A                              | كمعتقلية أببو الأربي فيستنص |                            | lendar year, or tax ye               |                              | 5/1/2022                                   | , and e                                             |             |                       | /30/2023       |                                        |         |          |
| В                              | Check if a                  | applicable:                | C Name of organization               | HARPER'S C                   | HOICE COMMUNITY                            |                                                     |             |                       |                | cation numbe                           | r       |          |
|                                | Address o                   | change                     | Doing business as                    |                              |                                            |                                                     |             |                       |                |                                        |         |          |
| $\square$                      | Name cha                    | ange                       |                                      |                              | delivered to street addres                 | s) Room/suite                                       |             | 52-09934              |                |                                        |         |          |
|                                |                             | 5                          | 5440 OLD TUCKER                      | ROW                          |                                            |                                                     |             | E Teleph              | one number     |                                        |         |          |
|                                | Initial retu                | ırn                        | City or town                         |                              | State                                      | ZIP code                                            |             | (410) 730             | )-3888         |                                        |         |          |
|                                | Final return                | /terminated                | COLUMBIA<br>Foreign country name     | Eoroign                      | <u>MD</u>                                  | 21044<br>Foreign postal                             | anda        |                       | <b></b>        |                                        |         |          |
|                                | Amended                     | return                     | Foreign country name                 | e Foleign                    | province/state/county                      | Foreign posta                                       | code        | G Gross               | receints \$    |                                        | 8'      | 33,897   |
|                                | Amendeu                     | return                     |                                      |                              |                                            |                                                     |             | Y                     | -              |                                        |         |          |
|                                | Applicatio                  | n pending                  | F Name and address of                |                              |                                            |                                                     | 1           | nis a group retu      | *®a            |                                        | Yes     | X No     |
|                                |                             |                            | REBECCA BEALL 5                      | 5456 ENDICOTT                | LANE, COLUMBIA,                            | MD 21044                                            | -           | e all subordir        | iline.         |                                        | Yes     | No       |
| Т                              | Tax-exen                    | npt status:                | 501(c)(3) X 50                       | 01(c) ( 4                    | (insert no.) 4947                          | (a)(1) or 527                                       | lf "        | No," attach a         | a list. See in | structions                             |         |          |
| J                              | Website                     | har                        | perschoice.org                       |                              |                                            |                                                     | H(c) Gro    | ou <b>p e</b> xemptio | on number      |                                        |         |          |
| к                              | Form of a                   | organization               | X Corporation                        | Trust Associa                | tion Other                                 | I Yes                                               | ar of forma | 14                    |                | tate of legal do                       | micile  | MD       |
|                                | art I                       |                            |                                      |                              |                                            |                                                     |             | 190                   |                | ······································ |         | MD       |
|                                |                             |                            | <b>mmary</b><br>escribe the organiza | tion's mission or            | most significant acti                      | vition: HCC                                         | `A is a s   | ommunity              | organiz        |                                        |         |          |
| ė                              | 1                           |                            | ters programs and sp                 |                              | -                                          | 10 100 March 10 10 10 10 10 10 10 10 10 10 10 10 10 |             | onniunity             | / organiza     | ation that                             |         |          |
| Activities & Governance        |                             |                            | ible for the operation               |                              |                                            |                                                     |             |                       |                |                                        |         |          |
| ern                            |                             |                            |                                      |                              |                                            | All and a second second                             |             |                       |                |                                        |         |          |
| Š                              | 2                           | Check tl                   |                                      |                              | continued its operati                      |                                                     | of more     | e than 25°            |                | et assets.                             |         | -        |
| ා<br>න                         | 3                           |                            | of voting members of                 |                              |                                            |                                                     | · · ·       | · · ·                 | 3              |                                        |         | 5        |
| ŝ                              | 4                           |                            | of independent votir                 |                              |                                            |                                                     |             |                       | 4              |                                        |         | 5        |
| /itie                          | 5                           |                            | mber of individuals e                |                              |                                            |                                                     |             |                       | 5              |                                        |         | 12       |
| ţ                              | 6                           |                            | mber of volunteers (e                |                              |                                            |                                                     |             |                       | 6              |                                        |         | 15       |
| Ā                              | 7a                          |                            | related business reve                |                              |                                            |                                                     |             |                       | 7a             |                                        |         | 0        |
|                                | b                           | Net unre                   | elated business taxal                | ole income from f            | <sup>-</sup> orm 990-T, <b>Part I</b> , li | ne 11 . <u></u>                                     |             | <u> </u>              | 7b             |                                        |         | 0        |
|                                |                             |                            |                                      |                              |                                            |                                                     |             | Prior Year            |                | Currer                                 | nt Year |          |
| e                              | 8                           | Contribu                   | itions and grants (Pa                | irt VIII, line 1h)           | · · · · · · · · · · · ·                    |                                                     |             |                       | 101,248        |                                        |         | 71,389   |
| Revenue                        | 9                           | Program                    | n service revenue (Pa                | art VIII, line 2g)           | 🚸 y 🍋 y Norres                             |                                                     |             |                       | 335,787        |                                        | 46      | 62,413   |
| sev                            | 10                          |                            | ent income (Part VIII                |                              |                                            |                                                     |             |                       | 28             |                                        |         | 95       |
| œ                              | 11                          |                            | venue (Part VIII, col                |                              |                                            |                                                     |             |                       | 0              |                                        |         | 0        |
|                                | 12                          |                            | enue—add lines 8 thro                |                              |                                            |                                                     |             |                       | 737,063        |                                        | 83      | 33,897   |
|                                | 13                          |                            | and similar amounts                  |                              |                                            |                                                     |             |                       | 0              |                                        |         | 0        |
|                                | 14                          |                            | paid to or for memb                  |                              |                                            |                                                     |             |                       | 0              |                                        |         | 0        |
| es                             | 15                          |                            | other compensation,                  |                              |                                            | lines 5–10) .                                       |             | 4                     | 148,629        |                                        | 52      | 27,693   |
| Expenses                       | 16a                         |                            | ional fundraising fees               |                              |                                            |                                                     |             |                       | 0              |                                        |         | 0        |
| ð                              | b                           |                            | ndraising expenses (                 |                              |                                            | 0                                                   |             |                       |                |                                        |         |          |
| ш                              | 17                          |                            | kpenses (Part IX, col                |                              |                                            |                                                     |             | 2                     | 232,198        |                                        | 2       | 93,963   |
|                                | 18                          | Total ex                   | penses. Add lines 13                 | -17 (must equal              | Part IX, column (A),                       | line 25)                                            |             | 6                     | 680,827        |                                        | 82      | 21,656   |
|                                | 19                          | Revenu                     | e less expenses, <b>Su</b>           | otr <b>act li</b> ne 18 fron | n line 12                                  |                                                     | L           |                       | 56,236         |                                        |         | 12,241   |
| Net Assets or<br>Fund Balances |                             |                            | . ( <i>1</i>                         | r §                          |                                            |                                                     | Beginn      | ing of Curr           |                | End o                                  | of Year |          |
| sets                           | 20                          |                            | sets (Part X, line 16)               |                              |                                            |                                                     |             |                       | 189,152        |                                        |         | 11,300   |
| et As                          | 21                          |                            | bilities (Part X, line 2             |                              |                                            |                                                     |             |                       | 265,267        |                                        |         | 75,174   |
| ž                              | 22                          |                            | ets or fund balances.                | Subtract line 21             | from line 20                               | · · · · · · · ·                                     |             |                       | 223,885        |                                        | 2;      | 36,126   |
|                                | art ll                      |                            | nature Block                         |                              |                                            |                                                     |             |                       |                |                                        |         |          |
|                                |                             |                            | y, I declare that I have example     |                              |                                            |                                                     |             |                       |                | ;                                      |         |          |
| and                            | Deller It I                 | s true, corre              | ect, and complete. Declarat          | ton of preparer (other       | than officer) is based on a                | in mormation of whic                                | n prepare   | r nas any kn          | owiedye        |                                        |         |          |
| Si                             | gn                          | 0                          |                                      |                              |                                            |                                                     |             | l                     |                |                                        |         |          |
| He                             |                             |                            |                                      |                              |                                            |                                                     |             |                       |                |                                        |         |          |
|                                |                             | SIEF                       | PHEN INGLEY                          |                              |                                            | VILL                                                | AGE M       | ANAGER                |                |                                        |         |          |
|                                |                             |                            | Type or print name and tit           | ue                           | Propararia ciazativa                       | 1                                                   | 0           | T                     |                | PTIN                                   |         |          |
| n.                             | . d                         | Prin                       | t/Type preparer's name               |                              | Preparer's signature                       |                                                     | Dat         | e                     | Check          | X if                                   |         |          |
| Pa                             |                             | DE                         | BORAH L HERMAN                       |                              |                                            |                                                     | 7/2         | 27/2023               | self-emple     |                                        | 0430    | 6        |
|                                | eparer                      | -                          |                                      | AH L. HERMAN,                | СРА                                        |                                                     | •           | Firm's EIN            | 52-13          | 02736                                  |         |          |
| US                             | e Only                      | y                          |                                      |                              | OOK CT., ELLICOT                           |                                                     | 42          | Phone no.             |                | 461-6992                               |         |          |
|                                |                             | b                          |                                      |                              |                                            |                                                     |             |                       |                |                                        | 1       | <u> </u> |
| -ivi9                          | iy the Ih                   | າວ uiscus                  | s this return with the               |                              | above coee mstruc                          |                                                     |             |                       |                | .  X Y                                 | es      | No       |

|                  | <u> (2022)</u> | HARPER'S CHOICE COMMUNITY ASSOCIATION, INC.                                                                                                                                                                               | 52-0993424           | Page <b>2</b> |
|------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------|
| Pa               | nt 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 d      | escribe the organization's mission:                                                                                                                                                                                       |                      |               |
|                  |                | S A COMMUNITY ORGANIZATION THAT ADMINISTERS PROGRAMS AND SPECIAL EVENTS F                                                                                                                                                 |                      |               |
|                  | RESIDE         | NTS OF THE COMMUNITY. IT IS ALSO RESPONSIBLE FOR THE OPERATION, MAINTENANC                                                                                                                                                | E AND                |               |
|                  | DEVEL          | DPMENT OF COMMUNITY FACILITIES. IT ALSO ENFORCES COMMUNITY COVENANTS.                                                                                                                                                     |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
| 2                | Did the        | organization undertake any significant program services during the year which were not listed on                                                                                                                          |                      |               |
|                  |                | Form 990 or 990-EZ?                                                                                                                                                                                                       | Yes                  | X No          |
|                  | •              | describe these new services on Schedule O.                                                                                                                                                                                | ies ies              |               |
| 3                |                | organization cease conducting, or make significant changes in how it conducts, any program                                                                                                                                | 6                    |               |
| v                | services       |                                                                                                                                                                                                                           |                      | X No          |
|                  |                | describe these changes on Schedule O.                                                                                                                                                                                     | Yes                  | X No          |
| 4                |                |                                                                                                                                                                                                                           |                      |               |
| 4                | Describe       | e the organization's program service accomplishments for each of its three largest progra <b>m s</b> erv <b>ice</b><br>s. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and a | es, as measured by   |               |
|                  |                | expenses, and revenue, if any, for each program service reported.                                                                                                                                                         | mocations to others, |               |
|                  | the total      | expenses, and revenue, it any, for each program service reported.                                                                                                                                                         |                      |               |
|                  | (Code:         | ) (Expenses \$ 258,276 including grants of \$ 259,972) (Rever                                                                                                                                                             |                      |               |
| - <del>1</del> a | ,              | AM EXPENSES - EXPENSES OF ADMINISTERING PROGRAMS, CLASSES, AND INSTRUCTO                                                                                                                                                  |                      | 0)            |
|                  | PARTIC         |                                                                                                                                                                                                                           | RS FOR COMMUNI       | Y             |
|                  | PARIIC         | PATION                                                                                                                                                                                                                    |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
| 4b               | (Code:         | ) (Expenses \$ 461,059 including grants of \$ 95,561 ) (Reven                                                                                                                                                             | ue \$ 460,           | 167)          |
|                  | FACILIT        | IES AND EQUIPMENT RENTAL EXPENSES - COSTS INCURRED IN RENTING AND MAINTAIN                                                                                                                                                | ING SPACE USED E     |               |
|                  | COMML          | INITY FOR BUSINESS AND SOCIAL MEETINGS                                                                                                                                                                                    |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
| 4c               | (Code:         | (Expenses \$ 15,483 including grants of \$ 12,928 ) (Reven                                                                                                                                                                |                      | 710)          |
| 40               |                | L EVENTS EXPENSES - EXPENSES INCURRED IN ADMINISTERING SPECIAL YEARLY AND I                                                                                                                                               |                      | 710)          |
|                  |                | PROVIDED FOR COMMUNITY                                                                                                                                                                                                    | NON-INLOUINING       |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           | * *                  |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |
| 4d               | Other pr       | ogram services (Describe on Schedule O.)                                                                                                                                                                                  |                      |               |
|                  | (Expens        |                                                                                                                                                                                                                           | 1,540)               |               |
| 4e               |                | gram service expenses 742,929                                                                                                                                                                                             | <i>_</i>             |               |
|                  |                |                                                                                                                                                                                                                           |                      |               |

Form 990 (2022) HARPER'S CHOICE COMMUNITY ASSOCIATION, INC. Part IV Checklist of Required Schedules

| 52-0993424 Page | ు |
|-----------------|---|
| 02-0990424 Page | 3 |

| بالعلية بكابر |                                                                                                                                                                                                                                | <u></u> | 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)                                                                                                                  |         |     | 1        |
| _             | election in effect during the tax year? If "Yes," complete Schedule C, Part II.                                                                                                                                                | 4       |     | <b> </b> |
| 5             | Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues,                                                                                                           | _       |     |          |
| 6             | assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III . District and Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | 5       |     | X        |
| 0             | 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,                                                                                                                      |         |     | <u> </u> |
|               | the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>                                                                                                                    | 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                                                                                                              |         |     |          |
| 40            | negotiation services? If "Yes," complete Schedule D, Part IV                                                                                                                                                                   | 9       |     | <u>X</u> |
| 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      |     |          |
| 11            | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,                                                                                                                   | 10      |     | X        |
| ••            | VII, VIII, IX, or X, as applicable.                                                                                                                                                                                            |         |     |          |
| а             | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete                                                                                                                |         |     |          |
|               | Schedule D, Part VI                                                                                                                                                                                                            | 11a     | Х   |          |
| b             |                                                                                                                                                                                                                                |         |     |          |
|               | of its total assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part VII.                                                                                                                                      | 11b     |     | X        |
| С             | Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more                                                                                                                   |         |     |          |
| لم            | of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>                                                                                                                              | 11c     |     | <u> </u> |
| 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        |
| е             | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.                                                                                                         | 11e     | Х   | <u> </u> |
| f             |                                                                                                                                                                                                                                |         |     |          |
| -             | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.                                                                                                        | 11f     |     | х        |
| 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)? <i>If "Yes," complete Schedule E</i> .                                                                                                                     | 13      |     | X        |
| 14a<br>b      | Did the organization maintain an office, employees, or agents outside of the United States?<br>Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,                                | 14a     |     | <u>X</u> |
| u             | 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      |     | Х        |
| 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      |     | <u>X</u> |
| 17            | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services                                                                                                                    |         |     |          |
| 10            | on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions.                                                                                                                       | 17      |     | <u> </u> |
| 18            | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>                                          | 18      |     | х        |
| 19            | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?                                                                                                                   |         |     | <u> </u> |
|               | If "Yes," complete Schedule G, Part III.                                                                                                                                                                                       | 19      |     | x        |
| 20a           | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.                                                                                                                                   | 20a     |     | X        |
| b             | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?                                                                                                                   | 20b     |     |          |
| 21            | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or                                                                                                                    |         |     |          |
|               | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.                                                                                                                             | 21      |     | X        |

