

## Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

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](http://www.irs.gov/Form990) for instructions and the latest information.**2024**Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service**A** For the 2024 calendar year, or tax year beginning

and ending

**B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization

PRISON ENTREPRENEURSHIP PROGRAM, INC.

Doing business as PEP

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

6501 NAVIGATION BLVD

Room/suite

H7

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

HOUSTON, TX 77011-1367

**F** Name and address of principal officer: CHIP SKOWRON

SAME AS C ABOVE

**D** Employer identification number

20-1384253

**E** Telephone number

281-779-2116

**G** Gross receipts \$

5,463,454.

**H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included?☐ Yes ☐ No

If "No," attach a list. See instructions

**H(c)** Group exemption number**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)( ) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: WWW.PEP.ORG**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: 2004**M** State of legal domicile: TX**Part I** Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities:	TO UNITE EXECUTIVES AND INMATES THROUGH ENTREPRENEURIAL PASSION AND SERVANT LEADERSHIP TO TRANSFORM	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	14
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14
	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	45
	6	Total number of volunteers (estimate if necessary)	6	1125
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 3,440,736.	Current Year 5,078,658.
	9	Program service revenue (Part VIII, line 2g)	219,027.	196,261.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	85,555.	140,141.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	58,623.	26,746.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,803,941.	5,441,806.
Expenses	13	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)	2,185,831.	2,537,818.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25)	352,340.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,880,906.	1,909,488.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,066,737.	4,447,306.
19	Revenue less expenses. Subtract line 18 from line 12	-262,796.	994,500.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 6,700,097.	End of Year 7,939,433.
	21	Total liabilities (Part X, line 26)	1,665,268.	1,876,829.
	22	Net assets or fund balances. Subtract line 21 from line 20	5,034,829.	6,062,604.

**Part II** Signature Block

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

Sign Here	Signature of officer	Date	
	PHI TRAN, COO Type or print name and title		
Paid Preparer Use Only	Preparer's name	Preparer's signature	Date
	NANCY A. MACK		07/22/25
	Firm's name	Firm's EIN	PTIN
	PITTSFORD SAMUELS, PLLC	82-2488343	P01592842
	Firm's address	Phone no. (713) 977-6888	
	1776 YORKTOWN SUITE 530 HOUSTON, TX 77056		

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

☒ Yes ☐ No

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

432001 12-10-24

Form **990** (2024)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

**Part III Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

**TO UNITE EXECUTIVES AND INMATES THROUGH ENTREPRENEURIAL PASSION AND SERVANT LEADERSHIP TO TRANSFORM LIVES, RESTORE FAMILIES AND REBUILD COMMUNITIES.**

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ **3,162,122.** including grants of \$ ) (Revenue \$ **13,033.** )

**PRISON ENTREPRENEURSHIP PROGRAM ENGAGES TOP BUSINESS AND ACADEMIC TALENT TO CONSTRUCTIVELY REDIRECT INMATES' AMBITIONS BY EQUIPPING THEM WITH VALUES BASED TRAINING IN ENTREPRENEURSHIP; THUS ENABLING THEM TO PRODUCTIVELY RE- ENTER SOCIETY. THIS INCLUDES A FIVE MONTH BUSINESS PLAN COMPETITION IN PRISON AND A RANGE OF POST-RELEASE PROGRAMS, INCLUDING HOUSING ASSISTANCE, WORK READINESS SERVICES, CONTINUING EDUCATION, EXECUTIVE MENTORING AND BUSINESS START UP ASSISTANCE. DURING THE CURRENT YEAR, 1,420 INDIVIDUALS PARTICIPATED IN THE PROGRAM IN HOUSTON, DALLAS, CLEVELAND, AND VENUS TEXAS.**

4b (Code: ) (Expenses \$ **244,669.** including grants of \$ ) (Revenue \$ **148,300.** )

**OPERATION OF HOUSTON CALEB HOUSE, LLC, WHICH OWNS AND OPERATES PROPERTY TO BE USED AS RELIABLE HOUSING AVAILABLE TO EX-OFFENDERS UPON THEIR RELEASE. DURING THE YEAR, 208 INDIVIDUALS WERE PROVIDED HOUSING.**

4c (Code: ) (Expenses \$ **422,615.** including grants of \$ ) (Revenue \$ **60,151.** )

**OPERATION OF ENTRE CAPITAL, LLC, A PRIVATE, COMMERCIAL LENDER FOR ALUMNI OF PRISON ENTREPRENEURSHIP PROGRAM AND OTHER RETURNED CITIZEN BUSINESSES. DURING THE YEAR, ENTRE ORIGINATED 9 LOANS TO RETURNED CITIZEN BUSINESSES.**

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

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

4e Total program service expenses **3,829,406.**

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	<b>1</b> X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions .....	<b>2</b> X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....	<b>3</b>	X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	<b>4</b>	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....	<b>5</b>	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....	<b>6</b>	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....	<b>7</b>	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	<b>8</b>	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....	<b>9</b>	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	<b>10</b>	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	<b>11a</b> X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> .....	<b>11b</b>	X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> .....	<b>11c</b>	X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .....	<b>11d</b>	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>11e</b> X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>11f</b>	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	<b>12a</b> X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....	<b>12b</b> X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....	<b>13</b>	X
14a Did the organization maintain an office, employees, or agents outside of the United States? .....	<b>14a</b>	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....	<b>14b</b>	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....	<b>15</b>	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....	<b>16</b>	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i> .....	<b>17</b>	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	<b>18</b>	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....	<b>19</b>	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....	<b>20a</b>	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....	<b>20b</b>	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	<b>21</b>	X

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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	<b>22</b>	<b>X</b>
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	<b>23</b>	<b>X</b>
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	<b>24a</b>	<b>X</b>
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>	
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25a</b>	<b>X</b>
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25b</b>	<b>X</b>
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....	<b>26</b>	<b>X</b>
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b>	<b>X</b>
<b>28</b> Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	<b>X</b>
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b>	<b>X</b>
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>	<b>X</b>
<b>29</b> Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b>	<b>X</b>
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b>	<b>X</b>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	<b>X</b>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	<b>32</b>	<b>X</b>
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	<b>33</b>	<b>X</b>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	<b>34</b>	<b>X</b>
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b>	<b>X</b>
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>35b</b>	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>36</b>	<b>X</b>
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....	<b>37</b>	<b>X</b>
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	<b>38</b>	<b>X</b>

**Note:** All Form 990 filers are required to complete Schedule O

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....	<b>1a</b>	<b>8</b>
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....	<b>1b</b>	<b>0</b>
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	<b>1c</b>	<b>X</b>

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INC.**

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

		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	45	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>X</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		<b>X</b>
<b>b</b>	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<b>X</b>
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<b>X</b>
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		<b>X</b>
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>X</b>	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>X</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		<b>X</b>
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<b>X</b>
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<b>X</b>
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		<b>X</b>
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		<b>X</b>
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		<b>X</b>
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	11a	
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	13a	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
<b>c</b>	Enter the amount of reserves on hand	13c	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	<b>X</b>
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	<b>X</b>
<b>17</b>	<b>Section 501(c)(21) organizations.</b> 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.	17	



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

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

☒**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1a	14		
b	Enter the number of voting members included on line 1a, above, who are independent		
1b	14		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6	Did the organization have members or stockholders?	6	X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	X
b	Each committee with authority to act on behalf of the governing body?	8b	X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	X

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

	Yes	No
10a		X
b		
10b		
11a	X	
b		
12a	X	
b	X	
c		
12c	X	
13	X	
14	X	
15		
a	X	
b	X	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a		X
b		
16b		

**Section C. Disclosure**

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

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

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

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

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

**COURTNEY DYKSTRA - 281-628-6701**

**6501 NAVIGATION BLVD SUITE H7, HOUSTON, TX 77011-1367**

**PRISON ENTREPRENEURSHIP PROGRAM,  
INC.**

Form 990 (2024)

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

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

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

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

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

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

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PATRICK GOTCHER CHAIRMAN	5.00	X						0.	0.	0.
(2) ROBERT BARKLEY BOARD MEMBER	5.00	X						0.	0.	0.
(3) LISA BARKSDALE BOARD MEMBER	5.00	X						0.	0.	0.
(4) OLIVER BELL BOARD MEMBER	5.00	X						0.	0.	0.
(5) CHARLES BLAIN BOARD MEMBER	5.00	X						0.	0.	0.
(6) DOUGAL CAMERON BOARD MEMBER	5.00	X						0.	0.	0.
(7) TRAVIS CHULICK BOARD MEMBER	5.00	X						0.	0.	0.
(8) MIKE COFFEY BOARD MEMBER	5.00	X						0.	0.	0.
(9) JAVIER CREIXELL BOARD MEMBER	5.00	X						0.	0.	0.
(10) STEVE HEUSSNER BOARD MEMBER	5.00	X						0.	0.	0.
(11) MICHAEL HUMPHREY BOARD MEMBER	5.00	X						0.	0.	0.
(12) CHARLES "MACK" NEFF BOARD MEMBER	5.00	X						0.	0.	0.
(13) STEVE ROHR BOARD MEMBER	5.00	X						0.	0.	0.
(14) ALLISON SCHLENDER BOARD MEMBER	5.00	X						0.	0.	0.
(15) CHIP SKOWRON CEO	39.00 1.00			X				162,019.	0.	12,391.
(16) PHI TRAN COO	39.00 1.00			X				143,929.	0.	15,182.
(17) COURTNEY DYKSTRA CONTROLLER	39.00 1.00			X				68,075.	0.	7,103.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) TIM HAMILTON CFO	39.00 1.00			X				114,387.	0.	12,313.
(19) BRYAN ROBERT EXECUTIVE DIRECTOR - ENTRE	39.00 1.00					X		131,250.	0.	9,944.
<b>1b Subtotal</b> .....								619,660.	0.	56,933.
<b>c Total from continuation sheets to Part VII, Section A</b> .....								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b> .....								619,660.	0.	56,933.

