APPROPRIATIONS CONTRACT

THIS CONTRACT is e	xecuted on	, b	y the City	of Pompa	anc
Beach ("City") and HELPING	ADVANCE AND	NURTURE THE	DEVELO	PMENT	OF
YOUTH, INC., a Not For Profit	Corporation author	ized to do busines	s in the Sta	te of Flor	ida
("Recipient").					

WHEREAS, the City of Pompano Beach has appropriated for its current Fiscal Year 2025-2026 (October 1st through September 30th), the sum of <u>Fifteen Thousand Dollars (\$15,000.00)</u> to Recipient, to conduct a program entitled or activity as described in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description" (collectively the "Work") attached hereto and incorporated herein by reference, for the period beginning October 1, 2025 and ending September 30, 2026; and

WHEREAS, the City Commission finds that entering into this Contract serves a valid public purpose as Recipients shall perform or provide a service that is beneficial to the residents of the City, and that the City is currently not in a position to provide such services on its own;

WHEREAS, it is in the best interest of the City to enter into this contract with Recipient to provide the Work hereunder in accordance with the terms and conditions set forth herein; and

NOW, THEREFORE, in consideration of those mutual promises and the terms and conditions set forth hereafter, the parties agree as set forth below.

- 1. Contract Documents. This Contract consists of Exhibit "A", Recipients Requirements, Contractual Responsibilities and Program Description; Exhibit "B", Payment Schedule; and Exhibit "C", Insurance Requirements attached hereto, made a part hereof and incorporated herein, and all written change orders and modifications issued and approved by the City after execution of this Contract.
- 2. Term of Contract. This Contract shall be for the period beginning October 1, 2025 and ending September 30, 2026.
 - 3. Renewal. This Contract is not subject to renewal.
- 4. City's Maximum Obligation. City agrees to pay Recipient the aforementioned sum to provide the Work. Both parties agree that unless otherwise directed by City in writing, Recipient shall continue to provide the Work during the term of this Contract.
- 5. Payment of Program. City shall pay Recipient for performance of the Work in accordance with Payment Schedule set forth in Exhibit "B".
- 6. Disputes. Any factual disputes between City and the Recipient in regard to this Contract shall be directed to the City Manager for the City whose decision shall be final.

- 7. Contract Administrators, Notices and Demands.
- A. Contract Administrators. During the term of this Contract, the City's Contract Administrator shall be the City Manager or his/her written designee and Recipient's Contract Administrator shall be <u>Kirk Brown</u> or his/her written designee.
- B. Notices and Demands. A notice, demand or other communication hereunder by either party to the other shall be effective if it is in writing and sent via email, facsimile, registered or certified mail, postage prepaid to the representative(s) named below or is addressed and delivered to such other authorized representative at the address as that party from time to time may designate in writing and forward to the other as provided herein.

If to Recipient: Kirk Brown

Chief Executive Officer
2101 North Andrews Ave
Fort Lauderdale, FL 33311
Office: (954) 982-2442

Email: kbrown@handyinc.org

If to City: Greg Harrison, City Manager

100 W Atlantic Blvd.

Pompano Beach, FL 33060 Office: (954) 786-4601

Email: greg.harrison@copbfl.com

8. Ownership of Documents and Information. All information, data, reports, plans, procedures or other proprietary rights in all items, developed, prepared, assembled or compiled by Recipient as required for the Work hereunder, whether complete or unfinished, shall be owned by City without restriction, reservation or limitation of their use and made available at any time and at no cost to City upon reasonable written request for use and/or distribution as City deems appropriate provided City has compensated Recipient in accordance with the terms set forth herein. City's re-use of Recipient's Work product shall be at its sole discretion and risk if done without Recipient's written permission. Upon completion of all Work contemplated hereunder or termination of this Contract, Recipient shall promptly provide City's Contract Administrator copies of all of the above Work documents upon written request. Recipient may not disclose, use, license or sell any Work developed, created or otherwise originated hereunder to any third party whatsoever. The rights and obligations created under this paragraph shall survive termination or expiration of this Contract.

To the extent it is necessary for Recipient to perform the Work, City shall provide any information, data and reports in its possession to Recipient free of charge.

9. Termination. City shall have the right to terminate this Contract, in whole or in part, for cause, default or negligence on Recipient's part, upon ten (10) business days advance written notice to Recipient. Such Notice of Termination may include City's requests for certain product documents and materials, and other provisions regarding the Program.

If there is any material breach or default in Recipient's performance of any covenant or obligation hereunder which has not been remedied within ten (10) business days after

City's written Notice of Termination, City, in its sole discretion, may terminate this Contract immediately and Recipient shall not be entitled to receive further payment from the effective date of the Notice of Termination.