| Form     | HARPER'S CHOICE COMMUNITY ASSOCIATION, INC. 52-099                                                                                                                                                                          | 3424       | P   | age <b>4</b>      |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----|-------------------|
| Par      | t 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                 |
|          | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?                                                                                                                           | 24b        |     |                   |
| с        | Did the organization maintain an escrow account other than a refunding escrow at any time during the year                                                                                                                   |            |     | ĺ                 |
|          | to defease any tax-exempt bonds?                                                                                                                                                                                            | 24c        |     | ļ                 |
|          | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?                                                                                                                     | 24d        |     | <u> </u>          |
| 258      | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit                                                                                                                | 0.5        |     |                   |
| h        | transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>                                                                                                                        | <u>25a</u> |     | X                 |
| U        | 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                                                                                                             | 250        |     |                   |
|          | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%                                                                                                                     |            |     | l                 |
|          | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II                                                                                                                          | 26         |     | x                 |
| 27       | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key                                                                                                           |            |     |                   |
|          | employee, creator or founder, substantial contributor or employee thereof, a grant selection committee                                                                                                                      |            |     |                   |
|          | member. or to a 35% controlled entity (including an employee thereof) or family member of any of these                                                                                                                      |            |     |                   |
|          | persons? If "Yes," complete Schedule L, Part III                                                                                                                                                                            | 27         |     | Х                 |
| 28       | Was the organization a party to a business transaction with one of the following parties (see the Schedule L,                                                                                                               |            |     |                   |
|          | Part IV, instructions for applicable filing thresholds, conditions, and exceptions):                                                                                                                                        |            |     |                   |
| а        | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If                                                                                                            |            |     |                   |
|          | "Yes," complete Schedule L, Part IV                                                                                                                                                                                         | 28a        |     | X<br>X            |
| b        | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV                                                                                                                             | 28b        |     | <u>X</u>          |
| С        | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If                                                                                                                    |            |     |                   |
| • •      | "Yes," complete Schedule L, Part IV                                                                                                                                                                                         | 28c        |     | X                 |
| 29       | Did the organization receive more than \$25,000 in <b>non-cash</b> contributions? <i>If "Yes," complete Schedule M</i>                                                                                                      | 29         |     | Х                 |
| 30       | Did the organization receive contributions of art, <b>his</b> torical treasures, or other similar assets, or qualified                                                                                                      |            |     | ~                 |
| 24       | conservation contributions? If "Yes," complete Schedule M.<br>Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I                                            | 30         |     | X                 |
| 31<br>32 | Did the organization regulate, terminate, or dissolve and cease operations? If "res," complete schedule N, Part F<br>Did the organization sell, exchange, dispose of or transfer more than 25% of its net assets? If "Yes," | 31         |     | <u> </u>          |
| J2.      | complete Schedule N, Part II                                                                                                                                                                                                | 32         |     | х                 |
| 33       | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations                                                                                                                  | 52         |     |                   |
| •••      | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I                                                                                                                                                   | 33         |     | х                 |
| 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         |     | Х                 |
| 35a      | Did the organization have a controlled entity within the meaning of section 512(b)(13)?                                                                                                                                     | 35a        |     | Х                 |
| 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         |     | Х                 |
| 37       | Did the organization conduct more than 5% of its activities through an entity that is not a related organization                                                                                                            |            |     | с                 |
|          | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.                                                                                                               | 37         |     | <u>    X     </u> |
| 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         |     | <u> </u>          |
| Par      | t V Statements Regarding Other IRS Filings and Tax Compliance                                                                                                                                                               |            | 1   |                   |
|          | Check if Schedule O contains a response or note to any line in this Part V                                                                                                                                                  | · · ·      |     |                   |
| 4 -      | Enter the number reported in hey 2 of Earm 4000. Enter 0. March and the busil                                                                                                                                               | l          | Yes | No                |
| 1a<br>b  | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1a10Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b0                                                          |            |     |                   |
| и<br>С   | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b0<br>Did the organization comply with backup withholding rules for reportable payments to vendors and                                     |            |     |                   |
| U        | reportable gaming (gambling) winnings to prize winners?                                                                                                                                                                     | 1c         | х   |                   |
|          |                                                                                                                                                                                                                             |            | ~   |                   |

|        | HARPER'S CHOICE COMMUNITY ASSOCIATION, INC. 52-09                                                                                  | 93424      | F        | Page 5       |
|--------|------------------------------------------------------------------------------------------------------------------------------------|------------|----------|--------------|
| Par    | t V Statements Regarding Other IRS Filings and Tax Compliance (continued)                                                          |            | Yes      | No           |
| 2a     | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax                                                    |            |          | - 11 s       |
|        | Statements, filed for the calendar year ending with or within the year covered by this return 2a 11                                | 2          |          | -Ner e       |
| 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         |          | Х            |
| 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                                                                                    |            | 1        |              |
|        | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).                |            |          | i vi<br>Ne S |
| 5a     | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?                              | 5a         |          | X            |
| b      | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?                   | 5b         |          | X            |
| с      | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?                                                                  | 5c         | <u> </u> | X            |
| 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                     |            | <u> </u> |              |
|        | gifts were not tax deductible?                                                                                                     | 6b         |          |              |
| 7      | Organizations that may receive deductible contributions under section 170(c).                                                      |            |          | - <u></u>    |
| а      | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods                        |            |          |              |
|        | and services provided to the payor?                                                                                                | 7a         |          | X            |
| b      | 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         |          | X            |
| d      | If "Yes," indicate the number of Forms 8282 filed during the year                                                                  |            |          |              |
| e      | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                    | 7e         | 1 ···    | X            |
| f      | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?                       | 7f         |          | X            |
| g      | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   | 7g         |          |              |
| 9<br>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                               |            |          | 1            |
| -      | sponsoring organization have excess business holdings at any time during the year?                                                 | 8          |          |              |
| 9      | Sponsoring organizations maintaining donor advised funds.                                                                          |            |          | 11.0         |
| а      | Did the sponsoring organization make any taxable distributions under section 4966?                                                 | 9a         |          |              |
| b      | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?                                  | 9b         | <u> </u> |              |
| 10     | Section 501(c)(7) organizations. Enter:                                                                                            |            |          |              |
| а      | Initiation fees and capital contributions included on Part VIII, line 12                                                           |            |          |              |
| b      | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b                                    |            |          |              |
| 11     | Section 501(c)(12) organizations. Enter:                                                                                           |            |          |              |
| а      | Gross income from members or shareholders                                                                                          |            |          |              |
| b      | Gross income from other sources (Do not net amounts due or paid to other sources                                                   |            |          |              |
|        | against amounts due or received from them.)                                                                                        |            |          |              |
| 12a    | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?                         | 12a        |          |              |
| b      | If "Yes," enter the amount of tax-exempt interest received or accrued during the year                                              |            | t        |              |
| 13     | Section 501(c)(29) qualified nonprofit health insurance issuers.                                                                   | -          |          |              |
| а      | Is the organization licensed to issue qualified health plans in more than one state?                                               | 13a        | 1        |              |
|        | Note: See the instructions for additional information the organization must report on Schedule O.                                  |            |          |              |
| b      | Enter the amount of reserves the organization is required to maintain by the states in which                                       |            |          |              |
|        | the organization is licensed to issue qualified health plans                                                                       |            |          |              |
| с      | Enter the amount of reserves on hand                                                                                               | <b>-</b> - |          |              |
| 14a    | Did the organization receive any payments for indoor tanning services during the tax year?                                         | 14a        | 1        | Х            |
| 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                      |            | <u> </u> |              |
| -      | excess parachute payment(s) during the year?                                                                                       | 15         |          | X            |
|        | If "Yes," see the instructions and file Form 4720, Schedule N.                                                                     |            | <u> </u> | <u> </u>     |
| 40     |                                                                                                                                    | 40         |          |              |
| 16     | Is the organization an educational institution subject to the section 4968 excise tax on net investment income?                    | 16         |          | X            |
|        | If "Yes," complete Form 4720, Schedule O.                                                                                          |            |          |              |
| 17     | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities                      |            |          |              |
|        | that would result in the imposition of an excise tax under section 4951, 4952, or 4953?                                            | 17         |          | <u> </u>     |
|        | If "Yes," complete Form 6069.                                                                                                      |            | <u>l</u> |              |
|        |                                                                                                                                    |            |          |              |

| Form 9  | )<br>(2022)   | HARPER'S CHOICE COMMUNITY ASSOCIATION, INC.                                                          | 52-099                                | 3424                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | P                      | age <b>6</b> |
|---------|---------------|------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|--------------|
| Par     | t VI          | Governance, Management, and Disclosure For each "Yes" response to lines 2 through                    | h 7b below, and for                   | a "No'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | I                      | _¥           |
|         |               | response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chang               |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        | ions.        |
|         |               | Check if Schedule O contains a response or note to any line in this Part VI                          |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        | Х            |
| Sect    | ion A.        | Governing Body and Management                                                                        |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
|         |               |                                                                                                      | · · · · · · · · · · · · · · · · · · · |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Yes                    | No           |
| 1a      | Enter t       | e number of voting members of the governing body at the end of the tax year                          | 1a 5                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | y ža                   |              |
|         | If there      | are material differences in voting rights among members of the governing body, or                    |                                       | n se go a<br>Constante<br>Constante                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | n gara<br>19           |              |
|         | if the g      | overning body delegated broad authority to an executive committee or similar                         |                                       | and the second s | n an san<br>1995 - San |              |
|         |               | tee, explain on Schedule O.                                                                          |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        | 122          |
| b       | Enter t       | e number of voting members included on line 1a, above, who are independent                           | 1b 5                                  | a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1<br>1 80              |              |
| 2       |               | officer, director, trustee, or key employee have a family relationship or a business relations       | hip with                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
|         |               | er officer, director, trustee, or key employee?                                                      |                                       | 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        | X            |
| 3       | -             | organization delegate control over management duties customarily performed by or under               | the direct                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
|         |               | sion of officers, directors, trustees, or key employees to a management company or other p           |                                       | 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        | х            |
| 4       |               | organization make any significant changes to its governing documents since the prior Form 990 wa     |                                       | 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        | X            |
| 5       |               | organization become aware during the year of a significant diversion of the organization's a         |                                       | 5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        | X            |
| 6       |               | organization have members or stockholders?                                                           |                                       | 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Х                      |              |
| -<br>7a |               | organization have members, stockholders, or other persons who had the power to elect or              | annoint                               | <b>—</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                        |              |
|         |               | nore members of the governing body?                                                                  | appoint                               | 7a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | х                      |              |
| b       |               | governance decisions of the organization reserved to (or subject to approval by) members             | • • • • •                             | <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                        |              |
| 5       |               | Iders, or persons other than the governing body?                                                     | 1                                     | 7b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | х                      |              |
| 8       |               | organization contemporaneously document the meetings held or written actions undertake               | n during                              | 10                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                        |              |
| Ū       |               | r by the following:                                                                                  | raamg                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
| а       | -             |                                                                                                      |                                       | 8a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Х                      |              |
| b       |               | ommittee 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 re      | ached                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
| Ū       | at the c      | rganization's mailing address? If "Yes," provide the names and addresses on Schedule O.              |                                       | 9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        | х            |
| Sect    |               | Policies (This Section B requests information about policies not required by the                     |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | )                      |              |
|         |               |                                                                                                      |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Yes                    | No           |
| 10a     | Did the       | organization have local chapters, branches, or affiliates?                                           |                                       | 10a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                        | Х            |
| b       |               | did the organization have written policies and procedures governing the activities of such           | chapters.                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
|         |               | s, and branches to ensure their operations are consistent with the organization's exempt pu          |                                       | 10b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                        |              |
| 11a     |               | organization provided a complete copy of this Form 990 to all members of its governing body befo     |                                       | 11a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Х                      |              |
| b       |               | e on Schedule O the process, if any, used by the organization to review this Form 990.               |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
| 12a     |               | organization have a written conflict of interest policy? If "No," go to line 13                      |                                       | 12a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Х                      |              |
|         |               | ficers, directors, or trustees, and key employees required to disclose annually interests that could | give rise to conflicts?               | 12b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Х                      |              |
| С       |               | organization regularly and consistently monitor and enforce compliance with the policy? If           | •                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
|         |               | e on Schedule O how this was done 🔨 🌙                                                                |                                       | 12c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Х                      |              |
| 13      |               | organization have a written whistleblower policy?                                                    |                                       | 13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Х                      |              |
| 14      |               | organization have a written document retention and destruction policy?                               |                                       | 14                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Х                      |              |
| 15      |               | process for determining compensation of the following persons include a review and appro             |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
|         |               | ident persons, comparability data, and contemporaneous substantiation of the deliberation            | •                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
| а       |               | anization's CEO, Executive Director, or top management official.                                     |                                       | 15a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Х                      |              |
| b       |               | fficers or key employees of the organization                                                         |                                       | 15b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Х                      |              |
|         |               | to line 15a or 15b, describe the process on Schedule O. See instructions.                            |                                       | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        |              |
| 16a     |               | organization invest in, contribute assets to, or participate in a joint venture or similar arrang    | ement                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
|         |               | axable entity during the year?                                                                       |                                       | 16a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                        | Х            |
| b       | If "Yes,      | did the organization follow a written policy or procedure requiring the organization to evalu        | ate its                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
|         |               | ation in joint venture arrangements under applicable federal tax law, and take steps to safe         |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
|         | the org       | anization's exempt status with respect to such arrangements?                                         | -<br>                                 | 16b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                        |              |
| Sect    | ion C.        | Disclosure                                                                                           |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
| 17      | List the      | states with which a copy of this Form 990 is required to be filed                                    |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
| 18      | Sectior       | 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990            | , and 990-T (section                  | 501(c)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |              |
|         |               | y) available for public inspection. Indicate how you made these available. Check all that ap         | oly.                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
|         | trans another |                                                                                                      | plain on Schedule O)                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
| 19      |               | e on Schedule O whether (and if so, how) the organization made its governing documents,              | conflict of interest po               | licy,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |              |
|         |               | ancial statements available to the public during the tax year.                                       |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
| 20      | State tl      | e name, address, and telephone number of the person who possesses the organization's b               |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
|         |               | HARPER'S CHOICE COMMUNITY ASSOC.                                                                     | (410) 730-3888                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |
| -       |               | 5440 OLD TUCKER ROW, COLUMBIA, MD 21044                                                              |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |              |

| Form 99t (2022) | HARPER'S CHOICE COMMUNITY ASSOCIATION, INC.                                   | 52-0993424 | Page <b>7</b> |
|-----------------|-------------------------------------------------------------------------------|------------|---------------|
| Part VII        | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compens |            | 1 490         |
|                 | Employees, and Independent Contractors                                        |            |               |
|                 | Check if Schedule O contains a response or note to any line in this Part VII  |            |               |
|                 | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employe |            |               |

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

• 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.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                       | T                      |                       |         |                | ·                            |        | T                        | · · · · · · · · · · · · · · · · · |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------|-----------------------|---------|----------------|------------------------------|--------|--------------------------|-----------------------------------|--------------------------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                        |                       |         | C)             | đ                            |        |                          |                                   |                          |
| (A)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | (B)                   | (do                    | not c                 |         | sition<br>more | e than o                     | ine    | (D)                      | (E)                               | (F)                      |
| Name and title                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Average               | box,                   | unle                  | ss pe   | erson          | is both                      | an     | Reportable               | Reportable                        | Estimated amount         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | hours<br>per week     |                        | T                     | 1       |                | or/truste                    |        | compensation<br>from the | compensation<br>from related      | of other                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | (list any             | Individual or director | Inst                  | Officer | Key            |                              | Former | organization (W-2/       | organizations (W-2/               | compensation<br>from the |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | hours for<br>related  | irec l                 | E.                    | Ĕ       | em             | loy                          | ler    | 1099-MISC/<br>1099-NEC)  | 1099-MISC/                        | organization and         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | organizations         | or director            | Institutional trustee |         | Key employee   | Highest compensated employee |        | 1099-NEC)                | 1099-NEC)                         | related organizations    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | below<br>dotted line) | uste                   | a a                   |         | ee             | Iper                         |        |                          |                                   |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | dotted line)          | Ő                      | tee                   |         |                | Isat                         |        |                          |                                   |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ୍ୟୁ                   | 51                     | 1                     |         |                | å                            |        |                          |                                   |                          |
| (1) STEPHEN INGLEY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 40.00                 |                        |                       |         |                |                              |        |                          |                                   |                          |
| VILLAGE MANAGER/SECRETARY/TREASURER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 0.00                  |                        | 1.04%                 | Х       |                | Х                            |        | 103,763                  |                                   | 6,226                    |
| (2) REBECCA BEALL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2.00                  |                        |                       |         |                |                              |        |                          |                                   |                          |
| BOARE CHAIR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>0.</b> 00          | X                      |                       | Х       |                |                              |        |                          |                                   |                          |
| (3) JOEL HUREWITZ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2.00                  |                        |                       |         |                |                              |        |                          |                                   |                          |
| BOARD VICE CHAIR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 0.00                  | X                      |                       | X       |                |                              |        |                          |                                   |                          |
| (4) FOSALIND DANNER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 2.00                  |                        |                       |         |                |                              |        |                          |                                   |                          |
| ASST. TREASURER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 0.00                  | X                      |                       |         |                |                              |        |                          |                                   |                          |
| (5) JENNIFER MEDILLIN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2.00                  |                        |                       |         |                |                              |        |                          |                                   |                          |
| BCARD MEMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 0.00                  | Х                      |                       |         |                |                              |        |                          |                                   |                          |
| (6) ALAN KLEIN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4.00                  |                        |                       |         |                |                              |        |                          |                                   |                          |
| COL COUNCIL REP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 1.00                  | Х                      |                       |         |                |                              |        |                          |                                   |                          |
| (7)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
| and the second sec |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
| (8)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
| (9)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                        | +                     |         |                |                              |        |                          |                                   |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
| (10)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                       |                        | 1                     |         |                |                              |        |                          |                                   |                          |
| <u></u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
| (11)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
| (12)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                       |                        | 1                     |         |                |                              |        |                          |                                   |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
| (13)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
| (14)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                        |                       |         |                |                              |        |                          |                                   |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                        | •                     | •       |                |                              |        |                          |                                   |                          |

