## Form **990**

# Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047
2023
Open to Public Inspection

Department of the Treasury Internal Revenue Service

_	ror me	2023 calendar year, or tax year beginning	ending		
В	Check if applicabl	C Name of organization		D Employer identific	cation number
	Addre	DDD FOUNDATION, INC.		]	
	Name chang			58-24862	56
F	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
F	Final	D O BOY 191526		(404)942	
<u> </u>	return termin eted		<u>.                                    </u>	T	1,372,962.
_	eted ☐Amen			G Gross receipts \$	
L	return	AIDANIA, GA SIIIS-ISZO		H(a) Is this a group re	
	Application	F Name and address of principal officer: DBTDIGT R. RORDERTO		for subordinates	? Yes X No
	pendi	PO BOX 191526, ATLANTA, GA 31119		H(b) Are all subordinates in	cluded? Yes No
<u> </u>	Tay-ex	empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1)	or 527	If "No." attach a	list. See instructions
	Websi			H(c) Group exemptio	o gumber
		organization: X Corporation Trust Association Other	1 Voor		A State of legal domicile: GA
			IL Teal	OF TOTAL COURT	n State of legal dominicite. G21
314	<u>arrir</u>	Summary	DDD EC		TO TO
	1	Briefly describe the organization's mission or most significant activities: THE	עעע אינ	OUNDATION, II	NC. IS
Governance		COMMITTED TO OFFERING ACCESSIBLE, COMPRES	IENSIV	3 DENTAL TRE	ATMENT TO
Ē	2	Check this box if the organization discontinued its operations or dispo	sed of more	than 25% of its net ass	sets.
ģ	3	Number of voting members of the governing body (Part VI, line 1a)		3	11
ع	4	Number of independent voting members of the governing body (Part VI, line 1b)			11
		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			19
ā	5				100
Activities &	6	Total number of volunteers (estimate if necessary)			0.
į	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			
_	<u>`</u> Ь	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
	1		_	Prior Year	Current Year
_	8	Contributions and grants (Part VIII, line 1h)		338,055.	264,974.
=	9	Program service revenue (Part VIII, line 2g)		937,243.	1,038,815.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		867.	8,267.
ă	2			33,310.	39,666.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,309,475.	1,351,722.
_	_	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	L	830,532.	834,731.
Fxnenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
į	, h	Total fundraising expenses (Part IX, column (D), line 25) 142, 9	99.		
Ş 11	[] <sub></sub> [	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		493,016.	609,035.
	1 "			1,323,548.	1,443,766.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-14,073.	-92,044.
_		Revenue less expenses. Subtract line 18 from line 12			
Ö			80	eginning of Current Year	End of Year
Assets	20	Total assets (Part X, line 16)	L	1,505,288.	1,391,426.
As	21	Total liabilities (Part X, line 26)		582,720.	560,902.
<u>se</u>	22	Net assets or fund balances, Subtract line 21 from line 20		922,568.	830,524.
		Signature Block			
		alties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of my	knowledge and belief, it is
		ct, and <del>complete</del> . Declaration of preparer (other than officer) is based on all information of w			,,,,,,
uu	s, correc		men preparei		1104
		Signature of officer		Date T	H & 7
Sig	lu 🦳	Τ *		Date	
He	re	DEIDRA R. RONDENO, CEO			
_		Type or print name and title			· · · · · · · · · · · · · · · · · · ·
_		Print/Type preparer's name Preparer's signature	T	Date Check	PTIÑ
Pal	d	JAMIE YOUNGKER	lo	07/17/24 if self-employ	P01308454
	parer	770 77 00 (00 GD) G 77G			2-2124798
	-		200	- amount o	<u> </u>
ŲŠI	Only	· · · · · · · · · · · · · · · · · · ·	u 200	n 40	4-495-4895
		SUWANEE, GA 30024		Phone no.40	
Ma	y the I	RS discuss this return with the preparer shown above? See instructions		······	X Yes No
					Form 990 (2023)

Setting   Statement of Program Service Accomplishments   Check   Schedule Continue a resonate on racio a not line in this Part II	Form	990 (2023) DDD FOUNDATION, INC.	58-2486256	Page 2
Check if Schedule O contains a resource or note to any line in this Part III  Bit dipl describe the cognitation shadou:  THE DDD FOUNDATION, INC. IS COMMITTED TO OFFERING ACCESSIBLE,  COMPREMENSIVE DENTAL TREATMENT TO PATIENTS WITH DEVELOPMENTAL  DISABILITIES.  Did the organization undertake any significant program services during the year which were not listed on the prior form 990 or 990-22?  If 'Yes,' describe these cases conducting, or make significant changes in how it conducts, any program services?  If 'Yes, 'Scannos' these changes on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program services, as measured by superness. Section 501(c) and 501(c)(c)) constructions are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service accomplishments for each of its three largest program services, as measured by superness. Section 501(c)(c) and 501(c)(c)(c)) and 501(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(				
1 Birlity describe the organization's mission: THE DDD FOUNDATION, INC. IS COMMITTED TO OFFERING ACCESSIBLE, COMPREHENSIVE DENTAL TREATMENT TO PATIENTS WITH DEVELOPMENTAL DISABILITIES.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-627    Yes   No   Yes   No   If Yes, describe these new services on Schedule 0.   If Yes, describe these new services on Schedule 0.   If Yes, describe these thanges on Schedule 0.   One of the organization program service excomplishments for each of its three largest program services?   Yes   No   If Yes, describe these changes on Schedule 0.   Describe the organization program service excomplishments for each of its three largest program services?   Yes   No   If Yes, describe the services of the organization are required to report the amount of grants and allocations to others, the total expanses, and   teveruse, if any, for each program service reported.     teveruse, if any, for each program service reported.   1,163,194.   Notice grains of the program services of the program	**************************************			🔲
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COMPREHENSIVE DENIYAL TREATMENT TO PATIENTS WITH DEVELOPMENTAL  DISABILITIES.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 930-E27  If 'Yes,' describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services on the significant changes in how it conducts, any program services. The organization cease conducting, or make significant changes in how it conducts, any program services. The organization program service accomplishments for each of its three largest program services, as measured by expenses.  Section 501(c)(s) and 601(c)(s) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, it may, for each consona service reported.  40 (new ) (spenses 1,163,194.  41 (code ) (spenses 1,163,194.  42 (code ) (spenses 1,163,194.  43 (code ) (spenses 1,163,194.  44 (code ) (spenses 1,163,194.  45 (code ) (spenses 1,163,194.  46 (code ) (spenses 1,163,194.	٠	THE DDD FOUNDATION. INC. IS COMMITTED TO OFFERING ACCESS	IBLE.	
DISABILITIES.  Did the organization undertake any significant program services during the year which were not listed on the prior form 800 or 9504-27		COMPREHENSIVE DENTAL TREATMENT TO PATIENTS WITH DEVELOPM	ENTAL	•
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?  If "Yes," describe these new services on Schedule 0.  3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  — Yes IX No If "Yes," describe these changes on Schedule 0.  Beachts the organization for program service accomplishments for each of its three largest program services, as measured by expenses.  Section 501(c)(c)) and 501(c)(d) organizations are required to report the amount of grants and allocations to others, the total expenses, and reverse. If any for each program services program services grant and reverse. If any for each program services program services are required to report the amount of grants and allocations to others, the total expenses, and reverse. If any for each program services are required to report the amount of grants and allocations to others, the total expenses.  40 Outs (School 1) (Scho				
prior Form 980 or 990-E27    Ves   X  No   11 Yes, * describe these new senders on Schedule O.     Did the organization cease conducting, or make significant changes in how it conducts, any program services, as measured by expenses.		D 1010 121 1 1 10 1		
prior Form 980 or 990-E27    Ves   X  No   11 Yes, * describe these new senders on Schedule O.     Did the organization cease conducting, or make significant changes in how it conducts, any program services, as measured by expenses.		Did the exercisetion undertake any significant argame consider during the year which were not listed on the		
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	<u>4e</u>	10tal program service expenses	Form !	90 (2023)