In the event the City fails for any reason to appropriate funds for this Contract, it shall be deemed terminated and City shall provide Recipient with ten (10) business days written notice. Upon receipt of said notice, Recipient shall be responsible for any and all expenses and/or legal obligations made after receipt of City's written notice from the City.

or obligation hereunder if such performance is prevented by fire, hurricane, earthquake, explosion, war, civil disorder, sabotage, accident, flood, acts of nature or by any reason of any other matter or condition beyond the control of either party which cannot be overcome by reasonable diligence and without unusual expense ("Force Majeure"). In no event shall economic hardship or lack of funds be considered an event of Force Majeure. Additionally, should funds not be utilized, and services or programs not provided within the specific required time period in this Contract due to circumstances outside the control of Recipient, including but not limited to, a Force Majeure event, City is under no obligation to amend or extend this Contract to provide the approved funding past the expiration of the performance period set forth in this Contract. Any amendment to this Contract for such purposes shall be at City's sole discretion, based upon its budget, available funds, and other factors it may deem relevant.

Recipient must follow all Federal, State, County, and City safety guidelines, including all CDC safety guidelines in effect during the term of the Program, including but not limited to social distancing, and personal protection equipment. Inability to conduct the Program and follow any and all required safety guidelines from the COVID-19 crisis or other similar emergency, or failure to follow such requirements, including but not limited to, social distancing, shall constitute grounds for immediate cancellation of this Agreement unilaterally by the City upon written notice, which may be provided via electronic mail.

- 11. Insurance. Recipient shall maintain insurance in accordance with Exhibit "C" throughout the term of this Contract.
- 12. *Indemnification*. Except as expressly provided herein, no liability shall attach to the City by reason of entering into this Contract.
- A. Recipient shall at all times indemnify, hold harmless and defend the City, its officials, employees, volunteers and other authorized agents from and against any and all claims, demands, suit, damages, attorneys' fees, fines, losses, penalties, defense costs or liabilities suffered by the City arising directly or indirectly from any act, breach, omission, negligence, recklessness or misconduct of Recipient and/or any of its agents, officers, or employees hereunder, including any inaccuracy in or breach of any of the representations, warranties or covenants made by the Recipient, its agents, officers and/or employees, in the performance of Work under this Contract. Recipient agrees to investigate, handle, respond to, provide defense for, and defend any such claims at its sole expense and to bear all other costs and expenses related thereto, even if the claim(s) is/are groundless, false or fraudulent. To the extent considered necessary by City, any sums due Recipient hereunder may be retained by City until all of City's claims for indemnification hereunder have been settled or otherwise resolved, and any amount withheld shall not be subject to payment or interest by City.

- B. Recipient acknowledges and agrees that City would not enter into this Contract without this indemnification of City by Recipient. The parties agree that one percent (1%) of the total compensation paid to Recipient hereunder shall constitute specific consideration to Recipient for the indemnification provided under this Paragraph and these provisions shall survive expiration or early termination of this Contract.
- 13. Sovereign Immunity. Nothing in this Contract shall be construed to affect in any way the rights, privileges and immunities of the City and its agents as set forth in §768.28, Florida Statutes. Nothing herein shall be construed as consent from either party to be sued by third parties.

14. Non-Assignability and Subcontracting.

A. Non-Assignability. This Contract is not assignable and Recipient agrees it shall not assign or otherwise transfer any of its interests, rights or obligations hereunder, in whole or in part, to any other person or entity without City's prior written consent which must be sought in writing not less than fifteen (15) days prior to the date of any proposed assignment. Any attempt by Recipient to assign or transfer any of its rights or obligations hereunder without first obtaining City's written approval shall not be binding on City and, at City's sole discretion, may result in City's immediate termination of this Contract whereby City shall be released of any of its obligations hereunder. In addition, this Contract and the rights and obligations herein shall not be assignable or transferable by any process or proceeding in court, or by judgment, execution, proceedings in insolvency, bankruptcy or receivership. In the event of Recipient's insolvency or bankruptcy, City may, at its option, terminate and cancel this Contract without any notice of any kind whatsoever, in which event all rights of Recipient hereunder shall immediately cease and terminate.