|      | <del>9</del> ະ0 (2022) | HARPER'S CHOICE COM                                                                                              | MUNITY ASSOCIA                          | TION                              | , ING                 | C.      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                | 52-09                                 | 93424           | Page <b>(</b>                          |
|------|------------------------|------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------|-----------------------|---------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------|--------------------------------|---------------------------------------|-----------------|----------------------------------------|
| P    | art VII                | Section A. Officers, Directors,                                                                                  | Trustees, Key Em                        | ploy                              | ees,                  | an      | d Hi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ighes                           | t C      | ompensated En                  | nployees (conti                       | nued)           | rraye (                                |
|      |                        |                                                                                                                  |                                         |                                   |                       | (       | <b>C)</b><br>sition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                 |          |                                |                                       |                 |                                        |
|      |                        | (A)<br>Name and title                                                                                            | (B)<br>Average                          |                                   |                       | heck    | more                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | e than c<br>i is both           |          | (D)<br>Reportable              | (E)                                   |                 | (F)                                    |
|      |                        |                                                                                                                  | hours                                   | offic                             | er an                 | id a d  | lirect                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | or/trust                        | ee)      | compensation                   | Reportable<br>compensation            | Esti            | mated amount<br>of other               |
|      |                        |                                                                                                                  | per week<br>(list any                   | or o                              | Inst                  | Officer | Key                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | em                              | Former   | from the<br>organization (W-2/ | from related<br>organizations (W-2    |                 | mpensation<br>from the                 |
|      |                        |                                                                                                                  | hours for<br>related                    | or director                       | itutio                | ଜି      | Key employee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Highest cc<br>employee          | mer      | 1099-MISC/                     | 1099-MISC/                            | 1               | anization and                          |
|      |                        |                                                                                                                  | organizations                           |                                   | nal                   |         | ploy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | e com                           |          | 1099-NEC)                      | 1099-NEC)                             | relate          | d organizations                        |
|      |                        |                                                                                                                  | below<br>dotted line)                   | Individual trustee<br>or director | Institutional trustee |         | e                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | pens                            |          |                                |                                       |                 |                                        |
|      |                        |                                                                                                                  | ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) |                                   | ee                    |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Highest compensated<br>employee |          |                                |                                       | 1               |                                        |
| (15) |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 | ······································ |
|      |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          | 44                             |                                       |                 |                                        |
| (16) |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 |                                        |
|      |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 |                                        |
| (17) |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 |                                        |
| (18) |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       | ļ               |                                        |
|      |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | 1        | AL CONTRACT                    |                                       |                 |                                        |
| (19) |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | L.                              |          |                                |                                       |                 |                                        |
|      |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | and the                         |          | 5                              |                                       |                 |                                        |
| (20) |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 100                             |          | <b>N</b>                       |                                       |                 |                                        |
| (21) |                        | ······································                                                                           |                                         |                                   |                       | 4       | 1 and |                                 | 18<br>18 | and its                        |                                       |                 | ·                                      |
| (41) |                        |                                                                                                                  |                                         |                                   | \$<br>                |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 |                                        |
| (22) |                        |                                                                                                                  |                                         |                                   | 1                     |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 |                                        |
|      |                        |                                                                                                                  |                                         | and the second                    |                       |         | >                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                 |          |                                |                                       |                 |                                        |
| (23) |                        |                                                                                                                  |                                         |                                   | P                     | -       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 |                                        |
|      |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 |                                        |
| (24) |                        |                                                                                                                  |                                         |                                   | 1                     |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 |                                        |
| (25) | *****                  |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 |                                        |
| (20) |                        |                                                                                                                  | ······                                  |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 |                                        |
| 1b   | Subtotal .             |                                                                                                                  |                                         |                                   | L                     |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | $\neg$   | 103,763                        | 0                                     |                 | 6,226                                  |
| с    |                        | ontinuation sheets to Part VII,                                                                                  | Section A                               |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | ŀ        | 0                              | 0                                     | · · · · · · · · | 0,220                                  |
| d    |                        | nes 1b and 1c)                                                                                                   | <u>ee. 9</u>                            |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          | 103,763                        | 0                                     |                 | 6,226                                  |
| 2    | Total number           | of individuals (including but not                                                                                | limited to those list                   | ted at                            | bove                  | e) w    | ho r                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | eceiv                           | ed       | more than \$100,               | 000 of                                |                 |                                        |
|      |                        | ompensation from the organization                                                                                |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 | 1                                      |
| 3    | D d the organ          | nization list any <b>former</b> offic <b>er</b> , d                                                              | rector trustee key                      | emp                               |                       |         | r hi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | aboat                           | ~~~      | magnated                       | I                                     |                 | Yes No                                 |
|      | employee on            | line 1a? If "Yes," complete Sche                                                                                 | edule J for such ind                    | lividu                            | al .                  | e, u    | 14 T T T                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | gnest                           | CO       | mpensated                      |                                       | 3               |                                        |
| 4    |                        | idual listed on line 1a, is the sum                                                                              |                                         |                                   |                       | n an    | Id oʻ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ther c                          | om       | nensation from                 |                                       |                 |                                        |
|      | the organizat          | ion and related <b>o</b> rganizations gr                                                                         | eater than \$150,00                     | 0? If                             | "Yes                  | 5, " C  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | olete S                         | Sch      | nedule J for such              |                                       |                 |                                        |
|      | individual .           | and the second |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       | 4               | x                                      |
| 5    | Did any perso          | on list <b>ed</b> on line <b>1a</b> receive or ac                                                                | crue compensatior                       | n from                            | n ang                 | y un    | rela                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ated o                          | rga      | nization or indivi             | dual                                  |                 |                                        |
|      | tor services r         | endered to the organization? If "                                                                                | Yes," complete Sch                      | hedul                             | e J i                 | for s   | such                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | pers                            | on       | <u></u>                        |                                       | 5               | X                                      |
|      |                        | endent Contractors                                                                                               |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 |                                        |
| 1    | compensation           | s table for your five highest comp<br>n from the organization. Report o                                          | compensation for the                    | ent co                            | ontra                 | acto    | ors ti                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | hat re                          | cei      | ved more than \$               | 100,000 of                            |                 |                                        |
|      |                        | (A)                                                                                                              |                                         | ie cai                            | lenu                  | ai y    | ear                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | endin                           | ig v     | (B)                            | organization's t                      |                 |                                        |
|      |                        | Name and business ad                                                                                             | ddress                                  |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          | Description of servi           | ces C                                 | (C)<br>ompens   |                                        |
|      |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 | 0                                      |
|      |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 | 0                                      |
|      |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 | 0                                      |
|      |                        |                                                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |          |                                |                                       |                 | 0                                      |
| 2    | Tctal number           | of independent contractors (incl                                                                                 | uding but not limite                    | d to t                            | hos                   | e lis   | ted                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | above                           | e) v     | vho received                   |                                       |                 | 0                                      |
|      | more than \$1          | 00.000 of compensation from the                                                                                  |                                         |                                   |                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | -, •     |                                | 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11 |                 |                                        |

Check if Schedule O contains a response or note to any line in this Part VIII. (A) (B) (C) (D) Total revenue Related or exempt Unrelated Revenue excluded function revenue business revenue from tax under sections 512-514 1a Federated campaigns . . . . . . . 1a 0 Contributions, Gifts, Grants and Other Similar Amounts Membership dues . . . . . . . . . . b 1b 0 Fundraising events С 1c 0 d Related organizations . . . . . . . 1d 0 e Government grants (contributions). 1e 0 f All other contributions, gifts, grants, and similar amounts not included above . . . 1f 371,389 Noncash contributions included in q lines 1a-1f. 1g \$ 0 h Total. Add lines 1a-1f 371,389 Business Code Program Service Revenue 2a LEASE AND RENTAL REVENUE 900099 460,167 460,167 b TUITION AND ENROLLMENT REVENUE 900099 0 0 SPECIAL EVENT REVENUE С 900099 710 710 d 0 0 е f All other program service revenue . 1.536 1,536 g Total. Add lines 2a-2f. 462,413 Investment income (including dividends, interest, and 3 95 95 4 Income from investment of tax-exempt bond proceeds 0 5 Royalties. 0 (i) Real (ii) Personal 6a Gross rents 6a 4m. 16 b Less: rental expenses . 6b c Rental income or (loss) 6c 0 0 d Net rental income or (loss) 0 (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory. 7a 0 0 Other Revenue b Less: cost or other basis and sales expenses 7b 0 0 c Gain or (loss) 7c 0 0 Net gain or (loss) d 0 8a Gross income from fundraising . (C 1997 events (not including \$ W/ 0 of contributions reported on line 10 See Part IV, line 18 . 8a 0 b Less: direct expenses ۴ 🖞 8b 0 c Net income or (loss) from fundraising events . 0 9a Gross income from gaming activities. See Part IV, line 19. 0 9a **b** Less: direct expenses. 9b 0 c Net income or (loss) from gaming activities 0 10a Gross sales of inventory, less returns and allowances . 10a 0 **b** Less: cost of goods sold . . . . . . . 10b 0 c Net income or (loss) from sales of inventory 0 Business Code iscellaneous 0 11a Revenue 0 b 0 С d All other revenue . . 0 Σ Total. Add lines 11a-11d е 0 Total revenue. See instructions.

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52-0993424 Page 9

### HARPER'S CHOICE COMMUNITY ASSOCIATION, INC

Statement of Revenue

Form 990 (2022) Part VIII

12

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<br>8b,     | Check if Schedule O contains a response or note<br>not include amounts reported on lines 6b, 7b,<br>9b, and 10b of Part VIII. | <b>(A)</b><br>Total expenses | (B)<br>Program service<br>expenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | (C)<br>Management and<br>general expenses              | (D)<br>Fundraising<br>expenses                                                                                  |
|---------------|-------------------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| 1             | Grants and other assistance to domestic organizations                                                                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        | expenses                                                                                                        |
| •             | and domestic governments. See Part IV, line 21                                                                                | ······                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | n frankrigenski se |                                                                                                                 |
| 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                                                                                     | 0                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 12. 4 Bar 1                                            |                                                                                                                 |
| 4             | Benefits paid to or for members                                                                                               | 0                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| 5             | Compensation of current officers, directors,                                                                                  |                              | l di                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                        |                                                                                                                 |
| ~             | trustees, and key employees .                                                                                                 | 103,763                      | 93,387                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 10,376                                                 |                                                                                                                 |
| 6             | Compensation not included above to disqualified                                                                               |                              | and the second s |                                                        |                                                                                                                 |
|               | persons (as defined under section $4958(f)(1)$ ) and                                                                          |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
|               | persons described in section 4958(c)(3)(B)                                                                                    | 0                            | ¥.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                        |                                                                                                                 |
| 7             | Other salaries and wages                                                                                                      | 304,694                      | 274,225                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 30,469                                                 |                                                                                                                 |
| 8             | Pension plan accruals and contributions (include                                                                              |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| ~             | section 401(k) and 403(b) employer contributions)                                                                             | 28,607                       | 25,746                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 2,861                                                  |                                                                                                                 |
| 9             | Other employee benefits                                                                                                       | 54,903                       | 49,413                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 5,490                                                  |                                                                                                                 |
| 0             | Payroll taxes                                                                                                                 | 35,726                       | 32,153                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 3,573                                                  |                                                                                                                 |
| 1             | Fees for services (nonemployees):                                                                                             | \$*_\$                       | <b>W</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                        |                                                                                                                 |
| a             |                                                                                                                               | 0                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| b             |                                                                                                                               |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| ر<br>۲        |                                                                                                                               | 17,061                       | 15,355                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1,706                                                  |                                                                                                                 |
| d             | Lobbying                                                                                                                      | / / 🔶 O                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| e<br>r        | Professional fundraising services. See Part IV, line 17                                                                       | 0                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        | · · · · · · · · · · · · · · · · · · ·                                                                           |
| f             | Investment management fees                                                                                                    | 0                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| g             | Other. (If line 11g amount exceeds 10% of line 25, column                                                                     | •                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| <u>~</u>      | (A), amount, list line 11g expenses on Schedule O.) Advertising and promotion                                                 | 19,191                       | 17,272                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1,919                                                  |                                                                                                                 |
| 2<br>3        | Advertising and promotion                                                                                                     | 987                          | 987                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 0                                                      |                                                                                                                 |
| 3<br>4        |                                                                                                                               | 37,681                       | 33,913                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 3,768                                                  |                                                                                                                 |
| 4<br>5        | Information technology                                                                                                        | 5,708                        | 5,708                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 0                                                      |                                                                                                                 |
| 6             | Royalties                                                                                                                     | 0                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| 5<br>7        |                                                                                                                               | 160,690                      | 144,621                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 16,069                                                 |                                                                                                                 |
| ,<br>B        |                                                                                                                               | 0                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| 5             | Flayments of travel or entertainment expenses                                                                                 |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| Э             | for any federal, state, or local public officials                                                                             | 0                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
|               | Conferences, conventions, and meetings                                                                                        | 468                          | 468                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 0                                                      |                                                                                                                 |
| D<br>1        |                                                                                                                               | 0                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| 2             | Fayments to affiliates                                                                                                        | 0                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| <u>-</u><br>} |                                                                                                                               | 15,056                       | 13,550                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1,506                                                  | (                                                                                                               |
| ,<br>         | Insurance .                                                                                                                   | 9,897                        | 8,907                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 990                                                    |                                                                                                                 |
| •             | Other expenses. Itemize expenses not covered                                                                                  |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
|               | above. (List miscellaneous expenses on line 24e. If                                                                           |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
|               | line 24e amount exceeds 10% of line 25, column<br>(λ), amount. list line 24e expenses on Schedule O.)                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
| -             | NEWSLETTER                                                                                                                    |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
|               | CONATIONS                                                                                                                     | 1,654                        | 1,654                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 0                                                      | er and the second se |
|               | SPECIAL EVENTS EXPENSES                                                                                                       | 12,363                       | 12,363                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 0                                                      |                                                                                                                 |
| c<br>d        | PRINTING                                                                                                                      | 9,026                        | 9,026                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 0                                                      |                                                                                                                 |
|               | All other expenses                                                                                                            | 4,181                        | 4,181                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 0                                                      |                                                                                                                 |
|               | Total functional expenses. Add lines 1 through 24e                                                                            | 0                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |
|               | Joint costs. Complete this line only if the                                                                                   | 821,656                      | 742,929                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 78,727                                                 | (                                                                                                               |
| ,             | 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)                                                                                              |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                        |                                                                                                                 |