1,541	dies onother of froquitor constants		Yes	No_
_	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	П	163	IAD_
1		1 1	x	
_	If "Yes," complete Schedule A	2	x	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
4	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X,	1		
	as applicable.		盂	
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
đ	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e		11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			7,5
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f_		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	_	•	₹.
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			x
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	$\vdash$	-42
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	]		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	14b		X
4-	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		<u> </u>
15		15		x
	foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	<u> </u>	$\vdash$	- <u></u>
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	l	x
4	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		i	_ <del>-</del> -
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
40	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	_ <del></del>		
18		18	x	1
40	1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		i	l
19		19		x
20~	complete Schedule G, Part III	20a	Г	х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		L
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	<u> </u>	X
	3 19.21.23	Form	990	(2023)

Form	990 (2023) DDD FOUNDATION, INC. 58-248	<u>6256</u>	P	age 4
	tilV: 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		1	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
94a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
274	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?		-	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ç	-	24c		
	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
		270		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
_	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	208		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	054	•	x
	Schedule L, Part I	25b	<del></del>	
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%		<b></b>	
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	<u> 26</u>	X	<del> </del>
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	Table Addition the	X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			in the second
	instructions for applicable filing thresholds, conditions, and exceptions):	2		
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
ь	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If		ļ	
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			1
	contributions?  f "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
-	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
•	sections 301.7701-2 and 301.7701-37  f "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
34		34	İ	X
OF-	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	_		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
D		35b		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	.		
36		36		x
	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30	<del> </del>	<del></del> -
37		37		x
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	. 31	i	<del>                                     </del>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	x	l
·Da	Note: All Form 990 filers are required to complete Schedule O	90		
Ed				
	Check if Schedule O contains a response or note to any line in this Part V			_ <u></u>
	1.1	A	Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	4		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	<u>ا ا</u>		<b>-1</b>
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1	v	المناه
	(gambling) winnings to prize winners?	10	<u>  X</u> 1990	(0000
		rom	しっつい	12023

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20099.01

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?

If "Yes," complete Form 6069.

If "Yes," complete Form 4720, Schedule O.

Form 990 (2023) DDD FOUNDATION, INC. 58-2486256 Page
Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Olicon il Competito C Commente L 100						A
Sec	tion A. Governing Body and Management			•••			
				1	ball works in	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	<u> </u>	<u> 11</u>		46.	
	If there are material differences in voting rights among members of the governing body, or if the governing					7.2	
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		İ				
b	Enter the number of voting members included on line 1a, above, who are independent	1b		_11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with a	any other			300	W. 3
	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	t supervision				
					3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9		s filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?			5		X
6	Did the organization have members or stockholders?				6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point (	one or				
	more members of the governing body?				7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	tockho	lders, or				
	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by the	e following:				\$
а	The governing body?				_8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched a	it the				
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			,,,,,,,	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)				
						Yes	No
	Did the organization have local chapters, branches, or affiliates?				10a		X
ь	If "Yes," did the organization have written policies and procedures governing the activities of such ch	napters	, affiliates,				
	212 213101100 to 0110210 atom - F-11-11-11-11-11-11-11-11-11-11-11-11-11			*******	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befor	re filing the for	m?	11a	X	**************************************
ь	Describe on Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	
ь					12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "					]	
	оп Schedule O how this was done		••••	•••••	12c	<u>X</u>	
13	Did the organization have a written whistleblower policy?				13	X	
14	Did the organization have a written document retention and destruction policy?				14	X	TOTA 4500
15	Did the process for determining compensation of the following persons include a review and approve	al by in	dependent		4		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					A PROVIDE	7,
а	The organization's CEO, Executive Director, or top management official		***************************************		15a		X
b	Other officers or key employees of the organization				15b	× ====	X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment w	ith a		- 16		37
	taxable entity during the year?	•••••			16a	2004 A 12	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua	te its p	articipation		1		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ		n's			. Jini	
	exempt status with respect to such arrangements?	.,,,,			16b		ļ
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed				• • •		
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	ınd 990	J-1 (section 50	1(c)(3)s	only)	availal	DIG
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website X Another's website X Upon request Upon request Other (explain						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	onflict (	of interest poli	cy, and	i financ	cial	
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks an	d records				
	DEIDRA R. RONDENO - (404)942-0086						_
	PO BOX 191526, ATLANTA, GA 31119-1526						

### Form 990 (2023) DDD FOUNDATION, INC. 58-2 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 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 n	or any related	orga	niza'	tion	con	npen	sate	ated any current officer, director, or trustee.						
(A)	(B)	(C)						(D)	(E)	(F)				
Name and title	Average	Position (do not check more than one						Reportable	Reportable	Estimated				
	hours per	Ьoх	box, unless person is both an officer and a director/trustee)				an	compensation	compensation	amount of				
	week	-	COT MAIN	uau	FRCID	7.0 (43.	96)	from	from related	other				
	(list any	럂						the organization	organizations (W-2/1099-MISC/	compensation from the				
	hours for related	1	tea .			sated		(W-2/1099-MISC/	1099-NEC)	organization				
	organizations	뽪	tras		88	mpen		1099-NEC)	1000 .120,	and related				
	below	Individual trustee or director	Institutional trustes	, H	oldus	sst co	늏	[		organizations				
	line)	lagisi.	Instit	Officer	Keye	Highest compensated employee	Former							
(1) DEIDRA R. RONDENO	32.00								_					
CEO		匚		X	L			190,532.	0.	0.				
(2) KAREN CALLIER	28.00						İ			•				
STAFF DENTIST		<u> </u>			_	X	<u> </u>	159,7 <u>42.</u>	0.	<u> </u>				
(3) MARIA ALEXANDER	1.00				l					•				
PRESIDENT		X		X	_		<u> </u>	0.	0.	0.				
(4) KAREN CARNEY	1.00	1						_	0.	0				
TREASURER	1 00	X	<u> </u>	X	<u> </u>		_	0.	U.	0.				
(5) KATHERINE STRINGER	1.00	x		x				0.	0.	0.				
SECRETARY	1 00	<u> </u>		A	_	┢	-	0.		<u></u>				
(6) WILLIAM E. GALLOWAY	1.00	x		i				l o.	0.	0.				
DIRECTOR	1.00		$\vdash$	-		$\vdash$		· ·						
(7) JAN HILL	1.00	x		l		İ		0.	0.	0.				
(8) YASHICA MARSHALL, ESQ.	1.00	╬		├─		┢								
DIRECTOR	1.00	X						0.	0.	0.				
(9) ANNETTE MCKNIGHT	1.00						İ	·						
DIRECTOR		x						0.	0.	0.				
(10) VANDERLYN SEWELL, M.D.	1.00				1	Γ								
DIRECTOR		X	_	L				0.	0.	0.				
(11) MACEO S. SLOAN	1.00	1				l		1						
DIRECTOR		X		ļ	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.				
(12) HEATHER HINOJOSA	1.00	<b>.</b>								^				
DIRECTOR	1	X	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.				
(13) ALDA UNDERWOOD-JACKSON, DMD	1.00	┨			1			1	۱ .					
DIRECTOR	_	X	-	<u> </u>	├	┢	┝	0.	0.	0.				
		┨		1		İ								
		╁			<del>                                     </del>	╁	H		<del></del>					
<u></u>							L							
		-						ļ						
	<del>                                     </del>	+-	╁	$\vdash$	$\vdash$	-	$\vdash$	<del>                                     </del>	-	<u> </u>				
		1_				_			<u> </u>	200				

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Form 990 (2023)

(A)