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

**4**

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual* .....
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual* .....
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person* .....

	Yes	No
<b>3</b>		X
<b>4</b>	X	
<b>5</b>		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

**0**

Form **990** (2024)



**PRISON ENTREPRENEURSHIP PROGRAM,  
INC.**

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**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b>	Federated campaigns	<b>1a</b>				
	<b>b</b>	Membership dues	<b>1b</b>				
	<b>c</b>	Fundraising events	<b>1c</b>				
	<b>d</b>	Related organizations	<b>1d</b>				
	<b>e</b>	Government grants (contributions)	<b>1e</b>				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	5,078,658.			
	<b>g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 26,330.			
	<b>h</b>	<b>Total.</b> Add lines 1a-1f		5,078,658.			
<b>Program Service Revenue</b>	<b>2 a</b>	<b>RENTAL INCOME-PARTICIP</b>	<b>Business Code</b>	531110	148,300.	148,300.	
	<b>b</b>	<b>INCOME ENTRE NOTES REC</b>		522291	47,961.	47,961.	
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b>	All other program service revenue					
	<b>g</b>	<b>Total.</b> Add lines 2a-2f		196,261.			
	<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts)			141,664.	
<b>4</b>		Income from investment of tax-exempt bond proceeds					
<b>5</b>		Royalties					
			(i) Real	(ii) Personal			
<b>6 a</b>		Gross rents	<b>6a</b>				
<b>b</b>		Less: rental expenses	<b>6b</b>				
<b>c</b>		Rental income or (loss)	<b>6c</b>				
<b>d</b>		Net rental income or (loss)					
<b>7 a</b>		Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other		
			<b>7a</b>	20,125.			
<b>b</b>		Less: cost or other basis and sales expenses	<b>7b</b>	21,315.	333.		
<b>c</b>		Gain or (loss)	<b>7c</b>	-1,190.	-333.		
<b>d</b>		Net gain or (loss)					
<b>8 a</b>		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>				
<b>b</b>		Less: direct expenses	<b>8b</b>				
<b>c</b>		Net income or (loss) from fundraising events					
<b>9 a</b>		Gross income from gaming activities. See Part IV, line 19	<b>9a</b>				
<b>b</b>		Less: direct expenses	<b>9b</b>				
<b>c</b>	Net income or (loss) from gaming activities						
<b>10 a</b>	Gross sales of inventory, less returns and allowances	<b>10a</b>					
<b>b</b>	Less: cost of goods sold	<b>10b</b>					
<b>c</b>	Net income or (loss) from sales of inventory						
<b>Miscellaneous Revenue</b>	<b>11 a</b>	<b>OTHER INCOME</b>	<b>Business Code</b>	611710	14,556.	14,556.	
	<b>b</b>	<b>FORGIVENESS OF DEBT</b>		999999	12,190.	12,190.	
	<b>c</b>						
	<b>d</b>	All other revenue					
	<b>e</b>	<b>Total.</b> Add lines 11a-11d		26,746.			
	<b>12</b>	<b>Total revenue.</b> See instructions		5,441,806.	221,484.	0.	141,664.

**PRISON ENTREPRENEURSHIP PROGRAM,  
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**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	488,410.	357,940.	98,066.	32,404.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	1,627,312.	1,394,503.	51,584.	181,225.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	34,793.	28,804.	2,467.	3,522.
<b>9</b> Other employee benefits	221,025.	182,978.	15,673.	22,374.
<b>10</b> Payroll taxes	166,278.	137,859.	11,420.	16,999.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	3,969.		3,969.	
<b>c</b> Accounting	15,267.		15,267.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	26,558.	26,558.		
<b>12</b> Advertising and promotion	115,120.	105,763.	3,853.	5,504.
<b>13</b> Office expenses	69,144.	64,740.	1,814.	2,590.
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	394,860.	350,615.	18,227.	26,018.
<b>17</b> Travel	143,675.	130,219.	5,543.	7,913.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest	28,112.	28,112.		
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	291,855.	266,401.	10,485.	14,969.
<b>23</b> Insurance	78,173.	69,363.	3,629.	5,181.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a OTHER CONTRACTUAL</b>	207,615.	179,515.	11,575.	16,525.
<b>b OTHER</b>	130,183.	126,136.	1,666.	2,381.
<b>c EVENTS</b>	112,019.	101,930.	4,156.	5,933.
<b>d SUBGRANT EXPENSE</b>	100,000.	100,000.		
<b>e All other expenses</b>	192,938.	177,970.	6,166.	8,802.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	4,447,306.	3,829,406.	265,560.	352,340.
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**PRISON ENTREPRENEURSHIP PROGRAM,  
INC.**

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**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	713,246.	1	865,658.	
	<b>2</b> Savings and temporary cash investments .....	701,168.	2	463,336.	
	<b>3</b> Pledges and grants receivable, net .....	253,087.	3	829,400.	
	<b>4</b> Accounts receivable, net .....	124,809.	4	140,786.	
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		5		
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		6		
	<b>7</b> Notes and loans receivable, net .....	775,939.	7	612,156.	
	<b>8</b> Inventories for sale or use .....		8		
	<b>9</b> Prepaid expenses and deferred charges .....	69,631.	9	86,963.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	4,429,741.			
	<b>b</b> Less: accumulated depreciation .....	1,521,583.			
	<b>11</b> Investments - publicly traded securities .....	2,646,299.	10c	2,908,158.	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	1,414,918.	11	2,031,976.	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		12		
	<b>14</b> Intangible assets .....		13		
	<b>15</b> Other assets. See Part IV, line 11 .....	1,000.	14	1,000.	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	6,700,097.	15	7,939,433.		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	224,637.	16	340,672.	
	<b>18</b> Grants payable .....		17		
	<b>19</b> Deferred revenue .....		18		
	<b>20</b> Tax-exempt bond liabilities .....		19		
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		20		
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		21		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	344,080.	22	324,549.	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	170,780.	23	131,946.	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	925,771.	24	1,079,662.	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	1,665,268.	25	1,876,829.	
	<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
<b>27</b> Net assets without donor restrictions .....		4,781,742.	26	4,913,868.	
<b>28</b> Net assets with donor restrictions .....		253,087.	27	1,148,736.	
<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>					
<b>29</b> Capital stock or trust principal, or current funds .....			28		
<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....			29		
<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....			30		
<b>32</b> <b>Total net assets or fund balances</b> .....		5,034,829.	31	6,062,604.	
<b>33</b> <b>Total liabilities and net assets/fund balances</b> .....	6,700,097.	32	7,939,433.		

Form **990** (2024)

**PRISON ENTREPRENEURSHIP PROGRAM,  
INC.**

Form 990 (2024)

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**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	5,441,806.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	4,447,306.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	994,500.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	5,034,829.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	33,275.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	6,062,604.

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>b</b>	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>X</b>	
<b>c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	<b>X</b>	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____		<b>X</b>
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form **990** (2024)

SCHEDULE A  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

OMB No. 1545-0047

**2024**

Open to Public  
Inspection

Name of the organization **PRISON ENTREPRENEURSHIP PROGRAM, INC.** Employer identification number **20-1384253**

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

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

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3024015.	3039667.	3951531.	3440736.	5078658.	18534607.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 <b>Total.</b> Add lines 1 through 3	3024015.	3039667.	3951531.	3440736.	5078658.	18534607.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2343145.
6 <b>Public support.</b> Subtract line 5 from line 4.						16191462.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	3024015.	3039667.	3951531.	3440736.	5078658.	18534607.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	230,961.	170,249.	207,159.	297,969.	337,925.	1244263.
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.)	6,623.	8,915.	15,708.	58,623.	26,746.	116,615.
11 <b>Total support.</b> Add lines 7 through 10						19895485.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 <b>First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b>						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	81.38	%
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	88.01	%
16a <b>33 1/3% support test - 2024.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b <b>33 1/3% support test - 2023.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a <b>10% -facts-and-circumstances test - 2024.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b <b>10% -facts-and-circumstances test - 2023.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.) .....						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) .....						

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

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2023 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

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

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

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

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

**Part IV** Supporting Organizations

(Complete only if you checked a box on line 12 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**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
<b>2</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
<b>3a</b> 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>b</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 <b>Part VI</b> when and how the organization made the determination.		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
<b>c</b> 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 <b>Part VI</b> 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.		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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 <b>Part VI</b> .		
<b>7</b> 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).		
<b>8</b> 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).		
<b>9a</b> 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 <b>Part VI</b> .		
<b>b</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 <b>Part VI</b> .		
<b>c</b> 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 <b>Part VI</b> .		
<b>10a</b> 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>b</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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**Part IV Supporting Organizations** (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
- a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?
- b A family member of a person described on line 11a above?
- c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,

	Yes	No
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

provide detail in **Part VI**.