| Check II Schedule O contains a response or note to any line in this Part X.           Image: Check II Schedule O contains a response or note to any line in this Part X.         (A)         (B)           Image: Check II Schedule O contains a response or note to any line in this Part X.         (B)         (C)         (C)           Image: Check II Schedule O contains a response or note to any line in this Part X.         (C)         (C)         (C)           Image: Check II Schedule O contains a response or note to any line in this Part X.         (C)         (C)         (C)           Image: Check II Schedule O contains a response or note to any line in this Part X.         (C)                                                                                                                                             | Ρ          | art X | Balance Sheet                                                             |                                       |     | 02-0990424 Page 1      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------|---------------------------------------------------------------------------|---------------------------------------|-----|------------------------|
| Beginning of year         End of year           1         Cash—non-interest bearing.         272.675         1         221.995           3         Pledge and grants receivable, net.         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0         3         0                                                                                                                                                                                                                                                                                                                                                          |            |       |                                                                           | · · · · · · · · · ·                   | · . |                        |
| 2         Savings and temporary cash investments.         169/700         2         130/80/87           3         Piedges and grants receivable, net.         0         3         0         3           4         Accounts receivable, net.         3/700         4         3/700         4         3/700           5         Loans and other receivable, net.         3/700         4         3/700         4         3/700           6         Loans and other receivables from other dispulified persons (as defined under section 4958)((1)), and persons described in section 4958)((2)(3)(B)         0         5         0         5         0         6         0         6         0         0         6         0         0         6         0         0         6         0         0         6         0         0         0         6         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0 <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>                                                                                                                                                                                                       |            |       |                                                                           |                                       |     |                        |
| 3       Piedges and grants receivable, net.       0       3       0         4       Accounts receivables from any ourrent or former officer, director, fusitie key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons.       0       5       0       5         6       Loans and other receivables from other disqualified persons (as defined under section 4956((X))(X) and persons described in section 4956((X)(X))       0       7       0         7       Notes and loans receivable, net.       0       8       0       0       7       0         9       Prepaid expenses and deferred charges       0       8       0       0       7       0         10       Less: accumulated depreciation       10a       305,651       0       10       12       0         11       Investments—other southers See Part IV, line 11.       0       12       0       13       0         12       Investments—other southers See Part IV, line 11.       0       13       0       14       0         13       Investments—others 1 through 15 (must equal line 33)       489 152       16       113.00         14       Introstration start or founder, substantial contributor, or 35% controlled entity or founder, substantial contrubutor, or 35% controled entity or founder, substantial controlle                                                                                                                   |            | 1     | •                                                                         | 272,675                               | 1   | 321,956                |
| 3       Plodges and grants receivable, net.       0       3       C         4       Accounts 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.       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       5       0       0       5       0       0       5       0       0       5                                                                                                                                                                                                                                                                                                                                                                                         |            | 2     | Savings and temporary cash investments                                    | 159,790                               | 2   |                        |
| 5       Loans and other receivables from any current or former afficer, director.<br>Trustee key employee, creator of founder, substantial contributor, or 35%<br>controlled entity or family member of any of these persons.       0       5       0         6       Laans and other receivables from other disqualified persons (as defined<br>under section 4958(f)); and persons described in section 4958(c)(3)(B)       0       5       0         8       Inventories for sale or use       0       6       0         9       Prepaid expenses and deferred charges       0       6       0         10a       205,461       4607       9       0         11       Investments—other securities.       10a       015,461       0       6         12       Investments—other securities.       10a       012       0       64771         13       Investments—other securities.       11       0       12       0         14       Intargula assets. Add Inse: 1 through 15 (must equal line 33).       449,152       16       113.00         14       Intargula assets. Add Inse: 1 through 15 (must equal line 33).       146,322       19       16         15       0       18       0       21       0       13.00         15       0       18       0       21       0       13.00                                                                                                                                                                                                  |            | 3     | Pledges and grants receivable, net .                                      | 0                                     | 3   | C                      |
| 5       Loans and other receivables from any current or former officer, director,<br>Trustee key employee, creator of founder, substantial contributor, or 35%<br>controlled entity or family member of any of these persons.       0       5       0         6       Loans and other receivables from other disqualified persons (as defined<br>under section 4958(f)(3), and persons described in section 4958(c)(3)(B)       0       6       0         8       Inventories for sale or use.       0       6       0         9       Prepaid expenses and deferred charges.       0       6       0         10a       205,461       48.380       10c       54.777         1       Investments—other securities.       10a       205,461       48.380       10c         1       Investments—other securities.       10a       0       64.607       9         1       Investments—other securities.       0       11       0       12       0         1       Investments—other securities.       0       14       0       13       0       14       0         1       Investments—other securities.       0       14       0       15       0       14       0         1       Investments—other securities.       0       14       0       15       0       13       0                                                                                                                                                                                                                     |            | 4     | Accounts receivable, net                                                  | 3,700                                 | 4   | 3,700                  |
| controlled entity of family member of any of these persons.       0       6       0         6       Loans and other receivables from other disqualified persons (as defined under section 4956(r)(3)(6)       0       6       0         7       Notes and loans receivable, net.       0       7       00         8       Inventories for sale or use.       0       8       00         9       Prepaid expenses and deferred charges.       0       8       00         10       Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D       0       10       250,690       48.380       00         11       Investments—publicly traded secunities.       0       11       0       12       0         12       Investments—coline securities.       0       14       0       13       0         13       Investments—coline securities.       0       14       0       15       0         14       Intragible and accrued expenses       57.200       17       12/times       0       16         15       Total assets. Add lines 1 through 15 (must equal line 33)       489.162       16       511.300         16       Total assets. Add lines 1 through 12/times persons       0       22       0       0 </td <th></th> <td>5</td> <td></td> <td></td> <td></td> <td></td>                                                                                                                                                                                |            | 5     |                                                                           |                                       |     |                        |
| get       Loans and other receivables from other disqualified persons (as defined<br>under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)       0       6       0         7       Notes and loans receivable, net.       0       6       7       0         9       Prepaid expenses and deferred charges       0       6       7       0         10a       Land, buildings, and equipment cost or<br>other basis. Complete Part VI of Schedule D       10a       305,461       0       6       7       0         11       Investments—publicly traded securities.       0       11       0       12       0       6       7       0         12       Investments—program-related. See Part IV, line 11       0       13       0       0       14       0       15       0       14       0       15       0       14       0       16       11       0       12       10a       30       14       0       15       0       14       0       15       10a       3       0       14       0       15       10a       20       14       0       15       10a       20       16       11a       0       13       0       14       10a       14       0       15       10a                                                                                                                                                                                                                                                                                                   |            |       |                                                                           |                                       |     |                        |
| sec         under section 4956(r) (11), and persons described in section 4958(c) (3)(6)         0         0         0         7         0           8         Inventories for sale or use.         9         Prepaid expenses and deferred charges         0         0         7         0           10a         Land, buildings, and equiment cost or<br>other basis. Complete Part VI of Schedule D         10a         305,461         48.380         10c         54.771           11         Investments—buildity trade decurities.         0         11         0         12         0           12         Investments—buildity trade decurities.         0         11         0         12         0           13         Investments—other securities. See Part IV, line 11.         0         13         0         0         14         0         13         0           16         Total assets. Add lines.1 through 15 (must equal line 33)         493,152         16         511.300           17         Accounts payable and accourd expenses         57.200         17         10/24.37           18         Control assets.4 dolines.1 through 15 (must equal line 33)         493,152         16         511.300           17         Accounts payable and accourd expenses         57.200         17         10/24.37                                                                                                                                                     |            |       |                                                                           | 0 <sup>°</sup>                        | 5   | C                      |
| State         Notes and loans receivable, net.         0         7         00           8         Inventories for sale or use.         0         8         00           9         Prepaid expenses and deferred charges.         4,607         9         0           10a         10b         250,680         48,800         10c         54,771           11         Investments—publicly traded securities         0         11         00         12         0           12         Investments—publicly traded securities         0         11         0         13         0           13         Investments—program-related. See Part IV, line 11.         0         13         0         14         0         13         0           16         Other assets. See Part IV, line 11.         0         13         0         14         0           17         Accounts payable and accrued expenses         57.200         17         102,420         0           21         Escrow or custodial account liability. Complete Part IV of Schedule D.         0         21         0         0           21         Escrow or custodial account liability. Complete Part IV of Schedule D.         0         21         0         0           22                                                                                                                                                                                                                                          |            | 6     | Loans and other receivables from other disqualified persons (as defined   |                                       |     |                        |
| State         Notes and loans receivable, net.         0         7         00           8         Inventories for sale or use.         0         8         00           9         Prepaid expenses and deferred charges.         4,607         9         0           10a         10b         250,680         48,800         10c         54,771           11         Investments—publicly traded securities         0         11         00         12         0           12         Investments—publicly traded securities         0         11         0         13         0           13         Investments—program-related. See Part IV, line 11.         0         13         0         14         0         13         0           16         Other assets. See Part IV, line 11.         0         13         0         14         0           17         Accounts payable and accrued expenses         57.200         17         102,420         0           21         Escrow or custodial account liability. Complete Part IV of Schedule D.         0         21         0         0           21         Escrow or custodial account liability. Complete Part IV of Schedule D.         0         21         0         0           22                                                                                                                                                                                                                                          |            |       | under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | 0                                     | 6   | 0                      |
| 9       Prepaid expenses and deterred charges       4,607       9       0         10a       and, buildings, and equipment cost or<br>other basis. Complete Part VI of Schedule D       10a       305,461       48,380       10c       54,771         11       Investments—other securities.       0       11       0       12       0         12       Investments—other securities. See Part IV, line 11.       0       12       0       0       13       0         13       Investments—other securities. See Part IV, line 11.       0       12       0       0       14       0       15       0       0       15       0       0       15       0       0       16       511:300       0       16       511:300       0       16       511:300       0       0       0       0       0       0       16       511:300       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       <                                                                                                                                                                                                                                                                                                                                                           | ets        | 7     | Notes and loans receivable, net                                           | 0                                     |     |                        |
| 9       Prepaid expenses and deterred charges       10a       305,461       4607       9       0         10a       and, buildings, and equipment cost or<br>other basis. Complete Part VI of Schedule D       10a       305,461       48,380       10c       54,771         11       Investments—other securities.       0       11       0       12       0         12       Investments—other securities. See Part IV, line 11.       0       12       0       0       13       0         14       Intrustments—orgram-related. See Part IV, line 11.       0       15       0       0       15       0         16       Total assets. Add lines 1 through 15 (must equal line 3)       489,152       16       511,300         17       Accounts payable and accrued expenses.       7.200       17       102,437         18       Grants payable and accrued expenses.       0       21       0       0       20         20       Tax-exempt bond liability. Complete Part IV of Schedule D.       0       21       0       0       20       0         21       Loss and other payables to any current or former officer, director, trustee, key employee. creator or founder, substantal contributor, or 35% controlled entity or family member of any of these begions.       0       23       0       0<                                                                                                                                                                               | SS         | 8     | Inventories for sale or use                                               | 0                                     | 8   |                        |
| other basis Complete Part VI of Schedule D         10a         305.461         48.380         10c         54.771           11         Investments—publicly traded securities         0         11         0         12         0           12         Investments—other securities See Part IV, line 11.         0         12         0           13         Investments—other securities         See Part IV, line 11.         0         13         0           14         Intangible assets         0         14         0         15         0           16         Total assets. Add lines 1 through 15 (must equal line 33)         489.152         16         511.300           17         Accounts payable and accrued expenses         57.200         17         102.432           18         Grants payable         0         14         0         0         20         0           21         Escrow or custodial account liability. Complete Part IV of Schedule D         0         21         0         23         0           22         Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder; baybtenial contributor, or 35% controlled entity or family member of any of these paysbles to related third parties         0         23         0         24         0                                                                                                                                               | ٩          | 9     | Prepaid expenses and deferred charges                                     | 4,607                                 | 9   | 0                      |
| b         Less: accumulated depreciation         10b         250,690         48,380         10c         54,771           11         Investments—publicly traded securities         0         11         0         0           12         Investments—program-related. See Part IV, line 11         0         13         0           13         Investments—program-related. See Part IV, line 11         0         13         0           14         Intangible assets.         0         14         0         13         0           16         Total assets. Add lines 1 through 15 (must equal line 33)         489,152         16         511.300           17         Accounts payable and accrued expenses         57.200         17         102.437           18         Grants payable         0         18         0           19         Deferred revenue         146,732         19         116.320           21         Escrow or custodial account liability. Complete Part IV of Schedüle D         0         21         0           22         Loans and other payables to any current or former officer, director.         14         0         23         0           23         Secured motes and loans payable to unrelated thrid parties         0         23         0                                                                                                                                                                                                  |            | 10a   | Land, buildings, and equipment: cost or                                   |                                       |     |                        |
| 11       Investments—publicly traded securities       0       11       0         12       Investments—other securities. See Part IV, line 11.       0       12       0         13       Investments—order securities. See Part IV, line 11.       0       13       0         14       Intangible assets.       0       14       0       0         14       Intangible assets.       0       14       0       0         15       Other assets. See Part IV, line 11.       0       15       0         16       Total assets. Add lines 1 through 15 (must equal line 33)       489.152       16       511.300         17       Accounts payable and accrued expenses       57.200       17       102.437         18       Grants payable       0       18       0         20       Tax-exempt bond liabilities.       0       16       0       21       0         21       Escrow or custodial account liability. Complete Part IV of Schedule D.       0       21       0         22       Lans and other payables to any current of former officer, director, truttee, key employee, creator or founder, substanta combutor, or 35% controlled entity or family member of any of these persons.       0       22       0         23       Secured notes and loans payable                                                                                                                                                                                                                   |            |       | other basis. Complete Part VI of Schedule D 10a 305,461                   |                                       |     |                        |
| 11       Investments—publicly traded securities.       0       11       0         12       Investments—other securities. See Part IV, line 11.       0       12       0         13       Investments—other securities. See Part IV, line 11.       0       13       0         14       Intangible assets       0       14       0         15       Other assets. Add lines 1 through 15 (must equal line 33)       489 152       16       511.300         16       Total assets. Add lines 1 through 15 (must equal line 33)       489 152       16       511.300         17       Accounts payable and accrued expenses       57.200       17       102.437         18       Grants payable.       0       18       0         20       Tax-exempt bond liabilities.       0       20       0         21       Escrow or custodial account liability. Complete Part IV of Schedule D.       0       21       0         21       Loans and other payables to any current of former officer, director, trustee, key employee, creator or founder, substantia contributor, or 35% controlled entity or family member of any of these persons.       0       24       0         22       Dother liabilities (including federal income fax: payable to unrelated third parties.       0       24       0         23                                                                                                                                                                               |            | b     | Less: accumulated depreciation                                            | 48,380                                | 10c | 54,771                 |
| 13       Investments—program-related. See Part IV, line 11.       0       13       00         14       Intangible assets.       0       14       00         15       Other assets. See Part IV, line 11.       0       15       0         16       Total assets. Add lines 1 through 15 (must equal line 33)       489,152       16       511.300         17       Accounts payable and accrued expenses.       57,200       17       102,437         19       Deferred revenue.       146,732       19       116,320         20       Tax-exempt bond liabilities.       0       20       0         21       Escrow or custodial account liability. Complete Part IV of Schedule D.       0       21       0         22       Loans and other payables to any current of former officer, director, trustee, key employee, creator or founder, substantia contributor, or 35% controlled entity or family member of any of these persons.       0       23       0         23       Secured mortgages and notes payable to unrelated third parties.       0       24       0         24       Unsecured notes and loans payable to unrelated third parties.       0       24       0         25       Other liabilities. Add lines 17 througn 25.       265,267       26       275,174         26       Total                                                                                                                                                                                |            | 11    |                                                                           | 0                                     | 11  |                        |
| 14       Intangible assets       0       14       00         15       Other assets. See Part IV, line 11       0       15       00         16       Total assets. Add lines 1 through 15 (must equal line 33)       489,152       16       511,300         17       Accounts payable and accrued expenses       57,200       17       1002,437         18       Grants payable       0       18       00         20       Tax-exempt bond liabilities       0       20       00         20       Tax-exempt bond liabilities       0       20       00         21       Escrow or custodial account liability. Complete Part IV of Scheddle D       0       21       00         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial combutor, or 35% controlled entity or family member of any of these payables.       0       23       0         24       Unsecured notes and loans payable to unrelated third parties.       0       24       0         25       Other liabilities not included on lines 1724). Complete Part X of Schedule D       26       26       275.174         26       Total liabilities. Add lines 17 through 25.       265.267       26       275.174         27       Net assets with donor r                                                                                                                                                                                 |            | 12    |                                                                           | 0                                     | 12  | 0                      |
| 15         Other assets. See Part IV. line 11.         0         15         0           16         Total assets. Add lines 1 through 15 (must equal line 33)         489,152         16         511,300           17         Accounts payable and accrued expenses.         57,200         17         102,437           18         Grants payable         0         18         0           19         Deferred revenue         146,732         19         116,320           20         Tax-exempt bond liabilities.         0         20         00           21         Escrow or custodial account liability. Complete Part IV of Scheddie D.         0         21         00           22         Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substaptial controbutor, or 35% controlled entity or family member of any of these persons.         0         23         0           23         Secured mortages and notes payable to unrelated third parties.         0         23         0           24         Unsecured notes and loans payable to unrelated third parties.         0         24         0           25         Other liabilities. Not included on lines 17-24). Complete Part X of Schedule D.         26         26         275.174           26         Total liabilities. Add lines 17                                                                                                         |            | 13    |                                                                           | 0                                     | 13  | 0                      |
| 17       Accounts payable and accrued expenses       101,002       10       101,002       17       102,437         18       Grants payable       0       18       0       146,732       19       116,320         20       Tax-exempt bond liabilities       0       20       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            | 14    | Intangible assets                                                         | 0                                     | 14  | 0                      |
| 17       Accounts payable and accrued expenses       101,002       10       101,002       17       102,437         18       Grants payable       0       18       0       146,732       19       116,320         20       Tax-exempt bond liabilities       0       20       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            | 15    | Other assets. See Part IV, line 11                                        | 0                                     | 15  | 0                      |
| 19       Orfants payable       0       18       0         19       Deferred revenue       116,732       19       116,320         20       Tax-exempt bond liabilities       0       20       0       0         21       Escrow or custodial account liability. Complete Part IV of Schedule D       0       21       0         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.       0       22       0         23       Secured motgages and notes payable to unrelated third parties.       0       23       0         24       Unsecured notes and loans payable to unrelated third parties.       0       24       0         25       Other liabilities not included on lines 17–24). Complete Part X of Schedule D       61,335       25       56.417         26       Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.       223.885       27       236.126         27       Net assets with donor restrictions       0       28       0       0       28       0         0       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       0       22       0       0       28                                                                                                                                                |            |       | Total assets. Add lines 1 through 15 (must equal line 33)                 | 489,152                               | 16  | 511,300                |
| 19       Orfants payable       0       18       0         19       Deferred revenue       116,732       19       116,320         20       Tax-exempt bond liabilities       0       20       0       0         21       Escrow or custodial account liability. Complete Part IV of Schedule D       0       21       0         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.       0       22       0         23       Secured motgages and notes payable to unrelated third parties.       0       23       0         24       Unsecured notes and loans payable to unrelated third parties.       0       24       0         25       Other liabilities not included on lines 17–24). Complete Part X of Schedule D       61,335       25       56.417         26       Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.       223.885       27       236.126         27       Net assets with donor restrictions       0       28       0       0       28       0         0       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       0       22       0       0       28                                                                                                                                                |            |       | Accounts payable and accrued expenses                                     | 57,200                                | 17  | 102,437                |
| 20       Tax-exempt bond liabilities.       0       20       00         21       Escrow or custodial account liability. Complete Part IV of Schedule D.       0       21       00         21       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contrbutor, or 35% controlled entity or family member of any of these persons.       0       22       00         23       Secured mortgages and notes payable to unrelated third parties.       0       23       00         24       Unsecured notes and loans payable to unrelated third parties.       0       24       00         25       Other liabilities (including federal income tax, payables to related third parties.       0       24       00         26       Total liabilities. Add lines 17 through 25.       265.267       26       275.174         27       Net assets without donor restrictions.       223.865       27       236.126         27       Net assets with donor restrictions.       0       28       0         28       Organizations that do not follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.       27       236.126         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       0       29       0         29       Capital stock                                                                                                        |            |       |                                                                           |                                       |     |                        |
| 21       Escrow or custodial account liability. Complete Part IV of Schedule D.       0       21       0         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       0       22       0         23       Secured mortgages and notes payable to unrelated third parties       0       23       00         24       Unsecured notes and loans payable to unrelated third parties       0       24       00         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.       61.335       25       56.417         26       Total liabilities. Add lines 17 through 25.       265.267       26       275.174         Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.         Net assets with donor restrictions.         28       Net assets with donor restrictions.       223.885       27       236.126         29       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       0       29       0         29       Capital stock or trust principal, or current funds.       0       29       0       0         20 <td< td=""><th></th><td></td><td></td><td></td><td></td><td>116,320</td></td<> |            |       |                                                                           |                                       |     | 116,320                |
| 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       0       22       0         23       Secured mortgages and notes payable to unrelated third parties       0       23       00         24       Unsecured notes and loans payable to unrelated third parties       0       24       00         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       61,335       25       56.417         26       Total liabilities. Add lines 17 through 25,       265,267       26       275.174         0       Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.       223,885       27       236.126         27       Net assets with donor restrictions       0       28       0       0         28       Net assets with donor restrictions       0       28       0         29       Capital stock or trust principal, or current funds       0       29       0         30       Paid-in or capital surplus, or land, building, or equipment fund       0       30       0         30       Retained earnings, endowment, accumulated income, or other funds       0                                                                              |            |       |                                                                           |                                       |     |                        |
| Image: Propertiestrustee, key employee, creator or founder, substantial contributor, or 35%<br>controlled entity or family member of any of these persons022023Secured mortgages and notes payable to unrelated third parties0230024Unsecured notes and loans payable to unrelated third parties0240025Other liabilities (including federal income tax, payables to related third<br>parties, and other liabilities not included on lines 17–24). Complete<br>Part X of Schedule D.61,3352556.41726Total liabilities. Add lines 17 through 25.265,26726275.17427Net assets without donor restrictions238028Net assets with donor restrictions028029Capital stock or trust principal, or current funds.029030Paid-in or capital surplus, or land, building, or equipment fund030031Retained earnings, endowment, accumulated income, or other funds031033Total liabilities and net assets/fund balances23,88532223,88531511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <i>(</i> 0 |       |                                                                           | 0                                     | 21  | 0                      |
| 23       Secured initiages and notes payable to unrelated third parties       0       23       0         24       Unsecured notes and loans payable to unrelated third parties       0       24       0         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.       61,335       25       56,417         26       Total liabilities. Add lines 17 through 25.       265,267       26       275,174         Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.       223,885       27       236,126         28       Net assets with donor restrictions.       223,885       27       236,126         29       Capital stock or trust principal, or current funds.       0       30       0         30       Paid-in or capital surplus, or land, building, or equipment fund.       0       30       0         31       Retained earnings, endowment, accumulated income, or other funds       0       31       0         33       Total liabilities and net assets/fund balances       489,152       33       511,300                                                                                                                                                                                                                                                                                             | tie        | 22    |                                                                           |                                       |     |                        |
| 23       Secured initiages and notes payable to unrelated third parties       0       23       0         24       Unsecured notes and loans payable to unrelated third parties       0       24       0         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.       61,335       25       56,417         26       Total liabilities. Add lines 17 through 25.       265,267       26       275,174         Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.       223,885       27       236,126         28       Net assets with donor restrictions.       223,885       27       236,126         29       Capital stock or trust principal, or current funds.       0       30       0         30       Paid-in or capital surplus, or land, building, or equipment fund.       0       30       0         31       Retained earnings, endowment, accumulated income, or other funds       0       31       0         33       Total liabilities and net assets/fund balances       489,152       33       511,300                                                                                                                                                                                                                                                                                             | bili       |       |                                                                           |                                       |     |                        |
| 23       Secured initiages and notes payable to unrelated third parties       0       23       0         24       Unsecured notes and loans payable to unrelated third parties       0       24       0         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.       61,335       25       56,417         26       Total liabilities. Add lines 17 through 25.       265,267       26       275,174         Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.       223,885       27       236,126         28       Net assets with donor restrictions.       223,885       27       236,126         29       Capital stock or trust principal, or current funds.       0       30       0         30       Paid-in or capital surplus, or land, building, or equipment fund.       0       30       0         31       Retained earnings, endowment, accumulated income, or other funds       0       31       0         33       Total liabilities and net assets/fund balances       489,152       33       511,300                                                                                                                                                                                                                                                                                             | ial        |       |                                                                           |                                       |     |                        |
| 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.       61.335       25       56.417         26       Total liabilities. Add lines 17 through 25.       265.267       26       275.174         27       Net assets without donor restrictions.       223.885       27       236.126         28       Net assets with donor restrictions.       0       28       0         0rganizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       0       0       28       0         29       Capital stock or trust principal, or current funds.       0       29       0       0         30       Paid-in or capital surplus, or land, building, or equipment fund.       0       30       0       0         31       Retained earnings, endowment, accumulated income, or other funds.       0       31       0       0       223,885       32       236,126         33       Total Inabilities and net assets/fund balances       0       31       0       33       511,300                                                                                                                                                                                                                                                                                                                                                       |            | 1     |                                                                           | · · · · · · · · · · · · · · · · · · · |     |                        |
| parties, and other liabilities not included on lines 17–24). Complete<br>Part X of Schedule D.61,3352556,41726Total liabilities. Add lines 17 through 25.265,26726275,17426Organizations that follow FASB ASC 958, check here X<br>and complete lines 27, 28, 32, and 33.223,88527236,12627Net assets without donor restrictions<br>Organizations that do not follow FASB ASC 958, check here<br>and complete lines 29 through 33.028029Capital stock or trust principal, or current funds<br>300290031Retained earnings, endowment, accumulated income, or other funds<br>320310033Total liabilities and net assets/fund balances223,88532236,12633Total liabilities and net assets/fund balances489,15233511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |       |                                                                           | 0                                     | 24  | 0                      |
| Part X of Schedule D.61.3352556.41726Total liabilities. Add lines 17 through 25.265.26726275.17430Organizations that follow FASB ASC 958, check here X223.88527236.126and complete lines 27, 28, 32, and 33.223.88527236.12627Net assets without donor restrictions028028Net assets with donor restrictions0280Organizations that do not follow FASB ASC 958, check here<br>and complete lines 29 through 33.029029Capital stock or trust principal, or current funds030030Paid-in or capital surplus, or land, building, or equipment fund031031Retained earnings, endowment, accumulated income, or other funds031033Total liabilities and net assets/fund balances489,15233511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            | 25    |                                                                           |                                       |     |                        |
| 26Total liabilities. Add lines 17 through 25.265,26726275,174SourceOrganizations that follow FASB ASC 958, check hereXAdd lines 27, 28, 32, and 33.233, 236,12627Net assets without donor restrictions223,88527236,12628Net assets with donor restrictions0280Organizations that do not follow FASB ASC 958, check here<br>and complete lines 29 through 33.029029Capital stock or trust principal, or current funds029030Paid-in or capital surplus, or land, building, or equipment fund030031Retained earnings, endowment, accumulated income, or other funds031033Total net assets or fund balances223,88532236,12633Total liabilities and net assets/fund balances489,15233511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |            |       |                                                                           | 04.005                                | 0.5 | 50.447                 |
| Source<br>and complete lines 27, 28, 32, and 33.XX27Net assets without donor restrictions223,8852728Net assets with donor restrictions02829Organizations that do not follow FASB ASC 958, check here<br>and complete lines 29 through 33.02929Capital stock or trust principal, or current funds029030Paid-in or capital surplus, or land, building, or equipment fund030031Retained earnings, endowment, accumulated income, or other funds031032Total net assets or fund balances223,88532236,12633Total liabilities and net assets/fund balances489,15233511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |            | 26    |                                                                           |                                       |     |                        |
| 33         10tal filabilities         489,152         33         511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            | 20    |                                                                           | 205,207                               | 26  | 2/5,1/4                |
| 33         10tal filabilities         489,152         33         511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ĕ          |       |                                                                           |                                       |     |                        |
| 33         10tal filabilities         489,152         33         511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | lan        | 27    |                                                                           | 000.005                               |     | 000.100                |
| 33         10tal filabilities         489,152         33         511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Ba         |       |                                                                           |                                       |     |                        |
| 33         10tal filabilities         489,152         33         511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | pu         | 20    |                                                                           | 0                                     | 28  | 0                      |
| 33         10tal filabilities         489,152         33         511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | μ          |       |                                                                           |                                       |     |                        |
| 33         10tal filabilities         489,152         33         511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ŗ          | 29    |                                                                           | _                                     | 20  | 0                      |
| 33         10tal filabilities         489,152         33         511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ets        |       |                                                                           |                                       |     |                        |
| 33         10tal filabilities         489,152         33         511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | SS         |       |                                                                           |                                       |     |                        |
| 33         10tal filabilities         489,152         33         511,300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ťΑ         |       |                                                                           |                                       |     |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Š          |       |                                                                           |                                       |     |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |            |       |                                                                           |                                       |     | Form <b>990</b> (2022) |