Name and title

		hours for related organizations below line)	Individual trustae or direc	Institutional trustee	Officer	Кеу етріоуев	Highest compensated employee	Former	organization (W-2/1099-MISC/ 1099-NEC)	(W-2/1099-MIS 1099-NEC)		orga and	m the nizatio relate nizatio	on ed
										_	$\neg$	_		
					_			-						
			_					_						
					-		_							
					<u> </u>									
			_					_	<u> </u>					
			_						350,274.		0.			0.
	Subtotal								0.		0.			0.
<u>d</u>	Total (add lines 1b and 1c)								350,274.		0.			0.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	d at	OOVE	) wh	о ге	ceived more than \$100,	000 of reportable	3			2
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s											3	Yes	No X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	ım of reportabl	e co	qmp	ensa	ition	and	oth	er compensation from t	he organization		4	x	
5	Did any person listed on line 1a receive or a rendered to the organization? [f "Yes." com	accrue comper	sati	on f	rom	any	unre	elate	ed organization or individ	dual for services		5		X
Sec	tion B. Independent Contractors	iolete Scheouil	9 J 1	OF S	JCH.	bers	on .							
1	Complete this table for your five highest co the organization. Report compensation for										pensat	tion fro	m	
	(A) Name and business			ON		101			(B) Description of s		С	(C compen	) Isation	<b>1</b>
		-			<u> </u>									
										<u> </u>				
												,		
													-	
		<u> </u>						$\dashv$					•	
	Total number of independent contractors (	ncludina but n	ot li	mite	d to	tho	se lis	sted	above) who received m	ore than	Egyl.	: <b>12</b>		
	\$100,000 of compensation from the organi		11				0					14.		
												Form 9	<del>9</del> 90 (2	2023)

Position

(do not check more than one box, unless person is both an officer and a director/trustee)

from

the

Average

hours per

week

(list any

Ear	<u> </u>	, Ým	<b>-</b>						a in this Dort VIII			
			Check if Schedule O o	onte	ains a n	espon	S <del>O</del> 01	note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ងក	1	а	Federated campaigns			1a				and the first of		
			Membership dues			1b					34	
Ğ∄.		¢	Fundraising events	•••••		1c		5,758 <u>.</u>				
寰星		đ	Related organizations	,	[	1d						
S.E		e	Government grants (contri	butio	ons)	1e					6 6 6 6 C	
<u>Pag</u>		f	All other contributions, gifts,	grant	s, and							- 44
置舞			similar amounts not included	abov	* ***	1f		<u>259,216.</u>				
Contributions, Gifts, Grants and Other Similar Amounts		_	Noncesh contributions included in I	lines 1	la-1f	1g \$			0.64 0.64		200	
<u>ठ</u> ह्		h	Total. Add lines 1a-1f					Business Code	264,974.			50 (1 mm) 1 mm
	_		NEXTENT CERTITA	D.C			ŀ		1 038 815	1,038,815.		
Program Service Revenue	2		DENTAL SERVIC	<u> </u>			╌┠	UZI300	E,050,015.	1,030,013.		-
ž a		b		_			-	<del>_</del> -				
E		ď		_			-			··· <del>-</del>		
뛆		u A					-					
됩		f	All other program service	rever	nue		<u> </u>					
			Total. Add lines 2a-2f				_		1,038,815.	的自己解除的程度		
	3	}	Investment income (includ	ling d	dividen	ids, int	eres	t, and				0 000
			other similar amounts)						8,232.			8,232.
	4	ŀ	Income from investment of	f tax	r-exemi	pt bon	d pro	oceeds			<u> </u>	
	5	•	Royalties									
			_		—- <u></u>	Real		(ii) Personal				
	8	а	Gross rents	<u>6a</u>	_							
			Less: rental expenses	6b			$\dashv$	· · · · · · · · · · · · · · · · · · ·				#
			Rental income or (loss)  Net rental income or (loss)	6c					<u> </u>			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	-		Gross amount from sales of	<u>'</u>	n Se	curitie	s	(ii) Other			Website	£, v ∈
1	•	a	assets other than inventory	7a			_	100.			2000年	\$ <del></del> - <del></del> - <del>-</del>
		h	Less: cost or other basis		<u> </u>		$\neg$				· 撞	
<u>.</u>		-	and sales expenses	7b				65.				
		С	Gain or (loss)	7c	Ī			35.			15.00	
Other Revenue			d Net gain or (loss)						35.	35.		
ē	8	a	Gross income from fundralsing									
퓡			including \$5	<u>,7</u>	<u>58.</u>	of						
			contributions reported on	line	1c). Se			F4 044	1 2004 1		2.7	
			Part IV, line 18	·····	•••••	•••••	8a	54,841.				
			•			••••••	8b	21,175.	33,666.			33,666.
	_		Net income or (loss) from				s T	,	23,000.		364/1	
	S	a	Gross income from gamin Part IV, line 19				9a					
		<b>.</b>					9b			1 1		
			Net income or (loss) from		ing act	******						
1	10		Gross sales of inventory, I						7.5	ASMING AND	1 10 m	
		_	and allowances				10a					
		b	Less: cost of goods sold				10b		FAME : SE		- 248	(A) (A)
			Net income or (loss) from				<u></u>					
				_			-	Business Code	5 000	6 000		9
Miscellaneous Revenue	11	la	OTHER REVENUE	<u> </u>			<u> </u>	900099	6,000.	6,000.	<del>                                       </del>	<del>                                     </del>
Ilan		b		_		_	-		<del> </del>			
Sce		C C	All other revenue				-		<del>                                     </del>	<del> </del>		
Σ			Total. Add lines 11a-11d						6,000.			\$ 200 E
	12		Total revenue. See instruction		4111711				1,351,722.	1,044,850.	0.	
												Form <b>990</b> (2023)

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 (**D)** Fundraising (B) Program service expenses (C) Management and (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members Compensation of current officers, directors, 19,053 19,053 190,532. 152,426. trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 450,753. 50.710. 61,978. 563,441. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1.441. 1.179. 10,477. 13,097. Other employee benefits 7.442. 6.089. 54,130. 67.661. Payroll taxes 10 Fees for services (nonemployees): a Management ..... 13,082. 13,082. b Legal \_\_\_\_\_ 19,770. 19.770. c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other, (If line 11g amount exceeds 10% of line 25, 94,313 94,313. column (A), amount, list line 11g expenses on Sch O.) <del>17,</del>716. 17,716. Advertising and promotion 12 3,098. 22,531. 2,535. 28,164. 13 Office expenses 3,198. 2,617. 23,259. 29,074. Information technology 14 15 Royalties \_\_\_\_\_ 12,018. 97,342. 10,816. 120,176. 16 Occupancy 2,558. 3,126. 22,735. 28.419. 17 Payments of travel or entertainment expenses for any federal, state, or local public officials ... 342. 418. 3,798. 3,038. Conferences, conventions, and meetings ...... 19 20 Interest Payments to affiliates \_\_\_\_\_ 21 5,603. 5,602. 112,050. 100,845. Depreciation, depletion, and amortization ..... 22  $\overline{1,215}$ 994 8,835 11,044. Insurance 23 Other expenses, Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 96,028. 96,028. DENTAL SUPPLIES / DRUGS 1,357. 1,110. 12,338. 9,871. CONTINUING EDUCATION 1,962. 6,500. 731. 9,193. CREDIT CARD PROCESSING 2,636.  $\overline{2}97.$ 3*.*267. 6,200. d OTHER EXPENSES 88. 107.  $7,\overline{670}$ . 7,475. All other expenses 142.999. 137,573. 1,443,766. 1.163.194.Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