**Section B. Type I Supporting Organizations**

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

	Yes	No
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

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

	Yes	No
<b>1</b>		

**Section D. All Type III Supporting Organizations**

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

	Yes	No
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).

2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3 Parent of Supported Organizations. Answer lines 3a and 3b below.

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in **Part VI**.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

	Yes	No
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

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

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

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

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

Section C - Distributable Amount		(A) Prior Year	(B) Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

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

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

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**Part VI**

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



**SCHEDULE D**

(Form 990)

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**Complete if the organization answered "Yes" on Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
InspectionName of the organization **PRISON ENTREPRENEURSHIP PROGRAM,  
INC.**Employer identification number  
**20-1384253****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the  
organization answered "Yes" on Form 990, Part IV, line 6.

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

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

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

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of  
violations, and enforcement of the conservation easements it holds? .....

☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i)  
and section 170(h)(4)(B)(ii)? .....

☐ Yes ☐ No

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

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

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

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

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

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

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

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

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

b Assets included in Form 990, Part X .....

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

Schedule D (Form 990) (Rev. 12-2024)

## PRISON ENTREPRENEURSHIP PROGRAM,

Schedule D (Form 990) (Rev. 12-2024) INC.

20-1384253 Page 2

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

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

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

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

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

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

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

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

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

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

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

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

- a Board designated or quasi-endowment \_\_\_\_\_ %  
b Permanent endowment \_\_\_\_\_ %  
c Term endowment \_\_\_\_\_ %

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

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

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

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

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

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

**Part VI Land, Buildings, and Equipment**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		238,747.		238,747.
b Buildings		3,255,867.	913,880.	2,341,987.
c Leasehold improvements				
d Equipment		762,936.	525,935.	237,001.
e Other		172,191.	81,768.	90,423.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				2,908,158.

Schedule D (Form 990) (Rev. 12-2024)

# PRISON ENTREPRENEURSHIP PROGRAM,

Schedule D (Form 990) (Rev. 12-2024) **INC.**

20-1384253 Page **3**

## Part VII Investments - Other Securities

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

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

## Part VIII Investments - Program Related

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

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

## Part IX Other Assets

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

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

## Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <b>CAPITAL LEASE OBLIGATION</b>	<b>1,079,662.</b>
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	

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

Schedule D (Form 990) (Rev. 12-2024)

## PRISON ENTREPRENEURSHIP PROGRAM,

Schedule D (Form 990) (Rev. 12-2024) INC.

20-1384253 Page 4

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

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

1	Total revenue, gains, and other support per audited financial statements	1	5,451,387.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	9,248.
e	Add lines 2a through 2d	2e	9,248.
3	Subtract line 2e from line 1	3	5,442,139.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	-333.
c	Add lines 4a and 4b	4c	-333.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,441,806.

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

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

1	Total expenses and losses per audited financial statements	1	4,415,137.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	19,431.
e	Add lines 2a through 2d	2e	19,431.
3	Subtract line 2e from line 1	3	4,395,706.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	51,600.
c	Add lines 4a and 4b	4c	51,600.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	4,447,306.

**Part XIII Supplemental Information**

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

**PART XI, LINE 2D - OTHER ADJUSTMENTS:**

EFFECT OF UNCONSOLIDATING A SUBSIDIARY THAT FILES AN 1120 9,248.

**PART XI, LINE 4B - OTHER ADJUSTMENTS:**

TAX LOSS ON SALE OF PROPERTY AND EQUIPMENT -333.

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

BOOK/TAX CAPITAL OPERATING LEASE ACCOUNTING DIFFERENCE 17,936.

EFFECT OF UNCONSOLIDATING A SUBSIDIARY THAT FILES AN 1120 772.

BOOK LOSS ON SALE OF PROPERTY AND EQUIPMENT 723.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 19,431.

**PART XII, LINE 4B - OTHER ADJUSTMENTS:**

BOOK/TAX DEPRECIATION DIFFERENCE 51,601.

ROUNDING -1.

TOTAL TO SCHEDULE D, PART XII, LINE 4B 51,600.

Schedule D (Form 990) (Rev. 12-2024) **INC.**

20-1384253 Page 5

<b>Part XIII</b>	<b>Supplemental Information</b> <i>(continued)</i>
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This image shows a full page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, typical of notebook paper. There are no margins, text, or other markings on the page.

SCHEDULE J  
(Form 990)

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

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.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

Name of the organization

PRISON ENTREPRENEURSHIP PROGRAM,  
INC.

Employer identification number

20-1384253

Part I Questions Regarding Compensation

	Yes	No								
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <table><tbody><tr><td><input type="checkbox"/> First-class or charter travel</td><td><input type="checkbox"/> Housing allowance or residence for personal use</td></tr><tr><td><input type="checkbox"/> Travel for companions</td><td><input type="checkbox"/> Payments for business use of personal residence</td></tr><tr><td><input type="checkbox"/> Tax indemnification and gross-up payments</td><td><input type="checkbox"/> Health or social club dues or initiation fees</td></tr><tr><td><input type="checkbox"/> Discretionary spending account</td><td><input type="checkbox"/> Personal services (such as maid, chauffeur, chef)</td></tr></tbody></table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (such as maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (such as maid, chauffeur, chef)									
<b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	<b>1b</b>									
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	<b>2</b>									
<b>3</b> Indicate which, if any, of the following the organization used to establish the compensation of the organization's 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. <table><tbody><tr><td><input type="checkbox"/> Compensation committee</td><td><input type="checkbox"/> Written employment contract</td></tr><tr><td><input type="checkbox"/> Independent compensation consultant</td><td><input type="checkbox"/> Compensation survey or study</td></tr><tr><td><input type="checkbox"/> Form 990 of other organizations</td><td><input type="checkbox"/> Approval by the board or compensation committee</td></tr></tbody></table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee									
<b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: <b>a</b> Receive a severance payment or change-of-control payment?	<b>4a</b>	X								
<b>b</b> Participate in or receive payment from a supplemental nonqualified retirement plan?	<b>4b</b>	X								
<b>c</b> Participate in or receive payment from an equity-based compensation arrangement?	<b>4c</b>	X								
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.										
<b>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>										
<b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <b>a</b> The organization?	<b>5a</b>	X								
<b>b</b> Any related organization?	<b>5b</b>	X								
If "Yes" on line 5a or 5b, describe in Part III.										
<b>6</b> 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: <b>a</b> The organization?	<b>6a</b>	X								
<b>b</b> Any related organization?	<b>6b</b>	X								
If "Yes" on line 6a or 6b, describe in Part III.										
<b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	<b>7</b>	X								
<b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	<b>8</b>	X								
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	<b>9</b>									

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

Schedule J (Form 990) (Rev. 12-2024)





Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

[illegible]

SCHEDULE M  
(Form 990)

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

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

Go to [www.irs.gov/Form990](https://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **PRISON ENTREPRENEURSHIP PROGRAM,  
INC.**

Employer identification number  
**20-1384253**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art .....				
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....				
5 Clothing and household goods .....				
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....	X	3	18,296.	FMV
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other .....				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....				
18 Collectibles .....				
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ( <u>EQUIPMENT AND L</u> ) .....	X	8	4,047.	
26 Other ( <u>PROFESSIONAL SE</u> ) .....	X	2	3,987.	
27 Other ( ) .....				
28 Other ( ) .....				

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

29

30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it  
must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for  
exempt purposes for the entire holding period? .....

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash  
contributions? .....

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,  
describe in Part II.

Yes No

30a		X
31		X
32a	X	

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

Schedule M (Form 990) 2024

**Part II**

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

SCHEDULE M, PART I, LINE 32B:

THE ORGANIZATION USES LICENSED SECURITIES BROKERS TO SELL PUBLICLY  
TRADED STOCKS.

SCHEDULE O  
(Form 990)

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
Attach to Form 990 or Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

Name of the organization	PRISON ENTREPRENEURSHIP PROGRAM, INC.	Employer identification number	20-1384253
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:  
LIVES, RESTORE FAMILIES AND REBUILD COMMUNITIES.

FORM 990, PART VI, SECTION B, LINE 11B:  
THE ORGANIZATION'S AUDIT COMMITTEE AND TAX PREPARER DISCUSS THE FORM 990.  
A PDF COPY OF THE FORM 990 IS GIVEN TO THE BOARD FOR THEIR REVIEW PRIOR TO  
BEING FILED.

FORM 990, PART VI, SECTION B, LINE 12C:  
THE BOARD OF DIRECTORS APPROVES ALL MAJOR CONTRACTS AND AGREEMENTS. ANY  
CONFLICT OF INTEREST SITUATION WOULD BE ADDRESSED BY THE DIRECTORS BEFORE A  
CONTRACT IS EXECUTED.