- B. Subcontracting. Prior to subcontracting for Work to be performed hereunder, Recipient shall be required to obtain the written approval of the City's Contract Administrator. If the City's Contract Administrator, in his/her sole discretion, objects to the proposed subcontractor, Recipient shall be prohibited from allowing that subcontractor to provide any Work hereunder. Although Recipient may subcontract Work in accordance with this Paragraph, Recipient remains responsible for any and all contractual obligations hereunder and shall also be responsible to ensure that none of its proposed subcontractors are listed on the Convicted Vendors List in accordance with the provisions of Paragraph 26 below.
- 15. Performance Under Law. Recipient, in performance of its duties under this Contract, agrees to comply with all applicable local, state and/or federal laws and ordinances including, but not limited to, standards of licensing, conduct of business and those relating to criminal activity.
- 16. Audit and Inspection Records. Recipient shall permit authorized representatives of the City to inspect and audit all data and records of the Recipient, if any, related to the Work being funded by this Contract until three (3) years after City's final payment under this Contract. Recipient agrees that such inspections and audits may include City's authorized representatives auditing Recipient's financial affairs at any time with no advance notice by City.

Recipient further agrees to include in all subcontracts hereunder a provision to the effect that the subcontractor agrees that City or any of its duly authorized representatives shall,

until three (3) years after City's final payment to Recipient, have access to and the right to examine any books, documents, papers and records of such subcontractor attendant to any subcontracted Work provided hereunder.

In the event Recipient receives fifty thousand dollars (\$50,000.00) or more from the City, the City reserves the right to request a copy of a Grant Auditing Report conducted in accordance with the Government Auditing Standards issued by the United States Comptroller General and the provisions of OMB Circular A-133 issued by the Office of Management and Budget, Executive Office of the President. If such a request is made by the City, all grant funds shall be shown via explicit disclosure in the annual financial statements and/or the accompanying notes to the financial statement. Upon City's written request, this Report shall be due within one hundred and twenty (120) days of the close of the City's fiscal year.

- 17. Adherence to Law. Both parties shall adhere to all applicable laws governing their relationship with their employees including, but not limited to, laws, rules, regulations and policies concerning worker's compensation, unemployment compensation and minimum wage requirements.
- 18. Independent Contractor. Recipient shall be deemed an independent contractor for all purposes, and employees of Recipient and all its contractors, subcontractors and the employees thereof, shall not in any manner be deemed to be employees of the City. As such, the employees of Recipient, its contractors or subcontractors, shall not be subject to any withholding for tax, social security or other purposes by City, nor shall such contractor, subcontractor or employee be entitled to sick leave, pension benefits, vacation, medical benefits, life insurance, workers or unemployment compensation or the like from City. Furthermore; nothing in this Contract shall be deemed to constitute or create a joint venture, partnership, pooling arrangement or other form of business entity between Recipient and City.
- 19. Mutual cooperation. Recipient recognizes its performance of Work hereunder is essential to the provision of vital public services and the accomplishment of the stated goals and mission of City. Therefore, Recipient shall be responsible to maintain a cooperative and good faith attitude in all relations with City and the public and shall actively foster a public image of mutual benefit to both parties. Recipient shall not make any statements or take any actions detrimental to this effort.

20. Public Records.

- A. The City of Pompano Beach is a public agency subject to Chapter 119, Florida Statutes. The Recipient shall comply with Florida's Public Records Law, as amended. Specifically, the Recipient shall:
- 1. Keep and maintain public records required by the City in order to perform the service.
- 2. Upon request from the City's custodian of public records, provide the City with a copy of requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided in Chapter 119, Florida Statutes or as otherwise provided by law.

- 3. Ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of the contract term and following completion of the Contract if Recipient does not transfer the records to the City.
- 4. Upon completion of this Contract, transfer, at no cost to City, all public records in its possession or keep and maintain public records required by the City as required hereunder. If Recipient transfers all public records to the City upon completion of this Contract, Recipient shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If Recipient keeps and maintains public records upon completion of this Contract, Recipient shall meet all applicable requirements for retaining public records. Upon request from the City's custodian of public records, all records stored electronically by Recipient must be provided to the City in a format that is compatible with the information technology systems of the City.
- B. Failure of the Recipient to provide the above described public records to the City within a reasonable time may subject Recipient to penalties under §119.10, Florida Statutes, as amended.

PUBLIC RECORDS CUSTODIAN

IF THE RECIPIENT HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE RECIPIENT'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT:

CITY CLERK 100 W. Atlantic Blvd., Suite 253 Pompano Beach, Florida 33060 (954) 786-4611 RecordsCustodian@copbfl.com

- 21. Governing Law; Venue. This agreement must be interpreted and construed in accordance with and governed by the laws of the State of Florida. The exclusive venue for any lawsuit arising from, related to, or in connection with this Agreement will be in the state courts of the Seventeenth Judicial Circuit in and for Broward County, Florida. If any claim arising from, related to, or in connection with this Agreement must be litigated in federal court, the exclusive venue for any such lawsuit will be in the United States District Court or United States Bankruptcy Court for the Southern District of Florida. BY ENTERING INTO THIS AGREEMENT, THE PARTIES HEREBY EXPRESSLY WAIVE ANY RIGHTS EITHER PARTY MAY HAVE TO A TRIAL BY JURY OF ANY CIVIL LITIGATION RELATED TO THIS AGREEMENT.
 - 22. Waiver and Modification.