HARPER'S CHOICE COMMUNITY ASSOCIATION, INC.

Form 990 (2022)

| Form 9 | HARPER'S CHOICE COMMUNITY ASSOCIATION, INC.                                                                                                                                               | 52-0993 | 3424 | Pag               | <sub>e</sub> 12 |
|--------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|------|-------------------|-----------------|
| Par    | XI Reconciliation of Net Assets                                                                                                                                                           |         |      |                   |                 |
|        | Check if Schedule O contains a response or note to any line in this Part XI                                                                                                               |         |      |                   |                 |
| 1      | Total revenue (must equal Part VIII, column (A), line 12)                                                                                                                                 | 1       |      | 833               | 8,897           |
| 2      | Total expenses (must equal Part IX, column (A), line 25) .                                                                                                                                | 2       |      | 821               | ,656            |
| 3      | Revenue less expenses. Subtract line 2 from line 1                                                                                                                                        | 3       |      | 12                | 2,241           |
| 4      | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                                                                                                 | 4       |      | 223               | 8,885           |
| 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     | Other changes in net assets or fund balances (explain on Schedule O)<br>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,<br>column (B)) | 10      |      | 236               | 6,126           |
| Part   | XII Financial Statements and Reporting                                                                                                                                                    |         |      |                   |                 |
| r ur c | 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                                                                                                                      |         |      | eur sir<br>si i i | 1.14            |
|        | 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   | Х                 |                 |
|        | 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:                                                                                                                                |         |      |                   | N C<br>D Star   |
|        | X Separate basis Consolidated basis Both consolidated and separate basis                                                                                                                  |         |      |                   |                 |
| b      | Were the organization's financial statements audited by an independent accountant?                                                                                                        |         | 2b   | Х                 |                 |
|        | 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:                                                                                                                                              |         |      |                   |                 |
|        | X Separate basis Consolidated basis Both consolidated and separate basis                                                                                                                  |         |      |                   |                 |
| с      | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of                                                                            |         |      |                   | - 41<br>- 41    |
|        | the audit, review, or compilation of its financial statements and selection of an independent accountant?                                                                                 |         | 2c   | X                 | L               |
|        | If the organization changed either its oversight process or selection process during the tax year, explain on                                                                             |         |      |                   | 1.50            |
|        | 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   |                   | <u> </u>        |
| b      | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the                                                                              |         | 21-  |                   |                 |
|        | required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits                                                                                   |         | 3b   | 000               | (2022)          |
|        |                                                                                                                                                                                           |         | Form | 990               | (2022)          |
|        |                                                                                                                                                                                           |         |      |                   |                 |
|        |                                                                                                                                                                                           |         |      |                   |                 |
|        |                                                                                                                                                                                           |         |      |                   |                 |
|        |                                                                                                                                                                                           |         |      |                   |                 |
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|        |                                                                                                                                                                                           |         |      |                   |                 |
|        |                                                                                                                                                                                           |         |      |                   |                 |
|        |                                                                                                                                                                                           |         |      |                   |                 |
|        |                                                                                                                                                                                           |         |      |                   |                 |
|        |                                                                                                                                                                                           |         |      |                   |                 |
|        |                                                                                                                                                                                           |         |      |                   |                 |