FORM 990, PART VI, SECTION B, LINE 15:  
THE BOARD-APPOINTED COMPENSATION COMMITTEE WORKS WITH THE HUMAN RESOURCE  
MANAGER TO PERFORM A COMPREHENSIVE REVIEW OF ALL EMPLOYEE POSITIONS. THE  
REVIEW INCLUDES USING A COMPREHENSIVE SALARY SURVEY TOOL TO BENCHMARK  
EXISTING COMPENSATION FOR ALL STAFF WHICH PROVIDES EMPIRICAL DATA TO  
VERIFY, AND IF NECESSARY, MODIFY, CURRENT ORGANIZATION PAY-SCALES. THE  
BOARD APPROVED COMPENSATION AMOUNTS USING THIS REVIEW AND OTHER PERFORMANCE  
MEASURES.

FORM 990, PART VI, SECTION C, LINE 19:  
THE ORGANIZATION MAKES THE FORM 990 AVAILABLE TO THE PUBLIC VIA A PDF FILE  
UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
BOOK TAX DEPRECIATION DIFFERENCE	51,601.
BOOK TAX CAPITAL OPERATING LEASE ACCOUNTING DIFFERENCE	-17,936.
BOOK TAX GAIN ON SALE OF PROPERTY AND EQUIPMENT DIFFERENCE	-390.
TOTAL TO FORM 990, PART XI, LINE 9	33,275.

## LHA 432161 10-23-24



1

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related

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**PRISON ENTREPRENEURSHIP PROGRAM,**

Schedule R (Form 990) (Rev. 1-2025) **INC.**

**20-1384253**

Page **3**

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		<b>X</b>
<b>b</b> Gift, grant, or capital contribution to related organization(s)		<b>X</b>
<b>c</b> Gift, grant, or capital contribution from related organization(s)		<b>X</b>
<b>d</b> Loans or loan guarantees to or for related organization(s)	<b>X</b>	
<b>e</b> Loans or loan guarantees by related organization(s)		<b>X</b>
<b>f</b> Dividends from related organization(s)		
<b>g</b> Sale of assets to related organization(s)		<b>X</b>
<b>h</b> Purchase of assets from related organization(s)		<b>X</b>
<b>i</b> Exchange of assets with related organization(s)		<b>X</b>
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s)		<b>X</b>
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)		
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s)		<b>X</b>
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)		<b>X</b>
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		<b>X</b>
<b>o</b> Sharing of paid employees with related organization(s)		<b>X</b>
<b>p</b> Reimbursement paid to related organization(s) for expenses		
<b>q</b> Reimbursement paid by related organization(s) for expenses		<b>X</b>
<b>r</b> Other transfer of cash or property to related organization(s)		
<b>s</b> Other transfer of cash or property from related organization(s)		<b>X</b>

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
<b>(1) COMMUNITAS VENTURES INC</b>	<b>D</b>	<b>40,416.00</b>	<b>COST</b>
<b>(2)</b>			
<b>(3)</b>			
<b>(4)</b>			
<b>(5)</b>			
<b>(6)</b>			

## Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)

[illegible]

**Part VII Supplemental Information**

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

**PART I, IDENTIFICATION OF DISREGARDED ENTITIES:****NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:**

HOUSTON CALEB HOUSE LLC

EIN: 27-2573168

6501 NAVIGATION BLVD #H7

HOUSTON, TX 77011

PRIMARY ACTIVITY: RENTAL

DIRECT CONTROLLING ENTITY: PEP

**NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:**

ENTRE CAPITAL LLC

EIN: 61-1951809

6501 NAVIGATION BLVD #H7

HOUSTON, TX 77011

PRIMARY ACTIVITY: LENDING

DIRECT CONTROLLING ENTITY: PEP

**PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUST:****NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:**

COMMUNITAS VENTURES, INC.

EIN: 30-0778264

6501 NAVIGATION BLVD #H7

HOUSTON, TX 77011

PRIMARY ACTIVITY: SUPPORT

DIRECT CONTROLLING ENTITY:

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	KIT LANE	10/06/08	SL	27.50	MM	17	145,450.				145,450.	80,437.		5,289.	85,726.
2	LAND	10/06/08	L	.000			40,000.				40,000.			0.	
3	DESKS AND CHAIRS - CV	04/30/11	SL	5.00		16	6,272.				6,272.	6,272.		0.	6,272.
4	AVAYA - PHONES ADD IN	07/26/11	SL	5.00		16	4,221.				4,221.	4,221.		0.	4,221.
5	XEROX PHASER	08/01/11	SL	5.00		16	1,874.				1,874.	1,874.		0.	1,874.
6	CALEB HOUSE LAND	01/01/09	L	.000			29,913.				29,913.			0.	
7	CALEB HOUSE BUILDING	01/01/09	SL	27.50	MM	17	105,944.				105,944.	53,313.		4,197.	57,510.
8	FOUNDATION	03/02/12	SL	15.00		16	9,330.				9,330.	7,360.		622.	7,982.
9	600 USED CHAIRS	06/01/13	200DE	5.00	MC	17	3,698.			1,849.	1,849.	1,849.		0.	1,849.
10	CANON D5 MARK III CAMERA	06/07/13	200DE	3.00	MC	17	3,300.			1,650.	1,650.	1,650.		0.	1,650.
11	AVAYO VOIP MODULE	08/01/13	200DE	3.00	MC	17	2,076.			1,038.	1,038.	1,038.		0.	1,038.
12	20 DESKTOP DELL OPTIPLEX	12/20/13	200DE	3.00	MC	17	5,540.			2,770.	2,770.	2,770.		0.	2,770.
13	ELECTRIC LOCK AND KEYPAD	12/27/13	200DE	3.00	MC	17	2,830.			1,415.	1,415.	1,415.		0.	1,415.
14	BEDS	08/01/14	200DE	7.00	HY	17	10,488.			5,244.	5,244.	5,244.		0.	5,244.
15	TV STAND AND DRESSER	08/01/14	200DE	7.00	HY	17	540.			270.	270.	270.		0.	270.
16	DRESSER	08/01/14	200DE	7.00	HY	17	1,899.			949.	950.	950.		0.	950.
17	CAMERAS	08/01/14	200DE	5.00	HY	17	1,657.			829.	828.	828.		0.	828.
18	TV	08/01/14	200DE	5.00	HY	17	778.			389.	389.	389.		0.	389.

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
19	TV	08/01/14	200DE	5.00		HY17	740.			370.	370.	370.		0.	370.
20	COLUMBIA LAND	02/03/14	L	.000			143,657.				143,657.			0.	
21	COLUMBIA BUILDING	09/01/14	SL	27.50		MM17	235,125.				235,125.	79,750.		8,533.	88,283.
22	KIT LANE ROOF	08/01/14	SL	15.00		16	7,650.				7,650.	4,803.		510.	5,313.
23	WASHER AND DRYER	08/01/14	200DE	7.00		HY17	3,252.			1,626.	1,626.	1,626.		0.	1,626.
24	WASHER AND DRYER	12/01/14	200DE	7.00		HY17	3,798.			1,899.	1,899.	1,899.		0.	1,899.
25	CU DESKTOP	01/01/14	200DE	3.00		HY17	1,710.			855.	855.	855.		0.	855.
26	DALLAS ESCHOOL FURNITURE	09/01/14	200DE	5.00		HY17	3,233.				3,233.	3,233.		0.	3,233.
27	DELL E5440	12/04/14	200DE	5.00		HY17	1,210.			605.	605.	605.		0.	605.
28	CU DIVIDERS	07/01/14	200DE	5.00		HY17	4,579.			2,289.	2,290.	2,290.		0.	2,290.
29	CU BOOKCASES	07/01/14	200DE	5.00		HY17	4,170.			2,085.	2,085.	2,085.		0.	2,085.
30	CU SERVER DELL	07/22/14	200DE	5.00		HY17	5,322.			2,661.	2,661.	2,661.		0.	2,661.
31	EU DELL SERVER	07/15/14	200DE	5.00		HY17	3,103.			1,552.	1,551.	1,551.		0.	1,551.
32	EU COMPUTER 101	07/03/14	200DE	5.00		HY17	13,017.			6,509.	6,508.	6,508.		0.	6,508.
33	EU PORTABLE DIVIDERS	07/29/14	200DE	5.00		HY17	2,227.			1,114.	1,113.	1,113.		0.	1,113.
34	EU FURNITURE	07/29/14	200DE	7.00		HY17	12,468.			6,234.	6,234.	6,234.		0.	6,234.
35	EU PA SYSTEM	08/05/14	200DE	5.00		HY17	1,980.			990.	990.	990.		0.	990.
36	EU ARMLESS CHAIRS	11/18/14	200DE	5.00		HY17	6,202.			3,101.	3,101.	3,101.		0.	3,101.