orm	990 (2	DDD FOUNDATION, INC.		58-	2486256 Page 11
	t/X@	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
П	1	Cash - non-interest-bearing	14,977.	1	12,638.
-	2	Savings and temporary cash investments	356,580.	2	267,663.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	3,416.	4	8,784.
	5	Loans and other receivables from any current or former officer, director,		17.5	7247
	•	trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	2,009.	5	2,830.
	6	Loans and other receivables from other disqualified persons (as defined		14	
	·	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
_	7	Notes and loans receivable, net	47,696.	7	897.
Assets	8	Inventories for sale or use		8	42.
¥š	9	Prepaid expenses and deferred charges		9	
	-	Land, buildings, and equipment: cost or other		N) +	E 12967
		basis. Complete Part VI of Schedule D 10a1,100,375.			
	b	Less: accumulated depreciation 10b 463,367.	619,546.	10c	637,008.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities, See Part IV, line 11		12	· -
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	454,711.	14	454,711.
	15	Other assets. See Part IV, line 11	6,353.	15	6,853.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,505,288.	16	1,391,426.
_	17	Accounts payable and accrued expenses	56,347.		35,058.
	18	Grants payable		18	
	19	Deferred revenue	29,370.	19	28,841.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
<u>"</u>	22	Loans and other payables to any current or former officer, director,		7	
₽		trustee, key employee, creator or founder, substantial contributor, or 35%			·····································
Liabilities		controlled entity or family member of any of these persons		22	
دّ	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		ĺ	
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	497,003.	25	497,003.
	26	Total liabilities. Add lines 17 through 25	582,720.	26	560,902.
		Organizations that follow FASB ASC 958, check here	Matrix Special Control		34.25
S S		and complete lines 27, 28, 32, and 33.			
ᆲ	27	Net assets without donor restrictions	792,852.	27	690,531.
图	28	Net assets with donor restrictions	129,716.	28	139,993.
밀		Organizations that do not follow FASB ASC 958, check here		-	<b>3</b>
린		and complete lines 29 through 33.			
١٥	29	Capital stock or trust principal, or current funds		29	
ig	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
او	31	Retained earnings, endowment, accumulated income, or other funds		31	000 504
		Total and property as fined belonger	922,568.	32	830,524.
Net Assets or Fund Balances	32	Total net assets or fund balances  Total liabilities and net assets/fund balances	1,505,288.	33	1,391,426.

Form	990 (2023) DDD FOUNDATION, INC.	<u>58-2486</u>	<u> 256</u>	Page	<sub>e</sub> 12
	tXII Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
		i		= ^	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	L,351	.,72	<u>2</u> .
2	Total expenses (must equal Part IX, column (A), line 25)		L,443		
3	Revenue less expenses. Subtract line 2 from line 1	3		,04	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	<u>922</u>	.,56	8.
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			<u>0.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		020		\ A
	column (B))	10	830	, 52	44.
Pa	tiXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			 Van I	No
				Yes	NO
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Ž	
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.			X
2a			2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	42		
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		Z. Williamson		X
b	Were the organization's financial statements audited by an independent accountant?		2b		<del></del> -
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	Dasis,		- 3	1
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		C. wien	. Find	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		<u>2c</u>		Date
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.	Section 1	K. 34 .2	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		_		x
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	.,,	3a		
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	tea audit	3b		ı
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		Form	<u>990 /</u>	2022
			rom	220	ردعات

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(e)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

OMB No. 1545-0047

	DDD F	, NOITAGNUOS	INC.			1 50	3-2400230
Part I				mplete this	s part.) Se	e instructions.	
	nization is not a private founda					<del>.</del> —-	
1	A church, convention of chu	rches, or association	of churches described i	n section	170(b)(1)	(A)(i).	
2 🗀	A school described in section	on 170(b)(1)(A)(ii)。(A	ttach Schedule E (Form	990).)			
	A hospital or a cooperative h	nospital service organ	rization described in sec	ction 170(i	b)(1)(A)(iii)		
3 ⊨	A nospital of a cooperative in A medical research organization	tion operated in conf	unction with a hospital o	lescribed i	n section	170(b)(1)(A)(iii). Enter t	he hospital's name,
4		mon operated in oon					·
	city, and state: An organization operated fo	r the benefit of a colle	ege or university owned	or operate	d by a gov	emmental unit describe	d in
5			-3: -:::-:-:-: - :::!	.,			
	section 170(b)(1)(A)(iv). (Co A federal, state, or local gov	ompiete i at itij	ental unit described in e	ection 17f	NPA 1/ VI	r).	
6	A federal, state, or local gov	emment or governme	tiol port of the support for	m a nover	nmentai ::	or nit or from the general o	ublic described in
7 X			ries harr or its support its	uu a doses	tri Mirai A	or norm are general p	
_	section 170(b)(1)(A)(vi). (Co		0141/-21 (O=1-4- B1	n s			
8 📙	A community trust describe	d in section 170(b)(1	IJ(AJ(VI). (Complete Part	II.)	d in onei:	votion with a land-arent o	college
9	An agricultural research org	anization described it	n section 170(b)(1)(A)(b	operated	a iii conjur	noute with a failt-graffic and state of the solless	anoge or
	or university or a non-land-g	rant college of agricu	iture (see instructions). E	nter the n	ame, city,	and state of the college	UI .
	university:				Luffer - 15		arece receipte from
10 🗀	An organization that normal	lly receives (1) more ti	han 33 1/3% of its suppo	ort from co	ntributions	s, membership tees, and	i Ainas isneibis iiniii
	activities related to its exem	pt functions, subject	to certain exceptions; a	nd (2) no n	nore than (	53 1/3% of its support fr	om gross investment
	income and unrelated busin		iess section 511 tax) from	n business	ses acquin	ed by the organization at	πer June 30, 1975.
	See section 509(a)(2). (Cor	nplete Part III.)					
11 🗀	An organization organized a	and operated exclusiv	rely to test for public safe	ety. See s	ection 50	9(a)(4).	. •
12 🗌	An organization organized a	and operated exclusiv	ely for the benefit of, to	perform th	e function	s of, or to carry out the p	purposes of one or
	more publicly supported or	ganizations described	d in section 509(a)(1) O	section 5	i09(a)(2) . S	See <b>section 509(a)(3).</b> C	heck the box on
	lines 12a through 12d that o	describes the type of	supporting organization	and comp	lete lines '	12e, 12f, and 12g.	
a [	Type I. A supporting orga	inization operated, su	pervised, or controlled b	y its supp	orted orga	ınization(s), typicaliy by g	giving
	the supported organization	n(s) the power to reg	jularly appoint or elect a	majority of	the direct	tors or trustees of the su	pporting
	organization. You must o	omplete Part IV, Se	ctions A and B.				
ь [	Type II. A supporting org	anization supervised	or controlled in connecti	ion with its	supporte	d organization(s), by hav	ing
	control or management o	f the supporting orga	inization vested in the sa	me person	s that con	itrol or manage the supp	oorted
	organization(s). You mus						
_ [	Type III functionally inte	grated. A supporting	g organization operated i	in connecti	ion with, a	nd functionally integrate	d with,
U į	its supported organization	n(s) (see instructions)	. You must complete F	art IV, Se	ctions A, I	D, and E.	
أير	Type III non-functionally	/ integrated. A sunn	orting organization oper	ated in con	nection w	ith its supported organiz	zation(s)
ď l	that is not functionally int	regreted The omenia	ation generally must sati	sfy a distri	bution rea	uirement and an attentiv	/eness
	requirement (see instruct	ione) Vou must con	nolete Part IV. Sections	A and D.	and Part	v.	
1	Check this box if the orga	one, reassured as	written determination from	n the IRS	that it is a	Type I, Type II, Type III	
<b>e</b>	functionally integrated, or	r Type III non-function	nally integrated supporting	ng organiza	ation.		
	inter the number of supported or Provide the following information		d organization(s).	****************			
<u>g</u> F	(i) Name of supported	(ii) EIN	(ili) Type of organization	(iv) is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other
	organization	''	(described on lines 1-10	in yaur governi Yes	No.	support (see instructions)	support (see instructions)
		<del>                                     </del>	above (see instructions))		<del></del> -		
					·		]
		<del> </del>					
		<del>                                     </del>					
		<del> </del>	<del> </del>		<del>                                     </del>		
			!	1	1		
		<del></del>	<del></del>	<del></del>	<del>                                     </del>		
			j		ļ	1	
				3.4.5°FE			
Total			10000000000000000000000000000000000000	3-71-7-12E	The last the state of		

(Form 990) 2023 DDD FOUNDATION, INC. 58-2486 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