Form 4562

# **Depreciation and Amortization**

# (Including Information on Listed Property)

| Department of the Treasury                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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                                                                                                                                                             | our tax return.                                                                                                                                                                                              |                                                                                                                                |                                                                                                    | Attack  | nment                                  |
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| Internal Revenue Service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Go to www.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | rs.gov/Form4562 for ins                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | structions and the la                                                                                                                                                                                        | atest informatio                                                                                                               | on.                                                                                                | Seque   | ence No. <b>179</b>                    |
| Name(s) shown on return                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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                                                                                                              | usiness or activity to whic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | h this form relates                                                                                                                                                                                          | -                                                                                                                              | Identifying nur                                                                                    | nber    |                                        |
| HARPER'S CHOICE COM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    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                                                                                                                                                             |                                                                                                                                                                                                              |                                                                                                                                | 52-0993424                                                                                         |         |                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | o Expense Certain P                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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                                                                                                                                                             |                                                                                                                                                                                                              |                                                                                                                                |                                                                                                    |         |                                        |
| Note: If you I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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| TT MACKS DEDUCTIONS IC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| 17 MACRS deductions for<br>18 If you are electing to o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| 18 If you are electing to g                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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| 18 If you are electing to g<br>asset accounts, check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   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| 18 If you are electing to g<br>asset accounts, check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | roup any assets placed in<br>there<br>on <b>B - 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| 18 If you are electing to g<br>asset accounts, check<br>Section                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | roup any assets placed in there<br>on B - Assets Placed in the set of the set o | Service during the tax                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | year into one or mo                                                                                                                                                                                          | ore general<br>General Depre                                                                                                   | ciation System                                                                                     |         |                                        |
| 18 If you are electing to g<br>asset accounts, check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | on B - Assets Placed in the set of the set o   | Service during the tax<br>Service During 2022 T<br>d (c) Basis for depreci-<br>(business/investmen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | year into one or mo<br>ax Year Using the<br>ation<br>use (d) Recovery<br>period                                                                                                                              | ore general                                                                                                                    |                                                                                                    |         | 12,432                                 |
| 18 If you are electing to g<br>asset accounts, check<br>Section<br>(a) Classification of pro-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | roup any assets placed in there<br>on B - Assets Placed in the set of the set o | Service during the tax                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | year into one or mo<br>ax Year Using the<br>ation<br>use (d) Recovery<br>period                                                                                                                              | ore general<br>General Depre                                                                                                   | ciation System                                                                                     |         |                                        |
| 18       If you are electing to g asset accounts, check         Section (a) Classification of program         (a)       Classification of program         19       a       3-year property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | on B - Assets Placed in the set of the set o   | Service during the tax<br>Service During 2022 T<br>d (c) Basis for depreci-<br>(business/investmen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>(d) Recovery<br>period                                                                                                                    | General Depre                                                                                                                  | ciation System                                                                                     |         | preciation deduction                   |
| <ul> <li>18 If you are electing to g<br/>asset accounts, check</li> <li>Section</li> <li>(a) Classification of pro-</li> <li>19 a 3-year property</li> <li>b 5-year property</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | on B - Assets Placed in the set of the set o   | Service during the tax<br>Service During 2022 T<br>d (c) Basis for depreci-<br>(business/investmen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | year into one or mo<br>ax Year Using the<br>ation<br>use (d) Recovery<br>period                                                                                                                              | ore general<br>General Depre                                                                                                   | ciation System                                                                                     |         |                                        |
| <ul> <li>18 If you are electing to g asset accounts, check</li> <li>Section (a) Classification of property</li> <li>19 a 3-year property</li> <li>b 5-year property</li> <li>c 7-year property</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | on B - Assets Placed in the set of the set o   | Service during the tax<br>Service During 2022 T<br>d (c) Basis for depreci-<br>(business/investmen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>(d) Recovery<br>period                                                                                                                    | General Depre                                                                                                                  | ciation System                                                                                     |         | preciation deduction                   |
| <ul> <li>18 If you are electing to g<br/>asset accounts, check</li> <li>Section</li> <li>(a) Classification of property</li> <li>b 3-year property</li> <li>b 5-year property</li> <li>c 7-year property</li> <li>d 10-year property</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | on B - Assets Placed in the set of the set o   | Service during the tax<br>Service During 2022 T<br>d (c) Basis for depreci-<br>(business/investmen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>(d) Recovery<br>period                                                                                                                    | General Depre                                                                                                                  | ciation System                                                                                     |         | preciation deduction                   |
| <ul> <li>18 If you are electing to g<br/>asset accounts, check</li> <li>Section</li> <li>(a) Classification of property</li> <li>(b) 5-year property</li> <li>(c) 7-year property</li> <li>(d) 10-year property</li> <li>(e) 15-year property</li> <li>(f) 10-year property</li> <li>(g) 10-year property</li> <li>(g) 10-year property</li> <li>(g) 10-year property</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | on B - Assets Placed in the set of the set o   | Service during the tax<br>Service During 2022 T<br>d (c) Basis for depreci-<br>(business/investmen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>(d) Recovery<br>period                                                                                                                    | General Depre                                                                                                                  | ciation System                                                                                     |         | preciation deduction                   |
| <ul> <li>18 If you are electing to g<br/>asset accounts, check</li> <li>Section</li> <li>(a) Classification of property</li> <li>(b) 5-year property</li> <li>(c) 7-year property</li> <li>(d) 10-year property</li> <li>(d) 10-year property</li> <li>(e) 15-year property</li> <li>(f) 20-year property</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | on B - Assets Placed in the set of the set o   | Service during the tax<br>Service During 2022 T<br>d (c) Basis for depreci-<br>(business/investmen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | year into one or mo<br>ax Year Using the<br>ation<br>(d) Recovery<br>period<br>3,615 5                                                                                                                       | General Depre                                                                                                                  | ciation System<br>(f) Method<br>200DB                                                              |         | preciation deduction                   |
| <ul> <li>18 If you are electing to g<br/>asset accounts, check</li> <li>Section</li> <li>(a) Classification of property</li> <li>b 5-year property</li> <li>c 7-year property</li> <li>d 10-year property</li> <li>e 15-year property</li> <li>f 20-year property</li> <li>g 25-year property</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | on B - Assets Placed in the set of the set o   | Service during the tax<br>Service During 2022 T<br>d (c) Basis for depreci-<br>(business/investmen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | year into one or mc<br>ax Year Using the<br>ation<br>(d) Recovery<br>period<br>3,615 5<br>25 yrs.                                                                                                            | General Depre                                                                                                                  | ciation System<br>(f) Method<br>200DB                                                              |         | preciation deduction                   |
| <ul> <li>18 If you are electing to g<br/>asset accounts, check</li> <li>Section</li> <li>(a) Classification of pro-</li> <li>19 a 3-year property</li> <li>b 5-year property</li> <li>c 7-year property</li> <li>d 10-year property</li> <li>e 15-year property</li> <li>f 20-year property</li> <li>g 25-year property</li> <li>h Residential rental</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | on B - Assets Placed in the set of the set o   | Service during the tax<br>Service During 2022 T<br>d (c) Basis for depreci-<br>(business/investmen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | year into one or mc<br>ax Year Using the<br>ation<br>use<br>ns)<br>3,615 5<br>3,615 5<br>25 yrs.<br>27.5 yrs.                                                                                                | Ceneral Depre<br>(e) Convention<br>HY<br>MM                                                                                    | (f) Method<br>200DB<br>S/L<br>S/L                                                                  |         | preciation deduction                   |
| <ul> <li>18 If you are electing to g<br/>asset accounts, check</li> <li>Section</li> <li>(a) Classification of pro-</li> <li>19 a 3-year property</li> <li>b 5-year property</li> <li>c 7-year property</li> <li>d 10-year property</li> <li>d 10-year property</li> <li>e 15-year property</li> <li>f 20-year property</li> <li>g 25-year property</li> <li>h Residential rental<br/>property</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | proup any assets placed in some con <b>B - Assets Placed in s</b><br>(b) Month arry year placed in service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Service during the tax<br>Service During 2022 T<br>d (c) Basis for depreci-<br>(business/investmen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | year into one or mc<br>ax Year Using the<br>ation<br>(d) Recovery<br>period<br>3,615 5<br>25 yrs.                                                                                                            | General Depre                                                                                                                  | ciation System<br>(f) Method<br>200DB                                                              |         | preciation deduction                   |
| <ul> <li>18 If you are electing to g<br/>asset accounts, check</li> <li>Section</li> <li>(a) Classification of pro-</li> <li>19 a 3-year property</li> <li>b 5-year property</li> <li>c 7-year property</li> <li>d 10-year property</li> <li>e 15-year property</li> <li>f 20-year property</li> <li>g 25-year property</li> <li>h Residential rental</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | proup any assets placed in some con <b>B - Assets Placed in s</b><br>(b) Month arry year placed in service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Service during the tax<br>Service During 2022 T<br>d (c) Basis for depreci-<br>(business/investmen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | year into one or mc<br>ax Year Using the<br>ation<br>use<br>ns)<br>3,615 5<br>3,615 5<br>25 yrs.<br>27.5 yrs.                                                                                                | Ceneral Depre<br>(e) Convention<br>HY<br>MM                                                                                    | (f) Method<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L                                                    |         | preciation deduction                   |
| <ul> <li>18 If you are electing to g<br/>asset accounts, check</li> <li>Section</li> <li>(a) Classification of pro-</li> <li>19 a 3-year property</li> <li>b 5-year property</li> <li>c 7-year property</li> <li>d 10-year property</li> <li>d 10-year property</li> <li>g 25-year property</li> <li>h Residential rental<br/>property</li> <li>i Nonresidential real<br/>property</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | proup any assets placed in s<br>on B - Assets Placed in s<br>(b) Month ar<br>year placed<br>in service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Service during the tax Service During 2022 T (c) Basis for depreci- (business/investmen only-see instruct c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>3,615 5<br>25 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>39 yrs.                                                                                   | MM<br>MM<br>MM<br>MM<br>MM<br>MM                                                                                               | (f) Method<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L                                             | (g) De  | preciation deduction                   |
| <ul> <li>18 If you are electing to g<br/>asset accounts, check</li> <li>Section</li> <li>(a) Classification of pro-</li> <li>19 a 3-year property</li> <li>b 5-year property</li> <li>c 7-year property</li> <li>c 7-year property</li> <li>d 10-year property</li> <li>e 15-year property</li> <li>g 25-year property</li> <li>h Residential rental<br/>property</li> <li>i Nonresidential real<br/>property</li> <li>Section</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | proup any assets placed in some con <b>B - Assets Placed in s</b><br>(b) Month arry year placed in service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Service during the tax Service During 2022 T (c) Basis for depreci- (business/investmen only-see instruct c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>3,615 5<br>25 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>39 yrs.                                                                                   | MM<br>MM<br>MM<br>MM<br>MM<br>MM                                                                                               | (f) Method<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L                                             | (g) De  | preciation deduction                   |
| <ul> <li>18 If you are electing to g asset accounts, check</li> <li>Section</li> <li>(a) Classification of property</li> <li>b 5-year property</li> <li>c 7-year property</li> <li>c 7-year property</li> <li>d 10-year property</li> <li>e 15-year property</li> <li>f 20-year property</li> <li>g 25-year property</li> <li>h Residential rental property</li> <li>i Nonresidential real property</li> <li>Section</li> <li>20 a Class life</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | proup any assets placed in s<br>on B - Assets Placed in s<br>(b) Month ar<br>year placed<br>in service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Service during the tax Service During 2022 T (c) Basis for depreci- (business/investmen only-see instruct c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>3,615 5<br>25 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>39 yrs.                                                                                   | MM<br>MM<br>MM<br>MM<br>MM<br>MM                                                                                               | (f) Method<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L                                             | (g) De  | preciation deduction                   |
| <ul> <li>18 If you are electing to g asset accounts, check</li> <li>Section</li> <li>(a) Classification of pressive of the sector of the secto</li></ul>     | proup any assets placed in s<br>on B - Assets Placed in s<br>(b) Month ar<br>year placed<br>in service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Service during the tax Service During 2022 T (c) Basis for depreci- (business/investmen only-see instruct c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | year into one or mo<br>ax Year Using the<br>ation<br>(d) Recovery<br>period<br>3,615 5<br>25 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>39 yrs.<br>(Year Using the A<br>12 yrs.                                       | MM<br>MM<br>MM<br>MM<br>MM<br>MM                                                                                               | (f) Method<br>200DB<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L        | (g) De  | preciation deduction                   |
| <ul> <li>18 If you are electing to g<br/>asset accounts, check</li> <li>Section</li> <li>(a) Classification of prediction of the section of the section</li></ul> | proup any assets placed in s<br>on B - Assets Placed in s<br>(b) Month ar<br>year placed<br>in service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Service during the tax Service During 2022 T (c) Basis for depreci- (business/investmen only-see instruct c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>3,615 5<br>25 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>39 yrs.<br>x Year Using the A                                                             | MM<br>MM<br>MM<br>MM<br>MM<br>MM                                                                                               | (f) Method<br>200DB<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>reciation System<br>S/L  | (g) De  | preciation deduction                   |
| <ul> <li>18 If you are electing to g asset accounts, check</li> <li>Section</li> <li>(a) Classification of prediction of the section of the section</li></ul>     | proup any assets placed in s<br>on B - Assets Placed in s<br>(b) Month ar<br>year placed<br>in service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Service during the tax Service During 2022 T (c) Basis for depreci- (business/investmen only-see instruct c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | year into one or mo<br>ax Year Using the<br>ation<br>(d) Recovery<br>period<br>3,615 5<br>25 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>39 yrs.<br>(Year Using the A<br>12 yrs.                                       | General Depre<br>(e) Convention<br>HY<br>MM<br>MM<br>MM<br>MM<br>Iternative Dep                                                | (f) Method<br>200DB<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L        | (g) De  | preciation deduction                   |
| <ul> <li>18 If you are electing to g asset accounts, check</li> <li>Section</li> <li>(a) Classification of proceeding to g a section</li> <li>(a) Classification of proceeding to g a section</li> <li>(b) 5-year property</li> <li>(c) 7-year property</li> <li>(c) 7-year property</li> <li>(c) 7-year property</li> <li>(c) 7-year property</li> <li>(c) 10-year property</li> <li>(c) 10-year</li> <li>(c) 10-year</li> <li>(c) 30-year</li> <li>(c) 30-year</li> <li>(c) 40-year</li> <li>(c) 10-year</li> <li>(c) 10-</li></ul>     | roup any assets placed in some con B - Assets Placed in soperty (b) Month and year placed in service (c) Month and year placed (c) Month and year pl   | Service during the tax Service During 2022 T (c) Basis for depreci- (business/investmen only-see instruct c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>(d) Recovery<br>period<br>3,615 5<br>25 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>39 yrs.<br>(Year Using the A<br>12 yrs.<br>30 yrs. | General Depre<br>(e) Convention<br>HY<br>MM<br>MM<br>MM<br>Iternative Dep                                                      | (f) Method<br>200DB<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L | (g) De  | preciation deduction                   |
| <ul> <li>18 If you are electing to g asset accounts, check</li> <li>Section</li> <li>(a) Classification of proceeding to g asset accounts, check</li> <li>(a) Classification of proceeding to g asset accounts, check</li> <li>(a) Classification of proceeding to g asset accounts, check</li> <li>19 a 3-year property</li> <li>b 5-year property</li> <li>c 7-year property</li> <li>d 10-year property</li> <li>d 10-year property</li> <li>g 25-year property</li> <li>f 20-year property</li> <li>g 25-year property</li> <li>h Residential rental property</li> <li>i Nonresidential real property</li> <li>i Nonresidential real property</li> <li>20 a Class life</li> <li>b 1/2-year</li> <li>c 30-year</li> <li>d 40-year</li> <li>Part IV Summary</li> <li>21 Listed property. Enter</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | roup any assets placed in some constant of the second seco   | service during the tax  Service During 2022 T  (c) Basis for deprecia (business/investmen onlysee instructor  prvice During 2022 Ta:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>3,615 5<br>25 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>39 yrs.<br>40 yrs.<br>40 yrs.                                                | Ceneral Depression<br>(e) Convention<br>(e) Convention<br>HY<br>MM<br>MM<br>MM<br>Iternative Dep                               | (f) Method<br>200DB<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L | (g) De  | preciation deduction                   |
| <ul> <li>18 If you are electing to g asset accounts, check</li> <li>Section</li> <li>(a) Classification of proceeding to g section</li> <li>(a) Classification of proceeding to g section</li> <li>(b) 5-year property</li> <li>(c) 7-year property</li> <li>(c) 7-year property</li> <li>(c) 7-year property</li> <li>(c) 10-year property</li> <li>(c) 10-year</li> <li>(c) 30-year</li> </ul>                                             | roup any assets placed in some con B - Assets Placed in soperty (b) Month any year placed in service (c)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | service during the tax  Service During 2022 T  (c) Basis for depreci (business/investmen only—see instructo ervice During 2022 Tax gh 17, lines 19 and 20 i                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>(d) Recovery<br>period<br>3,615 5<br>25 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>39 yrs.<br>40 yrs.<br>30 yrs.<br>40 yrs.           | General Depre<br>(e) Convention<br>(e) Convention<br>HY<br>MM<br>MM<br>MM<br>Iternative Dep<br>MM<br>MM<br>MM                  | (f) Method<br>200DB<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L | (g) De  | preciation deduction 362               |
| <ul> <li>18 If you are electing to g asset accounts, check</li> <li>Section</li> <li>(a) Classification of proceeding to g asset accounts, check</li> <li>(a) Classification of proceeding to g asset accounts, check</li> <li>(a) Classification of proceeding to g asset accounts, check</li> <li>19 a 3-year property</li> <li>b 5-year property</li> <li>c 7-year property</li> <li>d 10-year property</li> <li>e 15-year property</li> <li>g 25-year property</li> <li>g 25-year property</li> <li>g 25-year property</li> <li>h Residential rental property</li> <li>i Nonresidential real property</li> <li>i Nonresidential real property</li> <li>c 30-year</li> <li>d 40-year</li> <li>Part IV Summary</li> <li>21 Listed property. Enter</li> <li>22 Total. Add amounts freicher and on the approperty</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | roup any assets placed in some constructions (b) Month arrive (b) Month arrive (c) (b) Month arrive (c)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | service during the tax Service During 2022 T d (c) Basis for depreci- (business/investmen only-see instructo compared to the service During 2022 Tax prvice Duri | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>(d) Recovery<br>period<br>3,615 5<br>25 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>39 yrs.<br>40 yrs.<br>30 yrs.<br>40 yrs.           | General Depre<br>(e) Convention<br>(e) Convention<br>HY<br>MM<br>MM<br>MM<br>Iternative Dep<br>MM<br>MM<br>MM                  | (f) Method<br>200DB<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L | (g) De  | preciation deduction 362               |
| <ul> <li>18 If you are electing to g asset accounts, check</li> <li>Section</li> <li>(a) Classification of proceeding to g asset accounts, check</li> <li>(a) Classification of proceeding to g asset accounts, check</li> <li>19 a 3-year property</li> <li>b 5-year property</li> <li>c 7-year property</li> <li>d 10-year property</li> <li>e 15-year property</li> <li>g 25-year property</li> <li>g 25-year property</li> <li>g 25-year property</li> <li>h Residential rental property</li> <li>i Nonresidential real property</li> <li>i Nonresidential real property</li> <li>c 30-year</li> <li>d 40-year</li> <li>Part IV Summary</li> <li>21 Listed property. Enter</li> <li>22 Total. Add amounts frahere and on the approces</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | roup any assets placed in some constructions (b) Month arrive (b) Month arrive (c) (b) Month arrive (c)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | service during the tax Service During 2022 T d (c) Basis for depreci- (business/investmen only-see instructo comparison of the service During 2022 Tax prvice During 2022 Tax gh 17, lines 19 and 20 i Partnerships and S co during the current year,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | year into one or mo<br>ax Year Using the<br>ation<br>use<br>ns)<br>(d) Recovery<br>period<br>3,615 5<br>25 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>27.5 yrs.<br>39 yrs.<br>40 yrs.<br>30 yrs.<br>40 yrs.           | Ceneral Depression<br>(e) Convention<br>(e) Convention<br>HY<br>MM<br>MM<br>MM<br>Iternative Dep<br>MM<br>MM<br>Iternative Dep | (f) Method<br>200DB<br>200DB<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L<br>S/L | (g) De  | preciation deduction 362 2,262         |