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37	ROOF	09/22/15	150DE	15.00		HY17	10,725.			5,363.	5,362.	3,629.		267.	3,896.
38	HOUSE REMODEL	09/01/15	150DE	15.00		HY17	74,982.			37,491.	37,491.	23,101.		2,214.	25,315.
39	FURNITURE	09/01/15	200DE	7.00		HY17	7,266.			3,633.	3,633.	3,633.		0.	3,633.
40	(D) DALLAS OFFICE PAINTING	08/05/15	150DE	15.00		HY17	1,880.			940.	940.	579.		28.	607.
41	PORTABLE DIVIDERS FOR GYM	02/03/15	200DE	5.00		HY17	9,020.			4,510.	4,510.	4,510.		0.	4,510.
42	STEEL MOBILE BOOKCASE	02/09/15	200DE	5.00		HY17	4,039.			2,019.	2,020.	2,020.		0.	2,020.
43	PORTABLE PA SYSTEM AND UPGRADE	02/10/15	200DE	5.00		HY17	5,768.			2,884.	2,884.	2,884.		0.	2,884.
44	EPSON PROJECTOR WALL	02/10/15	200DE	5.00		HY17	821.			411.	410.	410.		0.	410.
45	2 EPSON PROJECTORS	02/20/15	200DE	5.00		HY17	6,094.			3,047.	3,047.	3,047.		0.	3,047.
46	EBOOKS AND VIDEO	03/02/15	200DE	5.00		HY17	4,204.			2,102.	2,102.	2,102.		0.	2,102.
47	SET OF CRIME AND PUNISHMENT BOOKS	03/09/15	200DE	5.00		HY17	9,626.			4,813.	4,813.	4,813.		0.	4,813.
48	14 DELL MONITERS AND ADV EXCH	03/13/15	200DE	5.00		HY17	8,012.			4,006.	4,006.	4,006.		0.	4,006.
49	120 ENTRE BOOKS	03/16/15	200DE	5.00		HY17	10,543.			5,271.	5,272.	5,272.		0.	5,272.
50	FURNITURE OF ESTES UNIT	02/28/15	200DE	5.00		HY17	4,062.			2,031.	2,031.	2,031.		0.	2,031.
51	PA SYSTEM UPGRADE FOR GYM	05/01/15	200DE	5.00		HY17	2,118.			1,059.	1,059.	1,059.		0.	1,059.
52	MONITOR	05/18/15	200DE	5.00		HY17	82.			41.	41.	41.		0.	41.
53	AV UPGRADE	05/27/15	200DE	5.00		HY17	3,662.			1,831.	1,831.	1,831.		0.	1,831.
54	NEW SOUND MIC & SPEAKERS	06/13/15	200DE	5.00		HY17	2,176.			1,088.	1,088.	1,088.		0.	1,088.

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55	18 DELL OPTIPLEX 780 CORE I5 WINDOWS	06/16/15	200DE	5.00		HY17	9,540.			4,770.	4,770.	4,770.		0.	4,770.
56	BLACK GRID STOOLS AND 2 DJ TABLES	06/19/15	200DE	5.00		HY17	1,763.			881.	882.	882.		0.	882.
57	GRADUATION GOWNS	07/31/15	200DE	5.00		HY17	3,369.			1,685.	1,684.	1,684.		0.	1,684.
58	STAGE AND CASE	08/06/15	200DE	7.00		HY17	4,250.			2,125.	2,125.	2,125.		0.	2,125.
59	PROJECTOR BOARD, TABLES PODIUM	08/17/15	200DE	5.00		HY17	2,258.			1,129.	1,129.	1,129.		0.	1,129.
60	EPSON PROJECTOR	08/20/15	200DE	5.00		HY17	3,050.			1,525.	1,525.	1,525.		0.	1,525.
61	E SCHOOL TABLES	08/28/15	200DE	5.00		HY17	1,950.			975.	975.	975.		0.	975.
62	2011 HONDA CRV	02/06/15	200DE	5.00		HY17	16,165.			8,082.	8,083.	8,083.		0.	8,083.
63	CASA HOUSE CAMERAS	06/30/16	200DE	5.00		MC17	798.			399.	399.	399.		0.	399.
64	500 FOLDING CHAIRS ESTES	01/05/16	200DE	5.00		MC17	6,775.			3,387.	3,388.	3,388.		0.	3,388.
65	SOUND SYSTEM ESTES	01/22/16	200DE	5.00		MC17	5,049.			2,524.	2,525.	2,525.		0.	2,525.
66	DJ SPEAKERS WITH WHEELS	01/23/16	200DE	5.00		MC17	650.			325.	325.	325.		0.	325.
67	GIG CASE WITH WHEELS	01/24/16	200DE	5.00		MC17	858.			429.	429.	429.		0.	429.
68	TABLE, BASE, CABINET ESTES	02/05/16	200DE	5.00		MC17	1,502.			751.	751.	751.		0.	751.
69	40 ARMLESS STACKING CHAIRS	02/05/16	200DE	5.00		MC17	3,101.			1,550.	1,551.	1,551.		0.	1,551.
70	4 DELL 21.5 MONITOR & ADV EXCH	04/13/16	200DE	5.00		MC17	2,993.			1,496.	1,497.	1,497.		0.	1,497.
71	LAP TOP	04/27/16	200DE	5.00		MC17	723.			361.	362.	362.		0.	362.
72	COMPUTER VIDEO EDITING ESTES	07/12/16	200DE	5.00		MC17	585.			292.	293.	293.		0.	293.

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73	LAP TOP	08/08/16	200DE	5.00	MC17		950.			475.	475.	475.		0.	475.
74	COMPUTER LAB CABINETS & LIGHTS	09/09/16	200DE	5.00	MC17		1,726.			863.	863.	863.		0.	863.
75	IKEA CABINETS FOR CLE	09/06/16	200DE	7.00	MC17		4,133.			2,067.	2,066.	2,066.		0.	2,066.
76	IKEA CABINETS FOR CLE	09/09/16	200DE	5.00	MC17		1,127.			563.	564.	564.		0.	564.
77	IKEA CABINETS FOR CLE	09/12/16	200DE	5.00	MC17		223.			112.	111.	111.		0.	111.
78	DELL	09/13/16	200DE	5.00	MC17		1,102.			551.	551.	551.		0.	551.
79	TABLES AND BARSTOOLS	10/26/16	200DE	5.00	MC17		4,010.			2,005.	2,005.	2,005.		0.	2,005.
80	(D) TOYOTA HIGHLANDER	12/20/16	200DE	5.00	MC17		19,361.			9,680.	9,681.	9,681.		0.	9,681.
81	CHAIRS FOR CLEVELAND (ROOM AND LAB)	03/01/17	200DE	5.00	HY17		10,325.			5,163.	5,162.	5,162.		0.	5,162.
82	CAMERA EQUIPMENT	07/10/17	200DE	5.00	HY17		2,185.			1,093.	1,092.	1,092.		0.	1,092.
83	COMPUTER FOR LAURA	10/04/17	200DE	5.00	HY17		830.			830.				0.	
84	COMPUTER FOR GAMI	10/04/17	200DE	5.00	HY17		830.			830.				0.	
85	DJ COMPUTER FOR CLE	10/26/17	200DE	5.00	HY17		600.			600.				0.	
86	COMPUTER LAB	10/03/17	200DE	5.00	HY17		750.			750.				0.	
87	COMPUTER FOR MARC	10/19/17	200DE	5.00	HY17		672.			672.				0.	
88	2015 TOYOTA SIENNA, WHITE	08/05/17	200DE	5.00	HY17		19,439.			9,720.	9,719.	9,719.		0.	9,719.
89	CALEB AC UNITS	03/16/17	150DE	15.00	HY17		6,770.			3,385.	3,385.	1,686.		200.	1,886.
90	COLUMBIA BATHROOM REMODEL	04/30/17	150DE	15.00	HY17		14,582.			7,291.	7,291.	3,632.		431.	4,063.

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91	CALEB REPLACE EXTERIOR WOOD	06/22/17	150DE	15.00	HY	17	1,580.			790.	790.	393.		47.	440.
92	AUSTIN ELECTRONICS	05/31/17	200DE	5.00	HY	17	4,857.			450.	4,407.	4,407.		0.	4,407.
93	COMPUTER	10/31/17	200DE	5.00	HY	17	540.			540.				0.	
94	REFRIGERATOR	07/31/17	200DE	7.00	HY	17	909.			455.	454.	434.		20.	454.
95	COLUMBIA REMODEL	05/01/18	150DE	15.00	HY	17	1,980.			1,980.				0.	
96	DRYER	01/31/18	200DE	7.00	HY	17	529.			529.				0.	
97	LAPTOP FOR JASON MOORE	01/14/19	200DE	5.00	MC	17	1,069.			1,069.				0.	
98	DESKTOP REPLACEMENT FOR PHI	04/01/19	200DE	5.00	MC	17	1,113.			1,113.				0.	
99	COMPUTERS FOR CLEVELAND	05/01/19	200DE	5.00	MC	17	800.			800.				0.	
100	LAPTOP FOR ADAM CANTU & SSD	06/01/19	200DE	5.00	MC	17	1,065.			1,065.				0.	
101	COMPUTER FOR WASON AND BRYAN	06/01/19	200DE	5.00	MC	17	2,012.			2,012.				0.	
102	COMPUTER FOR CLEVELAND	06/01/19	200DE	5.00	MC	17	885.			885.				0.	
103	HARDDRIVES FOR ESTES	08/01/19	200DE	5.00	MC	17	1,153.			1,153.				0.	
104	HOUSTON COMPUTER	10/01/19	200DE	5.00	MC	17	760.			760.				0.	
105	COMPUTER FOR THERESA	11/01/19	200DE	5.00	MC	17	1,328.			1,328.				0.	
106	DALLAS OFFICE PARTICIPANT COMPUTERS	11/01/19	200DE	5.00	MC	17	679.			679.				0.	
107	COMPUTER FOR CLEVELAND	11/01/19	200DE	5.00	MC	17	570.			570.				0.	
108	VARIDESK	12/01/19	200DE	5.00	MC	17	23,400.			23,400.				0.	