- A. No waiver made by either party with respect to performance, manner, time, or any obligation of either party or any condition hereunder shall be considered a waiver of that party's rights with respect to the particular obligation or condition beyond those expressly waived in writing or a waiver of any other rights of the party making the waiver or any other obligations of the other party.
- B. No Waiver by Delay. The City shall have the right to institute such actions or proceedings as it may deem desirable for effectuating the purposes of this Contract provided that any delay by City in asserting its rights hereunder shall not operate as a waiver of such rights or limit them in any way. The intent of this provision is that City shall not be constrained to exercise such remedy at a time when it may still hope to otherwise resolve the problems created by the default or risk nor shall any waiver made by City with respect to any specific default by Recipient be considered a waiver of City's rights with respect to that default or any other default by Recipient.
- C. Either party may request changes to modify certain provisions of this Contract; however, unless otherwise provided for herein, any such changes must be contained in a written amendment executed by both parties with the same formality of this Contract.
- 23. No Contingent Fee. Recipient warrants that other than a bona fide employee working solely for Recipient, Recipient has not employed or retained any person or entity, or paid or agreed to pay any person or entity, any fee, commission, gift or any other consideration to solicit or secure this Contract or contingent upon or resulting from the award or making of this Contract. In the event of Recipient's breach or violation of this provision, City shall have the right to terminate this Contract without liability and, at City's sole discretion, to deduct from the Payment Schedule set forth in Exhibit B or otherwise recover the full amount of such fee, commission, gift or other consideration.
- 24. Attorneys' Fees and Costs. In the event of any litigation involving the provisions of this Contract, both parties agree that the prevailing party in such litigation shall be entitled to recover from the non-prevailing party reasonable attorney and paraprofessional fees as well as all out-of-pocket costs and expenses incurred thereby by the prevailing party in such litigation through all appellate levels.
- 25. No Third-Party Beneficiaries. Recipient and City agree that this Contract and other contracts pertaining to Recipient's performance hereunder shall not create any obligation on Recipient or City's part to third parties. No person not a party to this Contract shall be a third-party beneficiary or acquire any rights hereunder.
- 26. Public Entity Crimes Act. As of the full execution of this Contract, Recipient certifies that in accordance with §287.133, Florida Statutes, it is not on the Convicted Vendors List maintained by the State of Florida, Department of General Services. If Recipient is subsequently listed on the Convicted Vendors List during the term of this Contract, Recipient agrees it shall immediately provide City written notice of such designation in accordance with Paragraph 7 above.
- 27. Entire Contract. This document incorporates and includes all prior negotiations, correspondence, conversations, contracts or understandings applicable to the matters contained herein, and the parties agree that there are no commitments, contracts or understandings

concerning the subject matter of this Contract that are not contained in this document. Accordingly, it is agreed that no deviation from the terms hereof shall be predicated upon any prior representations or contracts, whether oral or written.

- 28. Headings. The headings or titles to Articles of this Contract are not part of the Contract and shall have no effect upon the construction or interpretation of any part of this Contract.
- 29. Counterparts. This Contract may be executed in one or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument. A photocopy, email or facsimile copy of this Contract and any signatory hereon shall be considered for all purposes as original.
- 30. Approvals. Whenever City approval(s) shall be required for any action under this Contract, said approval(s) shall not be unreasonably withheld.
- 31. Absence of Conflicts of Interest. Both parties represent they presently have no interest and shall acquire no interest, either direct or indirect, which would conflict in any manner with their performance under this Contract and that no person having any conflicting interest shall be employed or engaged by either party in their performance hereunder.
- 32. *Binding Effect.* The benefits and obligations imposed pursuant to this Contract shall be binding and enforceable by and against the parties hereto.
- 33. Employment Eligibility. By entering into this Contract, the Contractor becomes obligated to comply with the provisions of Section 448.095, Fla. Stat., "Employment Eligibility." This includes but is not limited to utilization of the E-Verify System to verify the work authorization status of all newly hired employees, and requiring all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. Failure to comply will lead to termination of this Contract, or if a subcontractor knowingly violates the statute, the subcontract must be terminated immediately. Any challenge to termination under this provision must be filed in the Circuit Court no later than twenty (20) calendar days after the date of termination. If this contract is terminated for a violation of the statute by the Contractor, the Contractor may not be awarded a public contract for a period of one (1) year after the date of termination.
- 34. Severability. Should any provision of this Contract or the applications of such provisions be rendered or declared invalid by a court action or by reason of any existing or subsequently enacted legislation, the remaining parts of provisions of this Contract shall remain in full force and effect.