OMB No. 1545-0172

| Form 4 | \$562 (2022)                               |                   |                             |             | HARPI      | ER'S CH    | HOICE C                   | юм       | MUI    |           | SSOC       | ATION       | INC                    | 52-099          | 3424       | Page <b>2</b> |
|--------|--------------------------------------------|-------------------|-----------------------------|-------------|------------|------------|---------------------------|----------|--------|-----------|------------|-------------|------------------------|-----------------|------------|---------------|
| Part   | V Listed                                   | Property (II      | nclude automo               | biles,      |            |            |                           |          |        |           |            |             |                        |                 |            | r age         |
|        |                                            |                   | eation, or amu              |             |            |            |                           |          |        |           |            |             |                        |                 |            |               |
|        | Note: Fo                                   | or any vehicle    | for which you a             | re using    | g the sta  | indard n   | nileage r                 | ate      | or de  | eductir   | ng leas    | e exper     | nse, cor               | nplete <b>c</b> | only 24a,  |               |
|        |                                            |                   | ugh (c) of Sectio           |             |            |            |                           |          |        |           |            |             |                        |                 |            |               |
|        | Section A-                                 | -Depreciatio      | n and Other Inf             | ormatio     | on (Cau    | tion: Se   | e the in                  | struc    | ctior  | is for li | mits fo    | r passe     | nger au                | itomobi         | les.)      |               |
| 24a    | Do you have evidence                       | e to support the  | business/investmer          | nt use cla  | imed?      | Yes        | No                        |          | 241    | b If"`    | res," is t | he evid     | ence wri               | tten?           | Yes        | No            |
|        | (a)                                        | (b)               | (c)                         | (           | d)         |            | (e)                       |          |        | (f)       | (          | g)          | (                      | h)              | (          |               |
|        | Type of property                           | Date placed       | Business/<br>investment use | Cost or o   | ther basis |            | r depreciations/ investme |          | Red    | covery    |            | thod/       | Depre                  | eciation        | Elected s  |               |
|        | (list vehicles first)                      | in service        | percentage                  |             |            | us         | se only)                  |          | ре     | eriod     | Conv       | ention      | dedi                   | uction          |            | ost           |
| 25     | Special depreciation                       |                   |                             |             |            |            |                           | -        |        |           |            |             |                        |                 |            |               |
|        | the tax year and u                         |                   |                             |             |            | se. See    | instructi                 | ions     | . ,    |           |            | 25          |                        |                 |            |               |
| 26     | Property used mo                           |                   |                             |             |            |            |                           |          |        |           |            |             | - <u>r</u>             |                 | 1          |               |
|        | OPTIPLEX & LATI                            |                   | 100.00%                     |             | 3,108      |            |                           | 08       |        | 5         |            | <u>- HY</u> |                        | 622             |            |               |
| EVE    | NT SOFTWARE                                | 4/30/2018         | 100.00%                     |             | 16,400     |            | 16,4                      | 100      |        | 5         | S/L        | <u>- HY</u> |                        | 1,640           |            |               |
|        | Dranarty upod E00                          |                   |                             |             |            |            |                           |          |        |           |            |             |                        |                 | l          | w             |
| 27     | Property used 50%                          |                   | quaimed busine<br>%         |             |            |            |                           |          |        |           | S/L -      |             | 1                      |                 | n di giuna |               |
|        |                                            |                   | %                           |             |            |            | ······                    |          |        |           | S/L -      | <b></b>     |                        |                 |            |               |
|        |                                            |                   | /0                          |             |            |            |                           |          |        |           | S/L -      |             | +                      |                 |            |               |
| 28     | Add amounts in co                          | ulumn (h), line   |                             |             | here an    | d on line  | - 21 pag                  |          |        |           | <u> </u>   | 28          |                        | 2,262           |            |               |
| 29     | Add amounts in co                          |                   | -                           |             |            |            |                           | -        |        |           |            | <u>ا</u>    |                        | 29              | <u> </u>   | 0             |
|        |                                            |                   |                             |             |            |            | n Use o                   |          |        |           |            |             |                        | <b>1</b>        | A          |               |
| Comp   | plete this section for ve                  | ehicles used by   | a sole proprietor           | , partner   | , or othe  | r "more t  | han 5% c                  | owne     | r," o  | r relate  | d perso    | n. If you   | provide                | d vehicle       | es         |               |
| to you | ur employees, first ans                    | swer the questi   | ons in Section C            | to see if   | you mee    | t an exce  | eption to                 | comp     | pletir | ng this   | section    | for thos    | e vehicle              | es.             |            |               |
|        |                                            |                   |                             | (           | a)         | (1         | <b>b</b> )                |          | (c)    | )         | (          | d)          | (                      | e)              | (          | )             |
| 30     | Total business/inves                       | tment miles dr    | iven during                 | Vehi        | icle 1     | Vehi       | cle 2                     |          | Vehic  | le 3      | Veh        | icle 4      | Veh                    | icle 5          | Vehi       | cie 6         |
|        | the year ( <b>don't</b> inclu              | •                 |                             |             |            |            |                           | ļ        |        |           |            |             |                        |                 |            |               |
| 31     | Total commuting mil                        |                   |                             |             |            |            |                           | <u> </u> |        |           | <u> </u>   |             |                        |                 |            |               |
| 32     | Total other personal                       | (noncommutin      | ig)                         |             |            |            |                           |          |        |           |            |             |                        |                 |            |               |
|        | mi es driven                               |                   |                             |             |            |            |                           |          |        |           |            |             |                        |                 |            |               |
| 33     | Total miles driven du                      |                   | Add                         |             |            |            |                           |          |        |           |            |             |                        |                 |            |               |
| 24     | lines 30 through 32                        |                   |                             |             | . N        |            |                           |          | -      | N         | No.a       | N           |                        | N               | No.        |               |
| 34     | Was the vehicle ava                        | •                 |                             | Yes         | No         | Yes        | No                        | Ye       | es     | No        | Yes        | No          | Yes                    | No              | Yes        | No            |
| 35     | Was the vehicle use                        |                   |                             |             |            |            |                           |          |        |           |            |             |                        |                 |            |               |
| 55     | 5% owner or related                        |                   |                             |             |            |            |                           |          |        |           |            |             |                        |                 |            |               |
| 36     | Is another vehicle a                       |                   |                             |             |            |            |                           |          |        |           | †          | <u> </u>    |                        |                 |            |               |
|        |                                            |                   | -Questions for              | Employ      | ers Wh     | o Provi    | de Vehi                   | cles     | for    | Use b     | y Thei     | r Empl      | oyees                  | L               |            |               |
| Answ   | ver these questions                        |                   |                             |             |            |            |                           |          |        |           | -          |             | •                      | /ho arei        | n't        |               |
|        | than 5% owners or                          |                   | -                           |             |            |            |                           |          |        |           |            |             |                        |                 |            |               |
| 37     | Do you maintain a w                        | vritten policy st | atement that proh           | ibits all p | personal   | use of ve  | ehicles, ir               | nclud    | ling d | commu     | ting, by   |             |                        |                 | Yes        | No            |
|        | your employees?                            |                   |                             |             |            |            |                           |          |        |           |            |             |                        |                 |            |               |
| 38     | Do you maintain a w                        | vritten policy st | atement that proh           | ibits pers  | sonal us   | e of vehi  | cles, exce                | ept c    | omm    | nuting,   | by your    |             |                        |                 |            |               |
|        | employees? See the                         | e instructions fo | or vehicles used b          | y corpor    | ate office | ers, direc | tors, or 1                | % or     | r mo   | re own    | ers        |             |                        |                 |            |               |
| 39     | Do you treat all use                       |                   |                             |             |            |            |                           |          |        |           |            | • • •       |                        |                 |            |               |
| 40     | Do you provide mor                         |                   |                             |             |            |            |                           |          |        |           |            |             |                        |                 |            |               |
|        | use of the vehicles,                       |                   |                             |             |            |            | · · · ·                   |          |        |           |            |             |                        |                 |            |               |
| 41     | Do you meet the rec<br>Note: If your answe |                   |                             |             |            |            |                           |          |        |           |            |             | • • •                  |                 |            |               |
| Part   |                                            |                   | 40, 01 41 13 163,           | uonre       | ompiete    | Section    |                           |          |        | venicie   | <u> </u>   |             |                        |                 |            |               |
| u au t | Amort                                      | (a)               |                             | <u> </u>    | (b)        |            | (c)                       |          | T      |           | d)         |             | (e)                    | · · · · · · ·   | 1          | <br>f)        |
|        | Descri                                     | ption of costs    |                             | Date a      | mortizatio | n Am       | ortizable a               | mour     | nt     |           | section    |             | Amortizatio            |                 |            | for this year |
|        | Deser                                      |                   |                             |             | pegins     |            |                           | our      |        | 5540      |            |             | period or<br>percentag |                 |            |               |
| 42     | Amortization of co                         | sts that begin    | s during your 20            | )22 tax v   | year (se   | e instru   | ctions):                  | _        | I      |           |            |             |                        |                 |            |               |
|        |                                            | <u> </u>          | ¥.ź                         |             | ······     |            |                           |          |        |           |            |             |                        |                 |            |               |
|        |                                            |                   |                             |             |            |            |                           |          |        |           |            |             |                        |                 |            |               |
| 43     | Amortization of co                         |                   |                             |             |            |            |                           |          |        |           |            |             |                        | 43              |            |               |
| _44    | Total. Add amoun                           | ts in column (    | f). See the instru          | uctions     | for wher   | re to rep  | ort                       |          | · ·    | <u> </u>  | · · · ·    | <u></u>     | · ·                    | 44              |            | 0             |
|        |                                            |                   |                             |             |            |            |                           |          |        |           |            |             |                        |                 | Form 456   | 52 (2022)     |

| RPER'S CHOICE COMMUNITY ASSOCIATION. IN |
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4/30/2023

# Form 4562 Statement - 990 HARPER'S CHOICE COMMUNITY ASSOCIATION, INC. 52-0993424

| HARPER'S CHOICE COMMUNITY ASSOCIATION, INC.                                 | SOCIATION, INC               |               | 52-0993424           |                           |                       |        |                      |                  |                   |                    |             |                         |                                       |                |                          |
|-----------------------------------------------------------------------------|------------------------------|---------------|----------------------|---------------------------|-----------------------|--------|----------------------|------------------|-------------------|--------------------|-------------|-------------------------|---------------------------------------|----------------|--------------------------|
| Item Description of No. Property                                            | Date<br>Placed<br>In Service | Asset<br>Code | Business<br>Use<br>% | Cost or<br>Other<br>Basis | Sec. 179<br>Deduction | Credit | Special<br>Allowance | Salvage<br>Value | Recovery<br>Basis | Recovery<br>Period | y<br>Method | Con-<br>vention<br>Code | Prior Accum<br>Deprec.,<br>179, Bonus | 2022<br>Deprec | 2022<br>Accum.<br>Deprec |
| Depreciation Detail                                                         |                              |               |                      |                           |                       |        |                      |                  |                   |                    |             |                         |                                       |                |                          |
| MACRS deductions for prior years (Line 17)                                  | Line 17)                     |               |                      |                           |                       |        |                      |                  |                   |                    |             |                         |                                       |                |                          |
| SOUND SYSTEM                                                                | 8/11/2017                    | F-11          | 100.00%              | 2.762                     | 0                     | 0      | 0                    | 0                | 2,762             | 5.0                | SL/GDS      | Ħ                       | 2,484                                 | 276            | 2.760                    |
| CURTAINS                                                                    | 4/18/2018                    | F-11          | 100.00%              | 5,400                     | 0                     | 0      | 0                    | 0                | 5,400             | 5.0                | SL/GDS      |                         | 4,860                                 | 540            | 5,400                    |
| TABLES                                                                      | 4/23/2018                    | F-11          | 100.00%              | 1,901                     | 0                     | 0      | 0                    | 0                | 1,901             | 5.0                | SL/GDS      |                         | 1,710                                 | 190            | 1,900                    |
| CURTAINS                                                                    | 6/29/2018                    | F-11          | 100.00%              | 7,500                     | 0                     | 0      | 0                    | 0                | 7,500             |                    | SL/GDS      |                         | 5,250                                 | 1,500          | 6,750                    |
| CHAIRS - SOCIAL ROOM                                                        | 9/17/2018                    | F-11          | 100.00%              | 1,465                     | 0                     | 0      | 0                    | 0                | 1,465             | 5.0                | SL/GDS      |                         | 1,026                                 | 293            | 1,319                    |
| CHAIRS - SOCIAL ROOM                                                        | 2/4/2020                     | F-11          | 100.00%              | 3,089                     | 0                     | 0      | 0                    | 0                | 3,089             |                    | SL/GDS      |                         | 1,545                                 | 618            | 2,163                    |
| LOBBY FURNITURE                                                             | 6/3/2021                     | F-11          | 100.00%              | 5,500                     | 0                     | 0      | 0                    | 0                | 5,500             |                    | SL/GDS      | Η                       | 550                                   | 1,100          | 1,650                    |
| WEBSITE DESIGN                                                              | 11/21/2021                   | F-10          | 100.00%              | 22,568                    | 0                     | 0      | 0                    | 0                | 22,568            |                    | SL/GDS      |                         | 2,257                                 | 4,514          | 6,771                    |
| ICE MACHINE (UPSTAIRS) 12/28/2021                                           | 12/28/2021                   | F-10          | 100.00%              | 4,337                     | 0                     | 0      | 0                    | 0                | 4,337             | 5.0                | SL/GDS      | Η                       | 434                                   | 867            | 1.301                    |
| ICE MACHINE (DOWNSTAIF                                                      | 35 12/28/2021                | F-10          | 100.00%              | 3,169                     | 0                     | 0      | 0                    | 0                | 3,169             | 5.0                | SU/GDS      |                         | 317                                   | 634            | 951                      |
| BALLROOM CHAIRS                                                             | 3/18/2022                    | F-11          | 100.00%              | 9,500                     | 0                     | 0      | 0                    | 0                | 9,500             | 5.0                | SL/GDS      | Ϋ́                      | 950                                   | 1,900          | 2,850                    |
| Total MACRS deductions for prior years (Line 17)                            | prior years (Line            | 17)           |                      | 67,191                    | 0                     | 0      | 0                    | 0                | 67,191            |                    |             |                         | 21,383                                | 12,432         | 33,815                   |
| GDS 5-year property (Line 19b)                                              | 00001212                     | с<br>Ц        | 100 00%              | 0 61E                     | c                     | c      | c                    | C                |                   | c<br>L             |             | 2                       | c                                     |                |                          |
|                                                                             | 77071111                     | 2             | 100.001              | 0.00                      | 0                     | >      | Ð                    | Ο                | C10'S             | 0.0                | 20005       | ЪЧ                      | 0                                     | 362            | 362                      |
| Total GDS 5-year property (Line 19b)                                        | ine 19b)                     |               |                      | 3,615                     | 0                     | 0      | 0                    | 0                | 3,615             |                    |             |                         | 0                                     | 362            | 362                      |
| Subtotal Depreciation                                                       |                              |               |                      | 70,806                    | 0                     | 0      | 0                    | 0                | 70,806            |                    |             |                         | 21,383                                | 12,794         | 34,177                   |
| Listed Property                                                             |                              |               |                      |                           |                       |        |                      |                  |                   |                    |             |                         |                                       |                |                          |
| Listed property with more than 50% business use (Line 25 and 26)            | business use (               | Line 25       | and 26)              |                           |                       |        |                      |                  |                   |                    |             |                         |                                       |                |                          |
| COMPULERS(4)                                                                | ///20/2014                   | F-4           | 100.00%              | 5,101                     | 0                     | 0      | 0                    | 0                | 5,101             | 5.0                | SL/GDS      |                         | 5,101                                 | 0              | 5,101                    |
| DELLLAPTOP                                                                  | 12/5/2018                    | F-15          | 100.00%              | 741                       | 741                   | 0      | 0                    | 0                | 0                 | 5.0                | SL/GDS      |                         | 741                                   | 0              | 741                      |
| DELL MONITOR                                                                |                              | F-15          | 100.00%              | 158                       | 158                   | 0 (    | 0 0                  | 0                | 0                 |                    | SL/GDS      |                         | 158                                   | 0              | 158                      |
| UELL UPTIFLEA & LATITUDE                                                    |                              | ר-ד<br>ז ז    | 100.00%              | 3,108                     | 0                     | 0      | 0                    | D                | 3,108             |                    | SL/GDS      | ¥                       | 2,177                                 | 622            | 2,799                    |
| EVENI SOFIWARE                                                              | 4/30/2018<br>5/24/2015       | -15<br>- 15   | 100.00%              | 16.400                    | 0 0                   | 0 0    | 0 (                  | 0 0              | 16,400            | 5.0                | SL/GDS      | ¥                       | 14,760                                | 1,640          | 16,400                   |
|                                                                             | C1 07/47/0                   | 4 L<br>7 L    | 100.00%              | 1,230                     | 400                   | 0 0    |                      | 0 0              | 1,236             | 0.c                | SU7GDS      | Ĥ                       | 1,236                                 | 0              | 1,236                    |
| PRINTER                                                                     | 12/9/2021                    | F-15          | 100.00%              | 345                       | 345                   | 0 0    |                      | 00               |                   | 5.0<br>2           | 200DB       | Ì                       | 733                                   |                | /33<br>345               |
| Total listed proposition $> 50\%$ husiness use                              |                              |               |                      | 77 877                    | 1 077                 | C      |                      |                  | 75 045            |                    |             |                         | OF OF A                               |                |                          |
|                                                                             |                              |               | ļ                    | 770,12                    | 1101                  | >      | >                    |                  | 29,043            |                    |             |                         | 167'67                                | 707'7          | 21',515                  |
| Subtotal Listed Property                                                    | цy                           |               |                      | 27,822                    | 1,977                 | 0      | 0                    | 0                | 25,845            |                    |             |                         | 25,251                                | 2,262          | 27,513                   |
| Total Depreciation and Amortization                                         | d Amortizatic                | и             |                      | 98,628                    | 1,977                 | 0      | 0                    | 0                | 96.651            |                    |             |                         | 46,634                                | 15,056         | 61,690                   |
| Form 4562 Reconciliation                                                    | c                            |               |                      |                           |                       |        |                      |                  |                   |                    |             |                         |                                       |                |                          |
| Annual depreciation and amortization (including Sec 168(f) elected amounts) | nortization (inc             | luding Si     | ec 168(f) elec       | cted amounts              | (                     |        |                      |                  |                   |                    |             |                         |                                       | 15,056         |                          |
| Special allowance except listed property (Line 14) - current year assets    | isted property (             | Line 14)      | - current yea        | ir assets                 |                       |        |                      |                  |                   |                    |             |                         |                                       | 0              |                          |
| Special allowance - listed property (Line 25) - current year assets         | property (Line 2             | (2) - cum     | ent year asse        | ets                       |                       |        |                      |                  |                   |                    |             |                         |                                       | 0              |                          |
| Contion 170 amount aloi                                                     | wount alaimed (includes as   |               | or woor discillouid  |                           |                       |        |                      |                  |                   |                    |             |                         |                                       |                |                          |

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Section 179 amount claimed (includes prior year disallowed)