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109	COMPUTER FOR TIM	12/01/19	200DE	5.00	MC17	1,135.			1,135.				0.	
110	CLEVELAND COMPUTERS AND HARDDRIVE	12/01/19	200DE	5.00	MC17	579.			579.				0.	
111	COMUTER FOR BOBBY SHARP	12/01/19	200DE	5.00	MC17	850.			850.				0.	
112	2009 TOYOTA HIGHLANDER	01/01/19	200DE	5.00	MC17	11,000.			11,000.				0.	
113	LAND BUFFALO SPEEDWAY	01/01/19	L	.000		25,177.				25,177.			0.	
114	ALARM AND INSTALLATION	11/01/19	150DE	15.00	MC17	3,330.			3,330.				0.	
115	ALARM AND INSTALLATION	11/01/19	150DE	15.00	MC17	1,750.			1,750.				0.	
116	BUFFALO SPEEDWAY PROPERTY	11/01/19	SL	27.50	MM17	235,690.				235,690.	35,354.		8,571.	43,925.
117	MATRESS & COVERS	07/01/19	200DE	7.00	MC17	1,273.			1,273.				0.	
118	INTEGRITY HOUSE NEW FURNITURE	11/01/19	200DE	7.00	MC17	10,015.			10,015.				0.	
119	WASHER FOR CALEB	08/01/19	200DE	7.00	MC17	673.			673.				0.	
120	MATRESSES	10/01/19	200DE	7.00	MC17	610.			610.				0.	
121	AC UNIT CALEB	07/30/20	200DE	7.00	HY17	4,600.			4,600.				0.	
122	WASHER/DRYER COLUMBAI	07/31/20	200DE	7.00	HY17	3,968.			3,968.				0.	
123	AC UNIT FOR INTEGRITY	08/17/20	200DE	7.00	HY17	2,300.			2,300.				0.	
124	SERVER FOR ESTES	02/15/18	200DE	5.00	HY17	1,300.			1,300.				0.	
125	CLEVELAND COMPUTERS AND SSD	01/01/20	200DE	5.00	HY17	1,688.			1,688.				0.	
126	COMPUTER FOR JON GOODALE	06/01/20	200DE	5.00	HY17	1,200.			1,200.				0.	

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127	COMPUTER FOR ALLISON SHEEDER	08/01/20	200DE	5.00		HY17	1,276.			1,276.				0.	
128	COMPUTER FOR JEFF HUMPHREY	09/01/20	200DE	5.00		HY17	1,276.			1,276.				0.	
129	CAMERA/CABLES	11/01/20	200DE	5.00		HY17	4,506.			4,506.				0.	
130	CAMERA	11/01/20	200DE	5.00		HY17	1,300.			1,300.				0.	
131	ALARM AND INSTALLATION	02/01/21	200DE	5.00		HY17	2,400.			2,400.				0.	
132	WASHER AND REFRIGERATOR	06/01/21	200DE	5.00		HY17	1,208.			1,208.				0.	
133	BED FRAMES AND MATTRESS COVERS	08/01/21	200DE	5.00		HY17	1,945.			1,945.				0.	
134	WASHER DRYER FOR COLUMBIA	09/01/21	200DE	5.00		HY17	1,477.			1,477.				0.	
135	COLUMBIA NEW FURNITURE	09/01/21	200DE	5.00		HY17	3,923.			3,923.				0.	
136	LAPTOP FOR PAT	03/16/21	200DE	5.00		HY17	1,135.			1,135.				0.	
137	COMPUTERS FOR CLEVELAND	06/11/21	200DE	5.00		HY17	1,200.			1,200.				0.	
138	DESKPHONES FOR NEW OFFICE	07/13/21	200DE	5.00		HY17	1,370.			1,370.				0.	
139	MOBILE STUDIO: MACBOOKPRO + INSURANCE	07/16/21	200DE	5.00		HY17	3,950.			3,950.				0.	
140	MOBILE STUDIO: NIKON AF-S LENS	07/16/21	200DE	5.00		HY17	2,347.			2,347.				0.	
141	MOBILE STUDIO: NIKON Z6II AND MOUNT ADAPTER	07/01/21	200DE	5.00		HY17	2,097.			2,097.				0.	
142	MOBILE STUDIO: SONY MEMORY CARD	07/01/21	200DE	5.00		HY17	338.			338.				0.	
143	MOBILE STUDIO: NIKON AF S LENS	07/01/21	200DE	5.00		HY17	477.			477.				0.	
144	COMPUTER FOR DAVID JOHNSON	07/01/21	200DE	5.00		HY17	1,194.			1,194.				0.	

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145	TELEVISION FOR ESCHOOL	09/03/21	200DE	5.00	HY17	1,050.			1,050.				0.	
146	LAPTOPS FOR COURTNEY & TIM	09/01/21	200DE	5.00	HY17	2,506.			2,506.				0.	
147	MOBILE AUDIO/VIDEO EQUIPMENT	10/01/21	200DE	5.00	HY17	9,047.			9,047.				0.	
148	ELECTRONIC WRITING TABLETS PHI AND TIM	10/01/21	200DE	5.00	HY17	1,151.			1,151.				0.	
149	LAPTOP FOR ESTES	12/01/21	200DE	5.00	HY17	930.			930.				0.	
150	SERVER FOR LMS	12/01/21	200DE	5.00	HY17	1,350.			1,350.				0.	
151	NEW OFFICE MAKER HUB ELECTRONICS	08/01/21	200DE	5.00	HY17	5,382.			5,382.				0.	
152	TREE REMOVAL	04/30/22	150DE	15.00	HY17	3,290.				3,290.	477.		281.	758.
153	TREE REMOVAL AND DRIVEWAY	06/03/22	150DE	15.00	HY17	6,500.				6,500.	943.		556.	1,499.
154	5517 COLUMBIA HOUSE PLUMBING	05/30/22	150DE	15.00	HY17	24,000.				24,000.	3,480.		2,052.	5,532.
155	COLUMBIA NEW FENCE	05/30/22	150DE	15.00	HY17	10,308.				10,308.	1,495.		881.	2,376.
156	HOT WATER HEATER REPLACEMENT OBREIN	05/30/22	150DE	15.00	HY17	1,745.				1,745.	253.		149.	402.
157	AC WORK - RELOCATE	08/30/22	150DE	15.00	HY17	7,000.				7,000.	1,015.		599.	1,614.
158	O'BREIN HOUSE ROOF REPAIR	08/30/22	150DE	15.00	HY17	1,500.				1,500.	218.		128.	346.
159	FLOORING FOR O'BRIEN	10/11/22	150DE	15.00	HY17	14,115.				14,115.	2,047.		1,207.	3,254.
160	BATHROOM AND KITCHEN - IH	09/18/22	150DE	15.00	HY17	18,120.				18,120.	2,627.		1,549.	4,176.
161	CONVERT TUBS TO SHOWER	11/30/22	150DE	15.00	HY17	26,900.				26,900.	3,901.		2,300.	6,201.
162	CONVERT TUBS TO SHOWER	11/30/22	150DE	15.00	HY17	25,800.				25,800.	3,741.		2,206.	5,947.

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163	HVAC INSTALLATION	01/28/22	200DE	7.00		HY17	10,499.				10,499.	4,071.		1,837.	5,908.
164	REFRIGERATOR FOR INTEGRITY	03/30/22	200DE	7.00		HY17	1,496.				1,496.	580.		262.	842.
165	REPLACE TWO SHOWER VALVES,	07/29/22	200DE	7.00		HY17	2,630.				2,630.	1,020.		460.	1,480.
166	TRIMS														
167	CLEVELAND COMPUTERS	01/12/22	200DE	5.00		HY17	34,702.				34,702.	18,045.		6,663.	24,708.
168	FURNITURE FOR NEW SPACE	01/01/22	200DE	5.00		HY17	40,563.				40,563.	21,093.		7,788.	28,881.
169	MONITORS FOR CLEVELAND	02/01/22	200DE	5.00		HY17	2,040.				2,040.	1,061.		392.	1,453.
170	LAPTOP FOR LAURA	02/09/22	200DE	5.00		HY17	1,348.				1,348.	701.		259.	960.
171	LAPTOP FOR MAX	02/09/22	200DE	5.00		HY17	1,348.				1,348.	701.		259.	960.
172	SOFA AND LOVESEAT FOR CLEVELAND	01/28/22	200DE	5.00		HY17	2,749.				2,749.	1,429.		528.	1,957.
173	ESTES COMPUTERS	02/25/22	200DE	5.00		HY17	25,093.				25,093.	13,048.		4,818.	17,866.
174	LOCKS/VIDEO CABLE CLEVELAND	04/11/22	200DE	5.00		HY17	2,293.				2,293.	1,192.		440.	1,632.
175	LOCKS/VIDEO CABLE ESTES	04/11/22	200DE	5.00		HY17	1,273.				1,273.	662.		244.	906.
176	LAPTOP FOR BRYAN AND ALLISON	03/25/22	200DE	5.00		HY17	2,360.				2,360.	1,227.		453.	1,680.
177	CLEVELAND COMPUTER LAB	07/01/22	200DE	5.00		HY17	5,473.				5,473.	2,846.		1,051.	3,897.
178	GREG AND MIKEY LAPTOP	08/13/22	200DE	5.00		HY17	2,755.				2,755.	1,433.		529.	1,962.
179	GERALD LAPTOP	08/13/22	200DE	5.00		HY17	1,384.				1,384.	720.		266.	986.
180	JASON LAPTOP	08/13/22	200DE	5.00		HY17	1,384.				1,384.	720.		266.	986.
180	PEP COLLIDER EQUIPMENT	09/01/22	200DE	5.00		HY17	15,057.				15,057.	7,830.		2,891.	10,721.