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IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed the day and year hereinabove written.

CITY OF POMPANO BEACH

	By:REX HARDIN, MAYOR
	By:GREGORY P. HARRISON, CITY MANAGER
Attest:	
KERVIN ALFRED, CITY CLERK	(SEAL)
Dated:	
APPROVED AS TO FORM:	
MARK E. BERMAN, CITY ATTORNEY	

"RECIPIENT"

HELPING ADVANCE AND NURTURE THE DEVELOPMENT OF YOUTH, INC.

Witnesses:	(Print or type name of company here)
Dorsel	By: Michael D Wild Cag
Desille Samalles	Print Name: Michael D. Wild, Esq.
(Print or Type Name)	Title: Chairman
LINCY CLEPISIEP	
(Print or Type Name)	
STATE OF FLORIDA	
COUNTY OF Brown	
or \square online notarization, this $\underline{\mu}^{T}$ day of <u>Esq.</u> as <u>Chairman</u> of <u>HELPING ADV.</u> <u>YOUTH, INC.</u> , a Florida non for profit produced	knowledged before me, by means of physical presence , 2025, by Michael D. Wild, ANCE AND NURTURE THE DEVELOPMENT OF corporation. He is personally known to me or who has (type
of identification) as identification.	
NOTARY'S SEAL:	NOTARY PUBLIC, STATE OF FLORIDA
Notary Public State of Florida Andree Jeanne Garnier My Commission HH 365763 Expires 2/22/2027	Andree Jeanne Janue (Name of Acknowledger Typed, Printed or Stamped) HH 365763 Commission Number

Exhibit "A"

Recipients Requirements, Contractual Responsibilities and Program Description

- 1. RECIPIENT agrees to do as follows:
 - a) To accept the funds as appropriated in accordance with the terms of this Contract; and
 - b) If RECIPIENT intends on obtaining matching funds from another source at the time of the application for the CITY grant, the CITY reserves the right to request a copy of the matching fund contract along with a financial report; and
 - c) Prior to the award of any CITY funds, RECIPIENT shall provide documentation substantiating that RECIPIENT's corporation/organization falls within Section 501(c)(3) and Section 501(A) of the Internal Revenue Code and a W9 form; and
 - d) To abide by Chapter 119, Florida Statutes, as from time to time amended, and to comply with all applicable federal, state, county and municipal laws, ordinances, codes and regulations. Any difference between the above federal, state, county or municipal guidelines or regulations and this Contract shall be resolved in favor of the more restrictive guidelines; and
 - e) To utilize allotted funds under this Contract for the sole purpose set forth in this Contract FRAUDULENT USE OF CITY FUNDS SHALL RESULT IN THE TERMINATION OF THIS CONTRACT AND THE RECIPIENT SHALL BE OBLIGATED TO RETURN ALL THE FUNDS AWARDED BY THIS CONTRACT. IN ADDITION, THE CITY RESERVES ANY AND ALL RIGHTS AFFORDED UNDER THE LAW INCLUDING PROSECUTION FOR SUCH FRAUDULENT USE OF CITY FUNDS IN A COURT OF COMPETENT JURISDICTION. ALL UNSPENT FUNDS MUST BE RETURNED TO THE CITY; and
 - f) To return to the CITY within fifteen (15) days of demand all CITY funds paid to said RECIPIENT under the terms of this Contract upon the finding that the terms of any contract executed by the RECIPIENT of the provisions or any applicable ordinance or law have been violated by the RECIPIENT; and
 - g) To return to the CITY all funds expended for disallowed expenditures as determined by the CITY which includes, but not limited to:
 - i. Personal digital assistants (PDAs), cell phones, smartphones, and similar devices
 - ii. Service costs to support PDAs, cell phones, smartphones, and similar devices such as wireless services and data plans
 - iii. Proposal preparation including the costs to develop, prepare or write the proposal