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

Sa,	tion A. Public Support		•				
		( ) 0040	# 1 0000	4 3 0004	4 0 0000	( ) 0000	40 T-1-1
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	74 561	1006100	126 000	338,055.	264 974	1899699.
_	include any "unusual grants.")	74,301.	1030103.	120,000.	330,033.	204,374.	1033033.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities	}					
	furnished by a governmental unit to						
	the organization without charge	74 561	1006100	106 000	220 055	264 074	1000600
	Total. Add lines 1 through 3	74,561.	1030103.	126,000.	338,055.	264,974.	1899699.
5	The portion of total contributions					E. 20 v	
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included					- <b>V</b>	
	on line 1 that exceeds 2% of the					5 5 3 7 6	
	amount shown on line 11,	g : 0 ga y				4 事制	
	column (f)			And the state of		i i euro	695,990.
	Public support, Subtract line 5 from line 4.						1203709.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	74,561.	1096109.	126,000.	338,055.	264,974.	1899699.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources				867.	8,332.	9,199.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)				6,000.	6,000.	
11	Total support. Add lines 7 through 10			3.7		1970 1970 2	1920898.
	Gross receipts from related activities,						<u>,584,280.</u>
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, t	ourth, or fifth tax y	ear as a section 50	01(c)(3)	
	organization, check this box and stop						
Sec	tion C. Computation of Publi	c Support Per	centage		· · · · · · · · · · · · · · · · · · ·	,	
	Public support percentage for 2023 (I	• • •	_	***		14	62.66 %
15	Public support percentage from 2022	Schedule A, Part I	II, line 14			15	<u>97.00 %</u>
16a	33 1/3% support test - 2023. If the						
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the						
	and stop here. The organization qual	lifies as a publicly s	supported organiza	tion			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part '	VI how the organiz	ation
	meets the facts-and-circumstances te	•	•				
b	10% -facts-and-circumstances test						10% or
	more, and if the organization meets the						<b></b>
	organization meets the facts-and-circle						
18	Private foundation. If the organization	n did not check a	<u>box on line 13, 16a</u>	ı, 16b, 17a, o <u>r 17b</u>	, check this box ar	nd see instructions	
						Schedule A	(Form 990) 2023

Kai	t III Support Schedule for O	rganizations L	Jescriped in S	ection poata)i	(~)		
	(Complete only if you checked	the box on line 10	of Part I or if the o	rganization failed	to qualify under Pa	art II. If the organize	ation fails to
	qualify under the tests listed be	olow, please compi	lete Part II.)				
Sec	tion A. Public Support		<del></del>				
Cales	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023_	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
	Gross receipts from admissions,				ĺ		
	merchandise sold or services per-						
	formed, or facilities furnished in					İ	
	any activity that is related to the organization's tax-exempt purpose						
	Gross receipts from activities that						
_	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf				<b>,</b>		
	The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
_	Total. Add lines 1 through 5						
							<u> </u>
7 <b>a</b>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons  Amounts included on lines 2 and 3 received						
p	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the					1	
	amount on line 13 for the year	<del></del>			-		· · · · · · · ·
	Add lines 7a and 7b		2000 A	CARLES AND AND AND AND AND AND AND AND AND AND			
	Public support (Subtract line 7c from line 6.)					<del>-</del>	<u>.                                    </u>
	tion B. Total Support	4 ) 2040	(L) 0000	(-) 2021	(4) 2022	(a) 2023	(f) Total
Cale	ndar year (or fiscai year beginning in)	(a) 2019	(ь) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9	ndar year (or fiscal year beginning in) Amounts from line 6	(a) 20 <u>19</u>	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9	ndar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest,	(a) 2019	(ь) 2020	(e) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9	ndar year (or fiscal year beginning in)  Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties,	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2019	(ь) 2020	(e) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2019	(ь) 2020	(e) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	(a) 2019	(b) 2020	(e) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2019	(b) 2020	(e) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	(a) 2019	(b) 2020	(e) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the	ne organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizati	on,
Gaie 9 10s h	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	ne organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizati	on,
Gale 9 10s b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	ne organization's f	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizati	on,
Gale 9 10s b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	ne organization's fi ic Support Per line 8, column (f), c	irst, second, third, rcentage	fourth, or fifth tax	year as a section	501(c)(3) organizati	on,
Cale 9 10a b c 11 12 13 14 See 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Ction C. Computation of Public support percentage from 2023 (Public support percentage from 2023)	ne organization's fi ic Support Per line 8, column (f), c 2 Schedule A, Part	irst, second, third, rcentage divided by line 13, or lil, line 15	fourth, or fifth tax	year as a section	501(c)(3) organizati	on,
Cale 9 10s b 11 12 13 14 See 15 16 See	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add Jines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here existed the support percentage for 2023 (Public support percentage from 2022)	ic Support Per line 8, column (f), c 2 Schedule A, Part stment Income	irst, second, third, rcentage divided by line 13, or lil, line 15 e Percentage	Tourth, or fifth tax	year as a section	501(c)(3) organizati	on,
Cale 9 10s b 11 12 13 14 See 15 16 See	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Publ Public support percentage for 2023 (Public support percentage from 2022 ction D. Computation of Investment income percentage for 2	ic Support Per line 8, column (f), c 2 Schedule A, Part stment Income 023 (line 10c, colu	rst, second, third, rcentage divided by line 13, or lil, line 15 e Percentage mn (f), divided by line	column (f))	year as a section	501(c)(3) organizati	on, %
Cale 9 10s b 11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here capital support percentage for 2023 (Public support percentage from 2022 investment income percentage from Investment income percentage from 2022 investment income percentage from 2022 investment income percentage from 2022 investment income percentage from 2022 investment income percentage from 2022 investment income percentage from 2022 investment income percentage from 2022 investment income percentage from 2022 investment income percentage from 2022 investment income percentage from 2022 in 2015 i	ic Support Per line 8, column (f), o 2 Schedule A, Part stment Incomo 023 (line 10c, colu 2022 Schedule A.	irst, second, third, rcentage divided by line 13, of lil, line 15 e Percentage mn (f), divided by line 17	ourth, or fifth tax	year as a section	501(c)(3) organizati 15 16	% % %
Cale 9 10s b 11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Ction C. Computation of Public support percentage from 2022 (Investment income percentage from 2023 (Investment income percentage from 33 1/3% support tests - 2023. If the	ic Support Per line 8, column (f), c 2 Schedule A, Part stment Income 023 (line 10c, colu 2022 Schedule A, e organization did	irst, second, third, rcentage divided by line 13, or and the line 15 e Percentage mn (f), divided by line 17 not check the box	column (f)) ne 13, column (f)	year as a section	501(c)(3) organizati 15 16 17 18 33 1/3%, and line 1	% % %
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### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

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Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

Attach to Form 990.

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

OMB No. 1545-0047\_ Open to Public Inspection

Name of the organization

Employer identification number

	DDD FOUNDATION, INC.	58-2486256
Pari	Organizations Maintaining Donor Advised Funds or Other Similar Funds or Advised Funds or Other Similar Funds or Advised Funds or Other Similar Funds or Advised Funds or Other Similar Funds or Advised Funds or Other Similar Funds or Advised Funds or Other Similar Funds or Advised Funds or Other Similar Funds or Other F	ccounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
	Aggregate value of contributions to (during year)	
	Aggregate value of grants from (during year)	
	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fun	ds
3	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used o	only
0	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confer	ring
	impermissible private benefit?	
Par	Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV	/, line 7.
	Purpose(s) of conservation easements held by the organization (check all that apply).	
1	Preservation of land for public use (for example, recreation or education)  Preservation of land for public use (for example, recreation or education)  Preservation of a hist	torically important land area
		tified historic structure
	Frotection of hatdran hazitat	
	Preservation of open space  Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	oncentation easement on the last
	· ·	Held at the End of the Tax Year
	day of the tax year.	.30009000000000000000000000000000000000
	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	
C	Number of conservation easements on a certified historic structure included on line 2a	2c
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and not	1
	on a historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	nization during the tax
	year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservat	ion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation e	asements during the year
8	Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)	00
_	and section 170(h)(4)(B)(ii)?	YesNo
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	ment and
•	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements to	hat describes the
	in-tion to accounting for conservation easements	
Pai	organization's accounting for conservation cashing in Conservation of Art, Historical Treasures, or Other	Similar Assets.
Monday va	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and be	alance sheet works
124	of art, historical treasures, or other similar assets held for public exhibition, education, or research in further	ance of public
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
_	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balan	ce sheet works of
þ	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtheran	ce 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	n provide
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gair	i, pierae
	the following amounts required to be reported under FASB ASC 958 relating to these items:	\$
а	Revenue included on Form 990, Part VIII, line 1	¥
<u>b</u>	Assets included in Form 990, Part X	Cabadula D (Carm 900) 9003
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2023