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181	WIRELESS MICS	08/19/22	200DE	5.00	HY17	HY17	1,148.				1,148.	597.		220.	817.
182	LAPTOP TIMOTHY DANIELS	08/28/22	200DE	5.00	HY17	HY17	1,457.				1,457.	757.		280.	1,037.
183	MONITORS FOR HOUSTON	08/30/22	200DE	5.00	HY17	HY17	1,981.				1,981.	1,030.		380.	1,410.
184	LAPTOP COMPUTER - SYED K.	10/07/22	200DE	5.00	HY17	HY17	1,399.				1,399.	727.		269.	996.
185	PORTABLE SPEAKERS	10/12/22	200DE	5.00	HY17	HY17	1,600.				1,600.	832.		307.	1,139.
186	TOUCH SCREEN (PEP COLLIDER)	09/26/22	200DE	5.00	HY17	HY17	1,440.				1,440.	749.		276.	1,025.
187	LAPTOP FOR D. FLORES	09/27/22	200DE	5.00	HY17	HY17	900.				900.	468.		173.	641.
188	MONITORS (CLEVELAND)/PRINTER BPC	09/30/22	200DE	5.00	HY17	HY17	1,341.				1,341.	697.		257.	954.
189	MONITORS FOR HOUSTON (SIX)	10/23/22	200DE	5.00	HY17	HY17	1,310.				1,310.	681.		252.	933.
190	LAPTOP COMPUTER (CLEVELAND) DJONES	10/23/22	200DE	5.00	HY17	HY17	1,251.				1,251.	650.		240.	890.
191	BACKUP SERVER HOUSTON	10/17/22	200DE	5.00	HY17	HY17	1,300.				1,300.	676.		250.	926.
192	LAPTOP COMPUTER MI LAI	11/14/22	200DE	5.00	HY17	HY17	1,103.				1,103.	574.		212.	786.
193	SOFTWARE DATABASE	06/27/22	200DE	3.00	HY17	HY17	3,060.				3,060.	2,380.		453.	2,833.
194	2008 FORD F350 WHITE	07/01/22	200DE	5.00	HY17	HY17	20,000.				20,000.	10,400.		3,840.	14,240.
195	RETURNED VIDEO SWITCHER	12/07/21	200DE	5.00	HY17	HY17	279.				279.			0.	
196	EAST END MAKER HUB	09/01/22	200DE	7.00	HY17	HY17	19,671.				19,671.	7,627.		3,441.	11,068.
197	EAST END MAKER HUB	09/01/22	200DE	7.00	HY17	HY17	21,768.				21,768.	8,440.		3,808.	12,248.
198	THR3E DESIGN	09/01/22	200DE	7.00	HY17	HY17	396.				396.	154.		69.	223.

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199	TELLEPSEN INTERIORS	09/01/22	200DE	7.00		HY17	34,719.				34,719.	13,463.		6,073.	19,536.
200	THR3E DESIGN	09/01/22	200DE	7.00		HY17	1,352.				1,352.	524.		236.	760.
201	TELLEPSEN INTERIORS	09/01/22	200DE	7.00		HY17	12,745.				12,745.	4,942.		2,230.	7,172.
202	THR3E DESIGN	09/01/22	200DE	7.00		HY17	2,380.				2,380.	923.		416.	1,339.
203	TELLEPSEN INTERIORS	09/01/22	200DE	7.00		HY17	104,083.				104,083.	40,359.		18,207.	58,566.
204	THR3E DESIGN	09/01/22	200DE	7.00		HY17	1,736.				1,736.	673.		304.	977.
205	TELLEPSEN INTERIORS	09/01/22	200DE	7.00		HY17	112,093.				112,093.	43,464.		19,608.	63,072.
206	THR3E DESIGN	09/01/22	200DE	7.00		HY17	3,005.				3,005.	1,165.		526.	1,691.
207	TELLEPSEN INTERIORS	09/01/22	200DE	7.00		HY17	123,339.				123,339.	47,826.		21,575.	69,401.
208	TELLEPSEN INTERIORS	09/01/22	200DE	7.00		HY17	170,739.				170,739.	66,205.		29,867.	96,072.
209	THR3E DESIGN	09/01/22	200DE	7.00		HY17	495.				495.	192.		87.	279.
210	TELLEPSEN INTERIORS	09/01/22	200DE	7.00		HY17	5,802.				5,802.	2,250.		1,015.	3,265.
211	TELLEPSEN INTERIORS	09/01/22	200DE	7.00		HY17	52,222.				52,222.	20,249.		9,135.	29,384.
212	VARIDESK DONATIONS	09/01/22	200DE	5.00		HY17	18,000.				18,000.	9,360.		3,456.	12,816.
213	DONATION FROM VARIDESK FOR COLLIDER	09/01/22	200DE	5.00		HY17	40,104.				40,104.	20,854.		7,700.	28,554.
214	HALL BATH TOILET, NEW VINYL	03/01/23	150DE	15.00		HY17	1,150.				1,150.	58.		109.	167.
215	FENCE	03/01/23	150DE	15.00		HY17	3,836.				3,836.	192.		364.	556.
216	COLUMBIA PERIMETER DOORS	01/01/23	200DE	7.00		HY17	1,053.				1,053.	150.		258.	408.

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217	CLOTHES CABINETS	02/01/23	200DE	7.00	HY17	1,980.				1,980.	283.		485.	768.
218	CLOTHES CABINETS	03/01/23	200DE	7.00	HY17	1,620.				1,620.	231.		397.	628.
219	WASHER AND DRYER	06/01/23	200DE	5.00	HY17	1,527.				1,527.	305.		489.	794.
220	MATRESSES FOR COLUMBIA	09/01/23	200DE	7.00	HY17	7,830.				7,830.	1,119.		1,917.	3,036.
221	LAPTOP FOR MERCURY	01/01/23	200DE	5.00	HY17	1,287.				1,287.	257.		412.	669.
222	LAPTOP FOR LIFE CADDIES AND TWO MONITORS	01/01/23	200DE	5.00	HY17	3,417.				3,417.	683.		1,093.	1,776.
223	120 CHAIRS FOR ESTES	01/01/23	200DE	5.00	HY17	14,742.				14,742.	2,948.		4,717.	7,665.
224	120 CHAIRS FOR CLEVELAND	01/01/23	200DE	5.00	HY17	14,742.				14,742.	2,948.		4,717.	7,665.
225	100 CHAIRS	01/01/23	200DE	5.00	HY17	1,850.				1,850.	370.		592.	962.
226	300 CHAIRS	01/01/23	200DE	5.00	HY17	5,550.				5,550.	1,110.		1,776.	2,886.
227	300 CHAIRS	01/01/23	200DE	5.00	HY17	3,700.				3,700.	740.		1,184.	1,924.
228	DESKTOP FOR PHI	03/01/23	200DE	5.00	HY17	1,244.				1,244.	249.		398.	647.
229	PORTABLE SPEAKERS	04/01/23	200DE	5.00	HY17	1,600.				1,600.	320.		512.	832.
230	LAPTOP FOR MADONNA	05/01/23	200DE	5.00	HY17	1,301.				1,301.	260.		416.	676.
231	TWO COMPUTERS	06/01/23	200DE	5.00	HY17	1,724.				1,724.	345.		552.	897.
232	SWITCHES FOR COLLIDER NETWORK	04/01/23	200DE	5.00	HY17	1,716.				1,716.	343.		549.	892.
233	BACKUP SERVER FOR ESTES COMPUTER	07/11/23	200DE	5.00	HY17	1,300.				1,300.	260.		416.	676.
234	LAPTOP FOR LIFE CADDIE IN HOUSTON	08/01/23	200DE	5.00	HY17	1,150.				1,150.	230.		368.	598.