Section 179 amount carried forward to future year

|                                                     | Suppler                              | nental Financial Stateme                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | nts                                                                                                             | OMB No. 1545-0047         |
|-----------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|---------------------------|
| (Form 990)                                          |                                      | the organization answered "Yes" on Form                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                 | 2022                      |
|                                                     |                                      | 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 |                           |
| Department of the Treasury                          |                                      | Attach to Form 990.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | •                                                                                                               | Open to Public            |
| nterna: Revenue Service<br>Jame of the organization | Go to www.irs.gov                    | Preserved of the second sec |                                                                                                                 | Inspection                |
| -                                                   |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Employer identification i                                                                                       |                           |
|                                                     | COMMUNITY ASSOCIATION, II            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 | 93424                     |
| Part I Organiza                                     | if the organization answere          | dvised Funds or Other Similar Fur<br>d "Yes" on Form 990, Part IV, line 6.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | nds or Accounts.                                                                                                |                           |
| Complete                                            | an the organization answere          | (a) Donor advised funds                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | (b) Eurode and                                                                                                  | other accounts            |
| 1 Total number a                                    | t end of year .                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 |                           |
|                                                     | f contributions to (during year) .   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 |                           |
|                                                     | f grants from (during year)          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 |                           |
|                                                     | e at end of year                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 |                           |
| 5 Did the organiz                                   | ation inform all donors and donc     | or advisors in writing that the assets held in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | donor advised                                                                                                   |                           |
|                                                     |                                      | the organization's exclusive legal control?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                 | Yes No                    |
|                                                     |                                      | , and donor advisors in writing that grant f                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                 |                           |
|                                                     |                                      | efit of the donor or donor advisor, or for ar                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ny oth <b>e</b> r purpose                                                                                       |                           |
|                                                     |                                      | <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <u>.</u>                                                                                                        | Yes No                    |
|                                                     | ation Easements.                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Carlot Market                                                                                                   |                           |
|                                                     |                                      | d "Yes" on Form 990, Part IV, line 7.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | · · · · · · · · · · · · · · · · · · ·                                                                           |                           |
|                                                     |                                      | the organization (check all that apply)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                 |                           |
|                                                     | n of land for public use (for exampl |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | n of a historically impo                                                                                        |                           |
| Protection                                          | of natural habitat                   | Preservatio                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | n of a certified historic                                                                                       | structure                 |
|                                                     | on of open space                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 |                           |
|                                                     |                                      | held a qualified conservation contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | in the f <u>orm of a cons</u> e                                                                                 | ervation                  |
|                                                     | e last day of the tax year.          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Held at                                                                                                         | t the End of the Tax Year |
|                                                     | f conservation easements             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 2a                                                                                                              |                           |
| b lotal acreage r                                   | estricted by conservation easem      | ents                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 2b                                                                                                              |                           |
|                                                     |                                      | ed historic structure included in (a).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 2c                                                                                                              |                           |
|                                                     |                                      | (c) acquired after July 25, 2006, and not ister                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 2d                                                                                                              |                           |
|                                                     |                                      | ansferred, released, extinguished, or term                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                 | tion during               |
| the tax year                                        |                                      | angierred, released, extinguished, or term                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | mated by the organiza                                                                                           | ation during              |
|                                                     | es where property subject to con     | servation easement is located                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                 |                           |
|                                                     |                                      | arding the periodic monitoring, inspection,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | handling of                                                                                                     |                           |
|                                                     |                                      | easements it holds?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                 | Yes No                    |
|                                                     |                                      | pecting, handling of violations, and enforcing c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                 |                           |
|                                                     |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 | 5 /                       |
| 7 Amount of exper                                   | ses incurred in monitoring, inspecti | ng, handling of violations, and enforcing conse                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | rvation easements durin                                                                                         | ig the year               |
|                                                     | ·····                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 |                           |
|                                                     |                                      | line 2(d) above satisfy the requirements of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | f section 170(h)(4)(B)(                                                                                         | i)                        |
| and section 17                                      |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | e a construction de la construction | Yes No                    |
|                                                     |                                      | rts conservation easements in its revenue                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                 |                           |
|                                                     |                                      | xt of the footnote to the organization's finar<br>ments.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ncial statements that c                                                                                         | lescribes the             |
|                                                     | ccounting for conservation ease      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 | -1-                       |
|                                                     |                                      | ons of Art, Historical Treasures, or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | other Similar Ass                                                                                               | ets.                      |
|                                                     |                                      | d "Yes" on Form 990, Part IV, line 8.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                 |                           |
|                                                     |                                      | ASB ASC 958, not to report in its revenue<br>r assets held for public exhibition, education                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                 |                           |
|                                                     |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                 |                           |

| b | If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balar        | nce 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 |                                                                                                                   |                |
|   | following amounts required to be reported under FASB ASC 958 relating to these items:                             |                |
| а | Revenue included on Form 990, Part VIII, line 1.                                                                  | \$             |
|   | Assets included in Form 990 Part X                                                                                | \$             |

| Sched      | ule D (Form 990) 2022 HARPER'S CHOICE CC         | MMUNITY ASSOCIATIO         | DN, INC                                            | 52-099                   | <u> 93424</u>  | 1         | Page 2 |
|------------|--------------------------------------------------|----------------------------|----------------------------------------------------|--------------------------|----------------|-----------|--------|
| Par        | III Organizations Maintaining Colle              | ctions of Art, Histor      | ical Treasures, or                                 | Other Similar Asse       | ts (conti      | nued)     |        |
| 3          | Using the organization's acquisition, access     |                            |                                                    |                          |                |           |        |
|            | collection items (check all that apply):         |                            |                                                    | 0                        |                |           |        |
| а          | Public exhibition                                | d                          | Loan or exchange pr                                | ogram                    |                |           |        |
| b          | Scholarly research                               | e 🗌                        |                                                    |                          |                |           |        |
| с          | Preservation for future generations              |                            |                                                    |                          |                |           |        |
| 4          | Provide a description of the organization's c    | ollections and explain bo  | w they further the ora                             | anization's avampt pur   | noco in Dr     | - rt      |        |
| •          | XIII.                                            |                            | w they further the orga                            | anization's exempt pur   | JUSE III F 2   | 211       |        |
| 5          | During the year, did the organization solicit of | or receive donations of a  | rt historical treasures                            | or other similar         |                |           |        |
| •          | assets to be sold to raise funds rather than t   |                            |                                                    |                          | Υe             | s 🗖       | No     |
| Part       | IV Escrow and Custodial Arrangem                 |                            |                                                    |                          |                |           |        |
| r are      | Complete if the organization answe               | arad "Vas" on Form Q       | 90 Part IV line 9 o                                | r reported an amour      | at on Eor      | m         |        |
|            | 990, Part X, line 21.                            |                            | 50, Faitiv, ine 5, 0                               | r reporteu an amour      |                | 111       |        |
| 1a         | Is the organization an agent, trustee, custod    | ian or other intermedian   | / for contributions or of                          | hor exects at            |                |           |        |
| ia         | included on Form 990, Part X?                    |                            |                                                    | ner assets not           | ☐ Ye           |           | No     |
| b          | If "Yes," explain the arrangement in Part XIII   |                            |                                                    |                          |                | ;s        | NO     |
| ~          |                                                  |                            |                                                    |                          | Amount         |           |        |
| с          | Beginning balance                                |                            | ×.                                                 | 1c                       |                |           | 0      |
| d          | Additions during the year                        |                            |                                                    | 1d                       |                |           |        |
| е          | Distributions during the year                    |                            |                                                    | 1e                       |                |           |        |
| f          | Ending balance                                   |                            |                                                    | 1f                       |                |           | 0      |
| 2a         | Did the organization include an amount on F      |                            | CONTRACTOR AND | al account liability?    | Ye             | s X       | No     |
| b          | If "Yes," explain the arrangement in Part XIII   |                            |                                                    |                          |                |           |        |
| Part       |                                                  |                            |                                                    |                          |                |           | l      |
| Fari       | Complete if the organization answe               | arad "Vac" an Earth O      | 00 Dort IV line 10                                 |                          |                |           |        |
|            |                                                  | Current year (b) Prio      |                                                    | back (d) Three years bac |                | ur years  |        |
| 1a         | Beginning of year balance                        |                            |                                                    | 0                        |                |           |        |
| b          | Contributions                                    |                            |                                                    |                          |                |           |        |
| c          | Net investment earnings, gains,                  |                            | V                                                  |                          |                |           |        |
| C          | and losses                                       |                            |                                                    |                          |                |           |        |
| d          | Grants or scholarships                           |                            |                                                    |                          |                |           |        |
| e          | Other expenditures for facilities                |                            |                                                    |                          |                |           |        |
| č          | and programs                                     |                            |                                                    |                          |                |           |        |
| f          | Administrative expenses                          |                            |                                                    |                          |                |           |        |
| a          | End of year balance                              | 0                          | 0                                                  |                          | 0              |           | 0      |
| 2          | Provide the estimated percentage of the cur      |                            | ne 1g. column (a)) hel                             | d as:                    |                |           |        |
| а          | Board designated or quasi-endowment              | %                          | 5                                                  |                          |                |           |        |
| b          | Permanent endowment                              | %                          |                                                    |                          |                |           |        |
| с          | Term endowment                                   | y                          |                                                    |                          |                |           |        |
|            | The percentages on lines 2a, 2b, and 2c sho      | ould equal 100%.           |                                                    |                          |                |           |        |
| 3a         | Are there endowment funds not in the posse       | ession of the organization | n that are held and adr                            | ninistered 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 organiz | ations listed as required  | on Schedule R?                                     |                          | 3b             |           |        |
| 4          | Describe in Part XIII the intended uses of the   | e organization's endowm    | ient funds.                                        |                          |                |           |        |
| Part       |                                                  |                            |                                                    |                          |                |           |        |
|            | Complete if the organization answe               | ered "Yes" on Form 9       | 90, Part IV, line 11a                              | See Form 990, Par        | t X, line      | 10.       |        |
|            | Description of property                          | (a) Cost or other basis    | (b) Cost or other basis                            | (c) Accumulated          | ( <b>d)</b> Bo | ook value | е      |
|            |                                                  | (investment)               | (other)                                            | depreciation             |                |           |        |
| 1a         | Land                                             | 0                          | 0                                                  |                          |                |           | 0      |
| b          | Buildings                                        | 0                          | 0                                                  | 0                        |                |           | 0      |
| С          | Leasehold improvements                           | 0                          | 29,064                                             | 29,064                   |                |           | 0      |
| d          | Equipment                                        | 0                          | 276,397                                            | 221,626                  |                | 5         | 54,771 |
| e<br>Total | Other                                            |                            |                                                    |                          |                | <u> </u>  |        |
| rotal      | Add lines 1a through 1e. (Column (d) must e      | зуйаг гонтгууй, Рап X, (   | соштт (В), Ше 10С.) .                              |                          |                | 5         | 54,771 |

| (a) Description of security or category                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | (b) Book value                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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| (including name of security)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           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| 1) Financial derivatives                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               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| 2) Closely held equity interests                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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| 3) Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               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| Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 12.).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           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| Complete if the organization answered           (a) Descr           (1)           (2)           (3)           (4)           (5)           (6)           (7)           (8)           (9)           Total. (Column (b) must equal Form 990, Part X, col. (B) I.           Part X           Other Liabilities.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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| Complete if the organization answered<br>(a) Descr<br>(1)<br>(2)<br>(3)<br>(4)<br>(5)<br>(6)<br>(7)<br>(8)<br>(9)<br>Total. (Column (b) must equal Form 990, Part X, col. (B) II<br>Part X Other Liabilities.<br>Complete if the organization answered                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| Complete if the organization answered<br>(a) Descr<br>(1)<br>(2)<br>(3)<br>(4)<br>(5)<br>(6)<br>(7)<br>(8)<br>(9)<br>Total. (Column (b) must equal Form 990, Part X, col. (B) I.<br>Part X Other Liabilities.<br>Complete if the organization answered<br>line 25.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| Complete if the organization answered<br>(a) Description<br>(1)<br>(2)<br>(3)<br>(4)<br>(5)<br>(6)<br>(7)<br>(8)<br>(9)<br>Total. (Column (b) must equal Form 990, Part X, col. (B) In<br>Part X Other Liabilities.<br>Complete if the organization answered<br>line 25.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| Complete if the organization answered (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) In Part X Other Liabilities. Complete if the organization answered line 25. 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| Complete if the organization answered<br>(a) Description<br>(a) Description<br>(a) Description<br>(a) Description<br>(b) Description<br>(c) Description<br>( | ine 15.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | (b) Book value 10,88                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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(a) Descrip         (1) Federal income taxes         (2) ACCRUED PAYROLL         (3) ACCRUED VACATION LEAVE         (4)         (5)         (6)         (7)         (8)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  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| Sched  | HARPER'S CHOICE COMMUNITY ASSOCIATION, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 52-0993424          | Dess          |  |  |
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| Pa     | Reconciliation of Revenue per Audited Financial Statements With Revenue per R                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     | Page <b>4</b> |  |  |
|        | Complete if the organization answered "Yes" on Form 990, Part IV line 12a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                     |               |  |  |
| 1      | lotal revenue, gains, and other support per audited financial statements                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 1                   |               |  |  |
| 2      | Amounts included on line 1 but not on Form 990, Part VIII, line 12:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                     |               |  |  |
| а      | Net unrealized gains (losses) on investments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |               |  |  |
| b      | Donated services and use of facilities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b></b>             |               |  |  |
| C      | Recoveries of prior year grants                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |               |  |  |
| d      | Other (Describe in Part XIII.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                     |               |  |  |
| е<br>3 | Add lines 2a through 2d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | _2e                 | 0             |  |  |
| 4      | Subtract line <b>2e</b> from line <b>1</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 3                   | 0             |  |  |
| a      | Amounts included on Form 990, Part VIII, line 12, but not on line 1:<br>Investment expenses not included on Form 990, Part VIII, line 7b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                     |               |  |  |
| b      | Other (Describe in Dest VIII)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     |               |  |  |
| c      | Add lines 4a and 4b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                     |               |  |  |
| 5      | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 4c                  | 0             |  |  |
| Par    | XII Reconciliation of Expenses per Audited Financial Statements With Expenses per                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                     | 0             |  |  |
|        | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Return.             |               |  |  |
| 1      | Total expenses and losses per audited financial statements                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 1                   |               |  |  |
| 2      | Amounts included on line 1 but not on Form 990, Part IX, line 25:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |               |  |  |
| а      | Donated services and use of facilities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |               |  |  |
| b      | Prior year adjustments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |               |  |  |
| С      | Other losses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |               |  |  |
| d      | Other (Describe in Part XIII.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ]                   |               |  |  |
| e      | Add lines 2a through 2d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 2e                  | 0             |  |  |
| 3<br>4 | Other (Describe in Part XIII.)     2c/2d       Add lines 2a through 2d     2d       Subtract line 2e from line 1     4       Amounts included on Form 990, Part IX, line 25, but not on line 1     4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 3                   | 0             |  |  |
| a      | Investment expenses not included and the Congregation of the Congr |                     |               |  |  |
| b      | Other (Describe in Part VIII.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 4.1                 |               |  |  |
| с      | Add lines 4a and 4b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                     | 0             |  |  |
| 5      | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 4c<br>5             | 0             |  |  |
| Part   | XIII Supplemental Information.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 5                   | 0             |  |  |
| Provid | te the descriptions required for Part II, lines 3, 5, and 9. Part III lines 1a and 4. Part IV lines 1b and 2b. Pa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | rt V line 4: Part X | lino          |  |  |
| 2; Par | t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information of the second s                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ation.              | inte          |  |  |
|        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |               |  |  |
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| SCHEDULE O<br>(Form 990)                                                                       | Supplemental Information to Form 990 or 990                                                  | )-EZ                           | OMB No. 1545-0047            |  |  |  |
|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|--------------------------------|------------------------------|--|--|--|
|                                                                                                | Form 990 or 990-EZ or to provide any additional information.                                 |                                | 2022                         |  |  |  |
| Department of the Treasury<br>Internal Revenue Service<br>Name of the organization             | Go to www.irs.gov/Form990 for the latest information.                                        |                                | Open to Public<br>Inspection |  |  |  |
|                                                                                                | COMMUNITY ASSOCIATION, INC.                                                                  | Employer identif<br>52-0993424 |                              |  |  |  |
| Form 990, Part III, Lin                                                                        | Form 990, Part III, Line 4d: Program Service Expenses: 8,111, Grants and allocations: 2,928, |                                |                              |  |  |  |
| Revenue: 1,540 NEW                                                                             | Revenue: 1,540 NEWSLETTER AND MISCELLANEOUS EXPENSES - EXPENSES INCURRED IN PUBLISHING       |                                |                              |  |  |  |
| PERIODIC NEWSLET                                                                               | PERIODIC NEWSLETTERS USED TO INFORM COMMUNITY OF PROGRAMS, EVENTS, AND ACTIVITIES AVAILABLE  |                                |                              |  |  |  |
| AND OTHER SERVIC                                                                               | ES MADE AVAILABLE TO THE COMMUNITY                                                           |                                | 5                            |  |  |  |
| Form 990, Part VI, Section B, Line 11A: THE COMPLETED FORM 990 HAS BEEN PROVIDED TO ALL BOARD  |                                                                                              |                                |                              |  |  |  |
| MEMBERS VIA EMAIL FOR REVIEW PRIOR TO SUBMISSION.                                              |                                                                                              |                                |                              |  |  |  |
| Form 990, Part VI, Section B, Line 15A: ALL STAFF COMPENSATION, INCLUDING THE MANAGERS, DERIVE |                                                                                              |                                |                              |  |  |  |
| FROM AN INDEPENDENT SALARY STUDY APPROVED BY THE BOARD OF DIRECTORS                            |                                                                                              |                                |                              |  |  |  |
| Form 990, Part VI, Section B, Line 15B: EMPLOYEE WAGES ARE BASED ON AN INDEPENDENT SALARY      |                                                                                              |                                |                              |  |  |  |
| STUDY.                                                                                         |                                                                                              |                                |                              |  |  |  |
| Form 990, Part VI, Section C, Line 19: THE ORGANIZATION POSTS ITS GOVERNING DOCUMENTS AND      |                                                                                              |                                |                              |  |  |  |
| POLICIES ON ITS WEBSITE. FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST IN THE ORGANIZATIONN  |                                                                                              |                                |                              |  |  |  |
| OFFICE                                                                                         |                                                                                              |                                |                              |  |  |  |
| Form 990, Part VI, Sect                                                                        | ion A, Line 6, 7A, 7B: THE HARPER'S CHOICE COMMUNITY RESIDENTS                               | MEMBERS                        |                              |  |  |  |
| ANNUALLY ELECT TH                                                                              | E MEMBERS OF THE BOARD/GOVERNING BODY AND APPROVE SIGN                                       | FICANT DECIS                   | IONS OF                      |  |  |  |
| THE BOARD. THEY HAVE THE RIGHT TO ELECT MEMBERS OF THE BOARD.                                  |                                                                                              |                                |                              |  |  |  |
|                                                                                                |                                                                                              |                                |                              |  |  |  |
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