332051 09-28-23

Bertill   Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)			NDATION, IN		asures or Othe	er Simil	58-24	86256	Page 2
collection terms (check all that apply).  a Potition within the preventation for future generations  b Scholarly research  c Provise asker/ption of the organization's collections and explain how they further the organization's exampt purpose in Part XIII.  4 Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold for takes funds and that then to be maintained as part of the organization's exampt purpose in Part XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold for takes funds and that then to be maintained as part of the organization answered "Yes" on Form 990, Part XI, line 9, or reported an amount on Form 990, Part XI, line 21.  1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part XI, line 21.  1a is the organization and year organization and the provision of the separation of the provision of the provision of the separation of the provisi								<u>(continu</u>	ea)
a Public exhibition   d	3		on, and ower records	s, check any or me r	Ollowing mat make :	signilican	r ase or its		
b Scholarly research c Preservation for future generations A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assests to be seld to raise funds an ather than to be maintained as pan of the organization acceleration?  [PartIVI] Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1b If "Yes," explain title arrangement in Part XIII and complete the following table:  C Beginning balance  1c Amount  1d PartIVIII and Complete if the explanation has been provided in Part XIII  PartIVIII Endowment Funds Complete if the explanation has been provided in Part XIII  1a Beginning of year belance  2a Did the organization include an amount on Form 990, Part X, line 21, for secrow or custodial account liability?  2b If "Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII  PartIVIII Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  C Not investment earnings, gains, and losses  2d y 55.  0	_		٨.	Lognoreyo	hanga program				
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exampt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds atther than to be maintained as part of the organization's collection?  Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets  to be sold to raise funds atther than to be maintained as part of the organization answered "Yes" on Form 990, Part XI, line 9, or reported an amount on Form 990, Part X, Ine 9.1.  1 Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, Ine 921.  1 If "Yes," explain the arrangement in Part XIII and complete the following table:			u						
4 Provide a description of the organization's collections and explain how they further the organization's exampt purpose in Part XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds either than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, frustee, outstodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1a Is the organization an agent, frustee, outstodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1b If "Yes," explain the arrangement in Part XIII and complete the following table:  1c			•						
5 During the year, did the organization solicit or moeive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part VIII Escrow and Custodial Aurangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is the organization an angunt trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, it is a standard or Form 990, Part X, line 21.  If "Yes," explain the arrangement in Part XIII and complete the following table:  Beginning balance  Additions during the year  Ind  Old the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes No  If "Yes," explain the arrangement in Part XIII. Check there if the explanation has been provided in Part XIII.  Beginning of year balance  (a) Current year  (a) Current year  (b) Prior year  (c) Two years back (d) Three years back  The Beginning of year balance  25, 355.  C Not investment earnings, gains, and losses  Grants or scholarships  On the respenditures for facilities and programs  Are there endowment  50 C Intermediation or quasi-endowment  90 Permanent endowment  90 Permanent endowment  90 Permanent endowment  100 %  The perconateges on lines 2a, 2b, and 2b should equal 100%.  2a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  10 Unceled organizations?  (i) Related organizations?  (ii) Related organizations?  (ii) Related organizations?  (iii) Related organizations?  (iii) Related organizations?  (iii) Perminity the Intended uses of the organization sendowment funds.  Pert Will Land, Buildings, and Equipment  Complete if the organization answered "Yes" on Form 990, Part X, line 10.  Description of property  (a) Cost or other  (b) Cost or other  (b) Cost or other  (c) Cost or other  (b) Cost or other  (c) Cher	4	<del></del>	ullections and explain	how they further th	e omenization's exe	mnt nur	ose in Part	XIII	
to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IVI Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  Is it the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  If Yes, "explain the arrangement in Part XIII and complete the following table:	7 5		•	-	-		CSO III CALL	74II.	
Eartivis   Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?    Yes	•						Г.	<b>T</b> Vas	□ No
reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  Amount  c Beginning balance  d Additions during the year  f Ending balance  Distributions during the year  f Ending balance and but a property in the arrangement in Part XIII and complete if the explanation has been provided in Part XIII  Part Max Endowment Funds Complete if the organization answered "Yes" on Form 990, Part N, line 10.  (a) Current year  (b) Prior year   (c) Two years back   (d) Tires years back   (e) Four	Par								1
on Form 990, Part X7  b if "Yes," explain the arrangement in Part XIII and complete the following table:  c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? 2 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? 2 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? 3 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? 4 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? 5 Did I "Yes," explain the arrangement in Part XIII. Chack here if the explanation has been provided in Part XIII.  Part Yes, "explain the arrangement in Part XIII. Chack here if the explanation has been provided in Part XIII.  Part Yes, "explain the arrangement in Part XIII. Chack here if the explanation has been provided in Part XIII.  Part Yes, "explain the arrangement in Part XIII. Chack here if the explanation has been provided in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet organization is endowment funds.  Part Yes on line 3diff, are the related organizations listed as required on Schedule R?  Describe in Part XIII the Intended cuses of the organization's endowment funds.  Part Yes on line 3diff, are the related organization answered Yes on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  Description of property  (b) Cost or other basis (other)  1 Land  Description of property  (c) Cost or other basis (othe					. 4,0,10,04		_,,	,	
on Form 990, Part X7  b if "Yes," explain the arrangement in Part XIII and complete the following table:  c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? 2 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? 2 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? 3 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? 4 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? 5 Did I "Yes," explain the arrangement in Part XIII. Chack here if the explanation has been provided in Part XIII.  Part Yes, "explain the arrangement in Part XIII. Chack here if the explanation has been provided in Part XIII.  Part Yes, "explain the arrangement in Part XIII. Chack here if the explanation has been provided in Part XIII.  Part Yes, "explain the arrangement in Part XIII. Chack here if the explanation has been provided in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet in Part XIII. The Internet organization is endowment funds.  Part Yes on line 3diff, are the related organizations listed as required on Schedule R?  Describe in Part XIII the Intended cuses of the organization's endowment funds.  Part Yes on line 3diff, are the related organization answered Yes on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  Description of property  (b) Cost or other basis (other)  1 Land  Description of property  (c) Cost or other basis (othe		•		liary for contribution	s or other assets no	t include	i		
b If "Yes," explain the arrangement in Part XIII and complete the following table:    Amount   1c	•-	-		-				Yes	☐ No
c Beginning balance d Additions during the year e Distributions during the year 1 Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 3 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 4 Did the organization include an amount on Form 990, Part X, line 10.  Eart.Vas.* explain the arrangement in Part XIII, Check here if the explanation enswered 19st on Form 990, Part IV, line 10.  Eart.Vas.* explain the arrangement in Part XIII, Check here if the explanation that see a possible provided in Part XIII by Part XIII.  Eart.Vas.* explain the arrangement in Part XIII, Check here if the organization that are held and administered for the organization sylvas and losses and programs  f Administrative expenses 25, 305. 25, 056. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	ь					•••••••		_	
d Additions during the year    Distributions during the year		,	•	· ·				Amount	
d Additions during the year    Destributions during the year	c	Beginning balance				1c			
e Distributions during the year  f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?  Yes No b If 'Yes,' explain the arrangement in Part XIII, Check here if the explanation has been provided in Part XIII    Part XIII	d								
f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?    Yes   No   I' Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.   Part Val   Endowment Funds Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.    (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back								·	
2a Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?  Part Ves, explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (e) Contributions  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years b	f								
Part   Vist   Endowment Funds   Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	2a						<u> </u>	Yes	☐ No
(a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back   25,056.   0.									
1a Beginning of year balance	Par	tV Endowment Funds Complete if	the organization ans	wered "Yes" on For					
b Contributions			(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back	(е) Four у	ears back
C Not investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 25,305, 25,056,  Provide the estimated percentage of the current year end balance (line 1g, column (al)) held as: a Board designated or quasi-endowment 5 Permanent endowment 100 % c Term endowment 100 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? 4 Describe in Part XIII the intended uses of the organization's endowment funds.    Part   Mile   Land, Buildings, and Equipment   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (other) (b) Cost or other depreciation 1a Land b Buildings c Leasehold improvements 633,778 1 124,400 509,378. c Equipment 466,597 338,967 127,630 6			25,056.						
d Grants or scholarships e Other expenditures for facilities and programs  f Administrative expenses g End of year balance 25,305, 25,056, g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (ai) held as: a Board designated or quasi-endowment	b	Contributions							
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance 25,305. 25,056.  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b Permanent endowment 100 %  c Term endowment	c		249.	56.		<u> </u>			
and programs  f. Administrative expenses g. End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment  100	d	Grants or scholarships		<del>-</del>		<u> </u>			
g End of year balance  25,305. 25,056.	e	Other expenditures for facilities						1	
End of year balance		· ·				<u> </u>			
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment						<u> </u>			
Board designated or quasi-endowment	g			•				<u> </u>	
b Permanent endowment	_		ent year end balance	(line 1g, column (a)	) held as:				
The percentages on lines 2a, 2b, and 2c should equal 100%.  Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations?  (ii) Related organizations?  (iii) Related organizations?  (iii) Related organizations?  (iv) If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.    Part VIII   Land, Buildings, and Equipment		400		_%					
The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations?  (ii) Related organizations?  (iii) Related organizations?  (iii) Related organizations?  (iii) Related organizations?  (iv) If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.    Part VIII   Land, Buildings, and Equipment	b								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? (iii) Related organizations? (iii) Related organizations? (iv) In Part XIII the Intended uses of the organizations listed as required on Schedule R?  4 Describe in Part XIII the Intended uses of the organization's endowment funds.    Part XIII   Land, Buildings, and Equipment	C		r =						
Organization by:   (i)   Unrelated organizations?   (ii)   Related organizations?   (ii)   (iii)   (		-							
(ii) Unrelated organizations?  (iii) Related organizations?  (ii) Related organizations?  (ii) Related organizations?  (ii) Related organizations?  (iii) Re	3a	•	ssion of the organiza	tion that are held an	id administered for t	he			Yon No
(ii) Related organizations?  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.    Part VIII   Land, Buildings, and Equipment								<del></del>	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  [Part VIII Land, Buildings, and Equipment  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  633,778.  124,400.  509,378.  d Equipment  60ther  10th									
Describe in Part XIII the intended uses of the organization's endowment funds.    Part XIII   Land, Buildings, and Equipment									<del>-   ^-</del>
Part Mill Land, Buildings, and Equipment   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Description of property   (a) Cost or other basis (other)   (c) Accumulated depreciation			· · · · · · · · · · · · · · · · · · ·		**************************			30	<del></del>
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  Land  Buildings  Leasehold improvements  466,597.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  (b) Cost or other basis (other)  (c) Accumulated depreciation  124,400.  509,378.  124,400.  127,630.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.				vment tunus,	· · · · · · · · · · · · · · · · · · ·				
Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment  Other  Other	Hr. CAL			Part IV line 11a. S	ee Form 990 Part X	line 10.			
basis (investment)   basis (other)   depreciation		<u> </u>					tod	(d) Book	value
1a Land       633,778.       124,400.       509,378.         c Leasehold improvements       633,778.       124,400.       509,378.         d Equipment       466,597.       338,967.       127,630.         e Other       505,000.       505,000.		pescription of property			1 , , ,		1	אטטע (ש)	value
b Buildings c Leasehold improvements d Equipment Other		Land	<del>`</del> `		· · · · · · · · · · · · · · · · · · ·				
c Leasehold improvements       633,778.       124,400.       509,378.         d Equipment       466,597.       338,967.       127,630.         e Other       600									<del></del>
d Equipment 466,597. 338,967. 127,630.				778.		124 4	100.	509	.378.
e Other			***						
								•	<del></del>
				K. line 10c. column	(B))			637	,008.