- iv. Pre-award costs
- v. Out-of-state travel; non-local travel expenses
- vi. Gift cards
- vii. Purchase/lease of facilities or vehicles (e.g., buildings, buses, vans, cars)
- viii. Rentals one day only (written justification and approval needed for additional time)
- ix. Entertainment exceptions shall be made for community events (written justification and approval needed prior)
- x. Land acquisition
- xi. Furniture
- xii. Honorariums for presenters/speakers and any costs associated with travel expenses
- xiii. Kitchen appliances (e.g., refrigerators, microwaves, stoves, tabletop burners)
- xiv. Tuition/Scholarships
- xv. Capital improvements and permanent renovations (e.g., playgrounds, buildings, fences, wiring)
- xvi. Clothing or uniforms (written justification and approval needed)
- xvii. Project banquets/luncheons
- xviii. Costs for items/services already covered by indirect costs allocation (supplanting)
 - xix. Out of state college tours
 - xx. Out of county field trips
 - xxi. Alcohol
- xxii. Airfare
- xxiii. Boat rentals
- xxiv. Family incentives
- xxv. Car mileage
- xxvi. Stipends
- xxvii. Payroll taxes
- xxviii. Laboratory fees
- xxix. Computers
- xxx. Health benefits
- xxxi. Appliances and home goods (written justification and approval needed)
- xxxii. Digital Cameras
- xxxiii. Plaques
- xxxiv. Hotel Costs
- xxxv. Housing (written justification and approval needed based on programming)
- h) To maintain books, records and documents in accordance with generally accepted accounting procedures and practices to maintain adequate internal controls which, relating to the project(s), sufficiently and properly reflect all expenditures of funds provided by the CITY under this Contract; and

2) RECIPIENT agrees to provide the City Manager's Office or designee with a quarterly narrative and financial progress report, if applicable, on the program or activity described in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description.

Such reports shall include basic statistical information relative to the program or activity and a statement of expenditures made in each budget category and line item identified in the budget which is included in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description.

RECIPIENT shall receive the first wave of funding upon approval by the City Commission. A narrative and financial report shall be due on the dates listed below, as applicable.