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235	DEHUMIDIFIER FOR WAREHOUSE	08/01/23	200DE	5.00	HY	17	1,100.				1,100.	220.		352.	572.
236	SLR NIKON CAMERA KIT	08/01/23	200DE	5.00	HY	17	1,594.				1,594.	319.		510.	829.
237	FLIPBOARD	09/05/23	200DE	5.00	HY	17	2,121.				2,121.	424.		679.	1,103.
238	40 STACK CHAIRS (80%)	11/01/23	200DE	5.00	HY	17	5,458.				5,458.	1,092.		1,747.	2,839.
239	40 STACK CHAIRS (20%)	11/01/23	200DE	5.00	HY	17	1,365.				1,365.	273.		437.	710.
240	LAPTOP FOR NOEL IVERSON	11/01/23	200DE	5.00	HY	17	1,657.				1,657.	331.		530.	861.
241	2016 ACURA RDX SUV, BLACK	08/01/23	200DE	5.00	HY	17	20,948.				20,948.	4,190.		6,703.	10,833.
242	2018 ACURA RDX SUV, BLACK	09/01/23	200DE	5.00	HY	17	26,207.				26,207.	5,241.		8,386.	13,627.
243	PEP COLLIDER	01/01/23	200DE	5.00	HY	17	1,300.				1,300.	260.		416.	676.
244	PEP COLLIDER	02/01/23	200DE	5.00	HY	17	17,289.				17,289.	3,458.		5,533.	8,991.
245	PEP COLLIDER ROLLER A	05/01/23	200DE	5.00	HY	17	5,750.				5,750.	1,150.		1,840.	2,990.
246	3 RECEPTACLES IN WAREHOUSE	08/01/23	200DE	5.00	HY	17	2,443.				2,443.	489.		782.	1,271.
247	KITCHEN REMODEL	03/22/24	150DE	15.00	HY	19F	41,000.				41,000.			2,050.	2,050.
248	KITCHEN REMODEL	03/23/24	150DE	15.00	HY	19F	33,626.				33,626.			1,681.	1,681.
249	KITCHEN REMODEL	05/01/24	150DE	15.00	HY	19F	4,047.				4,047.			202.	202.
250	AIRTEK AC UNITS	08/26/24	150DE	15.00	HY	19F	9,000.				9,000.			450.	450.
251	NEW ROOF O'BREN	08/01/24	150DE	15.00	HY	19F	16,645.				16,645.			832.	832.
252	NEW ROOF COLUMBIA	08/01/24	150DE	15.00	HY	19F	15,166.				15,166.			758.	758.

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253	NEW FENCE O'BREIN	08/31/24	150DE	15.00	HY19E		5,174.				5,174.			259.	259.
254	FENCE, SHED, SLAB	08/31/24	150DE	15.00	HY19E		19,819.				19,819.			991.	991.
255	REMODEL	09/04/24	150DE	15.00	HY19E		3,110.				3,110.			156.	156.
256	REMODEL	09/23/24	150DE	15.00	HY19E		15,233.				15,233.			762.	762.
257	FLOORING FOR COLUMBIA APT B	09/30/24	150DE	15.00	HY19E		1,032.				1,032.			52.	52.
258	FENCING FOR OBRIEN	10/31/24	150DE	15.00	HY19E		2,418.				2,418.			121.	121.
259	REMODEL OF INTEGRITY HOUSE	11/04/24	150DE	15.00	HY19E		29,424.				29,424.			1,471.	1,471.
260	REMODEL OF INTEGRITY HOUSE	12/17/24	150DE	15.00	HY19E		24,820.				24,820.			1,241.	1,241.
261	ROOF INTEGRITY	12/31/24	150DE	15.00	HY19E		16,500.				16,500.			825.	825.
262	ROOF CALEB	12/31/24	150DE	15.00	HY19E		15,790.				15,790.			790.	790.
263	REGRIGERATOR INTEGRITY	05/31/24	200DE	7.00	HY19C		1,496.				1,496.			214.	214.
264	WASHER COLUMBIA	05/31/24	200DE	7.00	HY19C		1,668.				1,668.			238.	238.
265	TELEVISIONS OBRIAN	05/31/24	200DE	7.00	HY19C		1,188.				1,188.			170.	170.
266	CABINETS	06/19/24	200DE	7.00	HY19C		2,280.				2,280.			326.	326.
267	BUNK BEDS FOR INTEGRITY	11/30/24	200DE	7.00	HY19C		2,136.				2,136.			305.	305.
268	ESTES COMPUTER LAB	05/31/24	200DE	5.00	HY19E		3,934.				3,934.			787.	787.
269	LAPTOP FOR CHIP SKOWRON	05/17/24	200DE	5.00	HY19E		1,530.				1,530.			306.	306.
270	PA SPEAKERS	05/30/24	200DE	5.00	HY19E		4,398.				4,398.			880.	880.

428111 04-01-24

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

## 2024 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Convention	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
271	LAPTOPS FOR ESTES	06/10/24	200DE	5.00		HY19E	2,449.				2,449.			490.	490.
272	FLOORJACK FOR WAREHOUSE	06/17/24	200DE	5.00		HY19E	1,575.				1,575.			315.	315.
273	LAPTOP FOR RONNIE IN MARKETING	06/28/24	200DE	5.00		HY19E	2,880.				2,880.			576.	576.
274	LAPTOP FOR DAVID FLORES	07/31/24	200DE	5.00		HY19E	989.				989.			198.	198.
275	LAPTOPS FOR ESTES	07/31/24	200DE	5.00		HY19E	4,900.				4,900.			980.	980.
276	LAPTOPS FOR ESTES	08/31/24	200DE	5.00		HY19E	3,032.				3,032.			607.	607.
277	LAPTOP FOR DAN KINGERY	08/31/24	200DE	5.00		HY19E	1,943.				1,943.			389.	389.
278	LAPTOP FOR ROBIE LAWHON	09/11/24	200DE	5.00		HY19E	1,267.				1,267.			253.	253.
279	LAPTOP FOR COURTNEY	10/10/24	200DE	5.00		HY19E	1,491.				1,491.			298.	298.
280	CAMERA AND LENS	10/11/24	200DE	5.00		HY19E	3,196.				3,196.			639.	639.
281	TVS FOR ESTES	11/06/24	200DE	5.00		HY19E	2,417.				2,417.			483.	483.
282	LAPTOP FOR MIKE ETCHESON	11/20/24	200DE	5.00		HY19E	1,446.				1,446.			289.	289.
283	2021 SUBARU OUTBACK	06/13/24	200DE	5.00		HY19E	26,218.				26,218.			5,244.	5,244.
284	TESLA	09/09/24	200DE	5.00		HY19E	32,214.				32,214.			6,443.	6,443.
285	INSTALL 240 VOLT 50 AMP OUTLET IN REAR OF UNIT Y113	09/04/24	200DE	7.00		HY19C	2,500.				2,500.			357.	357.
286	PEP PORTABLE DATABASE	06/20/24	200DE	5.00		HY19E	6,932.				6,932.			1,386.	1,386.
	* TOTAL 990 PAGE 10 DEPR						142,906.			350,853.	2,792,053.	905,810.		291,855.	197,665.

428111 04-01-24

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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428111 04-01-24

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

PRISON ENTREPRENEURSHIP PROGRAM,  
INC.

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20-1384253

Part I Election To Expense Certain Property Under Section 179

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

1	Maximum amount (see instructions)	1,220,000.
2	Total cost of section 179 property placed in service (see instructions)	
3	Threshold cost of section 179 property before reduction in limitation	3,050,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	
6	(a) Description of property	(b) Cost (business use only)
7	Listed property. Enter the amount from line 29	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	
9	Tentative deduction. Enter the smaller of line 5 or line 8	
10	Carryover of disallowed deduction from line 13 of your 2023 Form 4562	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	
13	Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12	

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	
15	Property subject to section 168(f)(1) election	
16	Other depreciation (including ACRS)	1,132.

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2024	255,909.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	

Section B - Assets Placed in Service During 2024 Tax Year Using the General Depreciation System						
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		102,811.	5 YRS.	HY	200DB	20,563.
c 7-year property		11,268.	7 YRS.	HY	200DB	1,610.
d 10-year property						
e 15-year property		252,804.	15 YRS.	HY	150DB	12,641.
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System						
20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year	/		30 yrs.	MM	S/L	
d 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	291,855.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	

PRISON ENTREPRENEURSHIP PROGRAM,  
INC.

Form 4562 (2024)

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**Part V****Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)****24a** Do you have evidence to support the business/investment use claimed? ☐ **Yes** ☐ **No** **24b** If "Yes," is the evidence written? ☐ **Yes** ☐ **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
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**25** Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use**25****26** Property used more than 50% in a qualified business use:

		%						
		%						
		%						

**27** Property used 50% or less in a qualified business use:

		%			S/L -		
		%			S/L -		
		%			S/L -		

**28** Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1**28****29** Add amounts in column (i), line 26. Enter here and on line 7, page 1**29****Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
<b>30</b> Total business/investment miles driven during the year (don't include commuting miles)						
<b>31</b> Total commuting miles driven during the year						
<b>32</b> Total other personal (noncommuting) miles driven						
<b>33</b> Total miles driven during the year. Add lines 30 through 32						
<b>34</b> Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person?						
<b>36</b> Is another vehicle available for personal use?						

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
<b>39</b> Do you treat all use of vehicles by employees as personal use?		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use?		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.**Part VI** Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
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**42** Amortization of costs that begins during your 2024 tax year:


**43** Amortization of costs that began before your 2024 tax year**43****44** Total. Add amounts in column (f). See the instructions for where to report**44**