Schedule D (Form 990) 2023

### **SCHEDULE G** (Form 990)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization					1		ntification number
DDD FOU	NDATION, INC.	_				58-2486	
	Complete if the organization answer	red "Y	es" on	Form 990, Part IV, li	ine 1	7. Form 990-EZ	tilers are not
required to complete this part  1 Indicate whether the organization rais	ed tondo through any of the following	activ	ties (	Check all that apply.		<u>_</u>	
	ed funds unough any of the following	ion of	non-q	overnment grants			
a Mail solicitations  b Internet and email solicitations	<del></del>			nment grants			
c Phone solicitations	g Special	fundra	ising e	events			
d In-person solicitations							
2 a Did the organization have a written or	r oral agreement with any individual	(includ	ing of	ficers, directors, trus	tees,	or	X No
key employees listed in Form 990, Pa	art VII) or entity in connection with pr	ofessi	onal fu	indraising services?	E.	Yes	
b If "Yes," list the 10 highest paid indiv		ant to	agreer	nents under which ti	10 14	ndiaiser is to be	
compensated at least \$5,000 by the	organization.						
(i) Name and address of individual or entity (fundralser)	(ii) Activity	fundi have c or cor contrib	ustody trol of	(iv) Gross receipts from activity		Amount paid or retained by) fundraiser sted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
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Total			,,,,,,				
3 List all states in which the organization	on is registered or licensed to solicit	contrib	ution	s or has been notified	d it is	exempt from re	gistration
or licensing.			_				
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							. <u></u>
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For Paperwork Reduction Act Notice,	see the Instructions for Form 990 o	r 990-	EZ.			Schedu	16 A (1 OI III 930) EUE

LHA 332081 09-13-23

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through RACE col. (c)) (event type) (event type) (total number) 60,599. 60,599. 1 Gross receipts 5,758. 5,758. 2 Less: Contributions 54,841. 54,841. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 21,175. 9 Other direct expenses 21,175. 10 Direct expense summary. Add lines 4 through 9 in column (d) 33,666. 11 Net income summary. Subtract line 10 from line 3, column (d) Partill Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming (a) Bingo bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes % 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain: \_\_ Schedule G (Form 990) 2023 332082 09-13-23

Sch	nedula G (Form 990) 2023 DDD FOUNDATION, INC. 58	<u>-2486256</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
-	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:	, ,	
	a The organization's facility	13a	<u>%</u>
ł	An outside facility		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
		[ Von	□ No
158	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	[ 165	
	and the empty		
j	b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount	•	
	of gaming revenue retained by the third party \$		
•	c If "Yes," enter name and address of the third party:		
	Name		
	8 delenes		
	Address		
16	Gaming manager information:		
10	daning majager morniacon.		
	Name		
	THE PARTY OF THE P		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes	□ No
	retain the state gaming license?		
	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	•	
Б	organization's own exempt activities during the tax year \$ artify Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	l Part III. lines 9.	9b, 10b,
14	<b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v); and 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
	13D, 13C, 10, and 17D, as applicable, ruse provide any additional minimum of the second		
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332083 09-13-23

Schedule G	(Form 990)	DDD	FOUNDATION,	INC.	58-2486256	Page 4
PartiV	(Form 990) Supplemental Info	rmation	(ti			
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### **SCHEDULE J** (Form 990)

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Partil Questions Regarding Compensation

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

DDD FOUNDATION, INC.