However, following the completion of the first narrative and financial report and as indicated in Exhibit "B" Payment Schedule, the remaining distribution payment to the RECIPIENT shall be contingent upon prior receipt of the required progress narrative and financial report which is due during the preceding quarter. Narrative and financial reports for recipients receiving quarterly or monthly payments as indicated in Exhibit "B" Payment Schedule shall be due no later than the following dates:

```
    1<sup>st</sup> Quarterly Narrative & Financial Report (October/November/December) - February
    2<sup>nd</sup> Quarterly Narrative & Financial Report (January/February/March) - May
    1<sup>st</sup>
    3<sup>rd</sup> Quarterly Narrative & Financial Report (April/May/June) - August
    1<sup>st</sup>
    4<sup>th</sup> Quarterly Narrative & Financial Report (July/August/September) - September
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If RECIPIENT receives a lump sum payment for a one-time event or an award amount of five thousand dollars (\$5,000.00) or less, then the RECIPIENT shall be required to submit their narrative and financial report on a due date above as assigned by the CITY at a later date. The due date shall occur after the program or activity described in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description has concluded.

However, if any of the above dates fall on a weekend, then the due date shall be extended to the next business day, thereafter, as long as it does not exceed the term of this contact.

When submitting the quarterly narrative reports, RECIPIENT shall track and report to the CITY the following:

a. Current and final outcomes for the program based on the objectives provided in the RECIPIENT's grant application

- b. Include all available statistics and/or numbers regarding the demographics of individuals served by the program; such as the number of CITY of Pompano Beach residents served (include tracking method used)
 - i. Age
 - ii. Race
 - iii. Gender
 - iv. Zip Codes
 - v. Household income (if applicable)
- c. Describe accomplishments of the program to date
- d. Summary of the impact the program has had on its intended target audience; to include challenges faced, photographs of the project and success stories (How did the CITY's funding make a difference in a resident/recipient's life?)

Failure to provide the quarterly narrative reports shall render an organization ineligible to receive future payouts.

The approved budget for the RECIPIENT, included in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description and any changes in the budget which would affect expenditure of funds provided under the terms of this contract, must be approved in writing by the City Manager or his/her designee prior to the expenditure of such funds; provided, that nothing herein shall authorize or allow any expenditure or obligation of funds in excess of the total sum aforesaid.

RECIPIENT shall submit financial reports with all required documentation of expenditures (including original receipts/proofs of payments and itemized list).

Failure to provide a narrative and financial report as assigned by the CITY and/or failure to utilize all of the prior allocated funds from the first six months of the contract shall render an organization ineligible to receive additional payouts and render the organization ineligible for current and future funding from the CITY.

Failure from the RECIPIENT to provide a Quarterly or Lump Sum narrative and financial report shall forfeit all outstanding project funding and shall render the RECIPIENT ineligible for additional funding from the CITY.

- 4) RECIPIENT agrees that any funds provided by the CITY for the operation of the program or activity during the current CITY's fiscal year, which are residual funds remaining unspent or unencumbered by any existing (not contingent) legal obligation shall be returned to the CITY.
- 5) RECIPIENT shall not use the CITY's logo, materials, or testimony for promotion of the RECIPIENT's program without written authorization from the CITY Manager or its designee.

- 6) RECIPIENTS shall attend a mandatory Orientation provided by the CITY at a date to be determined by the CITY. Failure to attend said Orientation shall be grounds for termination of the contract.
- 7) In cases where a contract is terminated by the CITY for default by RECIPIENT, the CITY reserves the right to deny RECIPIENT's future applications for new funding for a time to be determined by the City Manager, and/or his or her designee, and/or the City Commission.
- 8) For contracts awarded for multiple projects, RECIPIENT shall provide separate reports for each project as outlined under Paragraph 2 above. CITY reserves the right to withhold payment if RECIPIENT fails to provide the reports as requested.

Organization Name: HELPING ADVANCE AND NURTURE THE DEVELOPMENT OF YOUTH, INC.

Program Funded: Handy YouthForce

Amount Funded: \$15,000.00

Program Description: Handy's YouthForce program delivers high-impact, year-round support to middle school students at Pompano Beach Middle School. Designed to build both academic and workforce readiness, the program combines daily afterschool tutoring, mentoring, life skills training, and social-emotional development in a consistent, structured setting. YouthForce integrates two specialized components: Resume4Life, which introduces students to career pathways and teaches foundational job-readiness skills; and the Best Buy Teen Tech Center, a mobile makerspace offering hands-on experiences in areas like 3D printing, coding, animation, and digital design. These experiences give students access to tools and training typically out of reach, helping them build confidence, spark interests, and develop skills that translate to long-term academic and career success.

This comprehensive approach creates meaningful impact at a critical stage, helping students strengthen their future trajectories through exposure, mentorship, and opportunity.

Form Name: Submission Time: Browser: IP Address: Unique ID: Location: City of Pompano Beach Nonprofit Partnership Application May 2, 2025 11:27 am Chrome 135.0.0.0 / OS X 134.56.45.251 1340509985

26.1355, -80.2347

About Your Organization					
Which Fiscal Year Is Your Organization Applying For?	2025-2026				
Full Name of Nonprofit:	(Handy) Helping Advance And Nurture The Development Of Youth, Inc.				
Mission of Nonprofit:	Handy's mission is to create supportive communities where youth and families achieve self-sufficiency.				
Brief Overview of Nonprofit:	Celebrating 40 years of service, Handy (Helping Advance and Nurture the Development of Youth) is a leading youth development nonprofit dedicated to creating supportive communities where youth and families achieve self-sufficiency. Founded in 1985, Handy provides wraparound services for youth who are in foster or relative care, experiencing homelessness, or living in low-income households.				
	Through its cornerstone LIFE Program (Life Skills, Independent Living, Foundation Building, and Education/Employment), Handy offers over 67 services across five pillars: youth development, workforce development, mental health services, housing support, and education transitions. Each youth receives individualized support through a team that includes case managers, therapists, and workforce development staff.				
	With a 40,000-square-foot facility and programming based at partner school sites such as Pompano Beach Middle School,				

Type of Organization:	Human Services
Nonprofit Website:	www.Handyinc.org
Federal Tax ID Number:	59-2507617
Which funding priority/sub pillar does your nonprofit qualify for?	Workforce Excellence: Education

Handy delivers afterschool and summer programs, STEAM activities through the Best Buy Teen Tech Center, academic support, and career pathway development. Annually, Handy