Employer identification number 58-2486256

			Yes	No_
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			w
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	2	100	- 3
	First-class or charter travel Housing allowance or residence for personal use		×	
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		, ¥0	
	Discretionary spending account Personal services (such as maid, chauffeur, chef)		100	
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		74	
~	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	<u> </u>		
_	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
		4		- 2
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's	<b>1</b> - 4		
•	CEO/Executive Director, Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			震
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			390
	Form 990 of other organizations  Approval by the board or compensation committee			
				-
,	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
4				
_	organization or a related organization:	4a		X
_	Receive a severance payment or change-of-control payment?  Participate in or receive payment from a supplemental nonqualified retirement plan?			X
b	· · · · · · · · · · · · · · · · · · ·			X
C				
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			-
	Out and the Post vol. Post vol. and Post vol. 2001			1
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.  For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
5		- 42		
	contingent on the revenues of:	- 5a		X
	The organization?	••••		X
Þ	Any related organization?	···· 35	7	
_	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:	6a		X
	The organization?			X
ь	Any related organization?			
	If "Yes" on line 6a or 6b, describe in Part III.		<b>.</b>	. 911
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	7	-	X
_	not described on lines 5 and 6? If "Yes," describe in Part III	····· <del>  ′</del>	<del>                                     </del>	<u> </u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	_		x
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	9		
	Regulations section 53.4958-6(c)?		_ ccc	10000
For	Paperwork Reduction Act Notice, see the Instructions for Form 990. Scho	dule J (For	n aan	ككلك

LHA 332111 11-06-23

Schedule J (Form 990) 2023 DDD FOUNDATION, INC. 58-2486256
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note: The sum of columns (5)()-(ii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

			/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (E)(I)-(D)	in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) DEIDRA R. RONDENO	Ø	190,532.	0.	0.	0.	0.	190,532.	0.	
CEO	m	0.	0.	0.	0.	0.	0.	0.	
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Schedule J (Form 990) 2023

chedule J (Form 990) 2023 DDD F	OUNDATION, INC.		58-2486256	Page :
O THE Complete Section	<del></del>			
rovide the information, explanation, or descript	ions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b,	8a, 8b, 7, and 8, and for Part II. Also complete this	s bart for any additional information.	
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			Schedule J (Form	990) 20

#### **SCHEDULE L**

(Form 990)

### **Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047

Attach to Form 990 or Form 990-EZ.

Open to Public

Name of the organization  DD FOUNDATION, INC.    Employer identification number 58 - 2486256	Internal Revenue Service	Go to w	ww.irs.gov/Form	1990 f	or inst	ructions and the lat	est information.			ie In	spect	ion	ال الله
Excess Benefit Transactions (eaction 501(c)(3), section 501(c)(4), and section 501(c)(29) organization only).  Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.  (a) Name of disqualified person  (b) Relationship between disqualified  (c) Description of transaction  (d) Description of transaction  (e) Description of transaction  (f) Description of transaction  (g) Description of transaction of trans	Name of the organization							Em	ploye	r identi	ificati	טח חט	mber
Excess Benefit Transactions (eaction 501(c)(3), section 501(c)(4), and section 501(c)(29) organization only).  Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.  (a) Name of disqualified person  (b) Relationship between disqualified  (c) Description of transaction  (d) Description of transaction  (e) Description of transaction  (f) Description of transaction  (g) Description of transaction of trans	_	DDD FOUND	DATION, I	NC.				58	-24	862	56		
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.  1 (a) Name of disqualified person  (b) Relationship between disqualified person and organization  (c) Description of transaction  (d) Corrected?  Yes No  Yes No  (e) Description of transaction  (f) Description of transaction  (g) No	Partil Excess Bei				3), sect	ion 501(c)(4), and sec	ction 501(c)(29) orga						
1 (a) Name of disqualified person   (b) Relationship between disqualified person of transaction   (e) Description of transaction   (e) Description of transaction   (e) No.   (e) No.   (e) No.   (e)   (e			· •		•								
1	4	(b)			•	ified					(d)	Corre	cted?
Eart	(a) Name of disqualified	d person	person and or	rganiz	ation	(0	c) Description of tran	sactio	n		Y	95	Nο
Eart	(1)			•									
64   (6)   (6)   (6)   (7)   (7)   (8)   (9)   (10)   (1													
(6)   (7)   (8)   (9)   (9)   (10)													
6  (e)							•						
Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958													
2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, relmbursed by the organization  ***  ***  ***  **  **  **  **  **  *	•						,						
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization S    Part III   Loans to and/or From Interested Persons   Complete if the organization answered "Yes" on Form 990-Ez, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22   (a) Name of interested person interested person interested person and the organization   (c) Purpose of loan   (d) Lean to a complete if the organization   (d) Lean to a complete if the organization   (e) Purpose of loan   (f) Balance due   (g) In   (h) Approved   (g) Written   (g) In   (g) Lean to a complete if the organization   (f) Balance due   (g) In   (g) In   (g) Lean to a complete if the organization   (f) Balance due   (g) In   (g) Lean to a complete if the organization   (g) In   (g) Lean to a complete if the organization   (g) In   (g) Lean to a complete if the organization   (g) Lean to a complete if the organizat	2 Enter the amount of ta	x incurred by the	organization man	agers	or disc	ualified persons dur	ing the year under						
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization	section 4958								\$	i			
Complete if the organization answered "Yes" on Form 990-Ezt, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990. Part X, line 5, 6, or 22.  (a) Name of (b) Relationship with organization of lone										;			
Complete if the organization answered "Yes" on Form 990-Ezt, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990. Part X, line 5, 6, or 22.  (a) Name of (b) Relationship with organization of lone		-											
Reported an amount on Form 990, Part X, line 5, 6, or 22.   (a) Name of interested person   (b) Relationship interested person   (c) Purpose of loan to regulation with organization   (c) Purpose of loan to regulation   (d) Incention to regulation   (e) Incention   (e) Original mount   (e) Incention	Part II Loans to a	nd/or From in	terested Pers	sons									
Reported an amount on Form 990, Part X, line 5, 6, or 22.   (a) Name of interested person   (b) Relationship interested person   (c) Purpose of loan to regulation with organization   (c) Purpose of loan to regulation   (d) Incention to regulation   (e) Incention   (e) Original mount   (e) Incention	Complete if the	e organization ans	swered "Yes" on i	Form 9	990-EZ	, Part V, line 38a, or l	Form 990, Part IV, lir	ne 26;	or if ti	ne orga	ınizati	on	
(a) Name of interested person (b) Relationship with organization of loan for organization (c) Purpose of loan interested person (d) Loan to organization (e) Original principal amount (f) Balance due (g) In default? (h) Approved (ii) Written (b) Committee? (iii) Written (b) Committee? (iii) Written (b) Committee? (iv) No. (iii) Person (iii) P		-				•				_			
Interested person   With organization   Orican   Committee   Application   Too   From   Principal amount   Committee   Application   Too   Principal amount   Committee   Application   Too   Committee   Application   Too   Committee   Application   Too   Committee   Application   Too   Committee   Application   Applicatio				(d) L	oan to or	(e) Original	(f) Balance due	(g	) in	(h) Apr	proved	(i) V	Vritten
(1)DETDRA RONDEN AFFILIATOPERATIO	interested person	with organizatio	n of loan			principal amount		defa	uit?			agree	ement?
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total Partillis Grants or Assistance Benefiting Interested Persons Complete if the organization answered "Yes" on Form 990, Part IV, line 27.  (a) Name of interested person (b) Relationship between interested person and the organization (1) (2) (3) (4) (5) (6) (7)				To	From			Yes	No	Yes	No	Yes	No
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(3) (4) (5) (6) (7) (8) (9) (10) Total Partillis Grants or Assistance Benefiting Interested Persons Complete if the organization answered "Yes" on Form 990, Part IV, line 27.  (a) Name of interested person (b) Relationship between interested person and the organization (1) (2) (3) (4) (5) (6) (7)				Ī	Ī		- <u>-</u>						
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(5) (6) (7) (8) (9) (10) Total S 2,830.  Partilli Grants or Assistance Benefiting Interested Persons Complete if the organization answered "Yes" on Form 990, Part IV, line 27.  (a) Name of interested person (b) Relationship between interested person and the organization (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance (f) (1) (2) (3) (4) (5) (6) (7)									·				
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990) 2023

SEE PART V FOR CONTINUATIONS

(9) (10)

Schedule L (Form 990) 2023

### SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

Name of the organization

DDD FOUNDATION, INC.

Employer identification number 58-2486256

DDD FOUNDATION, INC.
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PATIENTS WITH DEVELOPMENTAL DISABILITIES.
FORM 990, PART VI, SECTION B, LINE 11B:
THE TAX RETURN IS REVIEWED AT A BOARD MEETING PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
SIGN ANNUAL CONFLICT OF INTEREST POLICY
FORM 990, PART VI, SECTION C, LINE 19:
POLICIES ARE AVAILABLE UPON REQUEST

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

LHA 332211 11-14-23