serves more than 1,200 youth ages 9-25, equipping them with the tools to graduate, gain employment, and thrive in adulthood.

How does your program/event(s) fit the funding priority/sub pillar?

Handy's YouthForce program at Pompano Beach Middle School aligns directly with the City of Pompano Beach's Workforce-focused Excellence education pillar by preparing at-promise youth for academic achievement, personal development, and long-term workforce readiness. YouthForce provides year-round, afterschool programming that includes academic tutoring, mentoring, social-emotional learning, and life skills development in a safe and supportive environment.

YouthForce is complemented by two integrated initiatives: Resume4Life, which introduces students to career pathways, job readiness, and early employment preparation; and the Best Buy Teen Tech Center, delivered through a mobile makerspace brought directly to campus. This mobile tech lab provides access to 3D printers, animation tools, music production, and other STEAM-based learning experiences. It fosters hands-on exploration, cognitive development, and creative problem-solving, all vital to future workforce success.

With support from the City of Pompano Beach, Handy will sustain mentor capacity at Pompano Beach Middle School and enhance workforce programming through hands-on technology tools, Resume4Life materials, and career-connected field experiences. This support helps students develop critical skills, increase exposure to future opportunities, and build stronger ties to their community.

Statement of Need:

Youth in Pompano Beach face systemic barriers that directly impact their ability to succeed academically and enter the workforce. At Pompano Beach Middle School, 100% of students are economically disadvantaged (Florida Department of Education, 2022-2023). Many are in foster care or living with relatives in households earning 100% below the Federal Poverty Line. In Broward County, over 3,000 youth experience homelessness or unstable housing annually, and the region is seeing a rise in chronic absenteeism, with Pompano Beach Middle reporting rates as high as 34%, well above county averages. These conditions put students at risk of falling behind academically and becoming disconnected from future employment pathways.

The Workforce-focused Excellence funding priority calls for early, consistent interventions that build future-ready skills. Yet few middle school programs offer holistic, sustained exposure to academic support, technology, and career pathways in one accessible setting. Handy's YouthForce program is designed to meet this exact need.

Through daily afterschool programming, YouthForce builds protective factors and academic confidence while introducing students to career readiness through Resume4Life and hands-on STEAM workshops delivered by the mobile Best Buy Teen Tech Center. This integrated model brings real-world tools, from 3D printing to coding and digital media, directly to students on their campus, ensuring that at-promise youth are not only supported today, but also actively prepared to thrive in the workforce of tomorrow.

Program/Event Information #1				
Will your organization be hosting the program/event on City property?	No			
Which are you applying for? (Program/Event)	Program			
Program/Event Name:	Handy YouthForce			
Type of Program/Event:	Nonprofit Program/Seminar/Workshop			

Share an executive summary of the program/event:

Handy's YouthForce program delivers high-impact, year-round support to middle school students at Pompano Beach Middle School. Designed to build both academic and workforce readiness, the program combines daily afterschool tutoring, mentoring, life skills training, and social-emotional development in a consistent, structured setting.

YouthForce integrates two specialized components: Resume4Life, which introduces students to career pathways and teaches foundational job-readiness skills; and the Best Buy Teen Tech Center, a mobile makerspace offering hands-on experiences in areas like 3D printing, coding, animation, and digital design. These experiences give students access to tools and training typically out of reach, helping them build confidence, spark interests, and develop skills that translate to long-term academic and career success.

This comprehensive approach creates meaningful impact at a critical stage, helping students strengthen their future trajectories through exposure, mentorship, and opportunity.

Elaborate on your program/event Program Goals and Objectives: goals and objectives. How do you plan on using the funding to solve the problem?

The goal of Handy's YouthForce program at Pompano Beach Middle School is to prepare middle school students for future academic and workforce success by building foundational skills, strengthening school engagement, and providing early exposure to career pathways and technology.

Objectives include:

- -Deliver daily after school academic support, mentoring, and life skills training to 50+ students during the school year.
- -Facilitate Resume4Life sessions twice per month focused on career exploration, workplace skills, and employment preparation.
- -Provide monthly hands-on STEAM workshops through the mobile Best Buy Teen Tech Center, engaging students in activities like coding, 3D printing, and digital media.
- -Strengthen student confidence, communication, and problem-solving abilities through consistent adult mentorship and experiential learning.
- -Track growth in key skills using pre/post assessments and mentor observations.

Funding from the City of Pompano Beach will support:

- -Hiring and training additional mentors and program staff to enhance capacity and maintain safe, effective student-to-staff ratios.
- -Workforce development supplies and curriculum materials for Resume4Life sessions.
- -Equipment, kits, and instructional tools used during Best Buy Teen Tech Center workshops.
- -Transportation for career-related field trips and STEAM experiences that extend learning beyond the classroom.

of your program/event?

What are the proposed outcomes Handy's YouthForce program is designed to produce meaningful, measurable outcomes that position Pompano Beach middle school students for long-term success in school and the workforce. Anticipated outcomes include:

- -Increased student engagement: At least 85% of participating students will attend programming consistently and report feeling more connected to school and supported by caring adults.
- -Improved workforce readiness skills: At least 80% of students will demonstrate growth in key soft skills such as communication, critical thinking, collaboration, and self-advocacy, as measured through pre- and post-program assessments and mentor evaluations.
- -Expanded exposure to STEAM and career pathways: 100% of students will participate in Resume4Life workshops and mobile Best Buy Teen Tech Center activities, gaining hands-on experience with tools and concepts aligned with emerging career fields.
- -Increased confidence and self-efficacy: Students will report increased confidence in their ability to succeed in school and envision a future career path.
- -Mentorship impact: Students will build positive, lasting relationships with trained mentors who help guide academic progress and future planning.

These outcomes will be tracked using attendance logs, skill assessments, student and mentor surveys, and session participation records, ensuring accountability and continuous program improvement.

Share the primary methodology by which you will measure the outcomes of your program/event: Handy uses a mixed-method evaluation model to track progress and outcomes in YouthForce. Our system includes:

- -Pre- and Post-Assessments to measure student growth in soft skills such as communication, self-advocacy, and goal setting.
- -Mentor evaluations that document weekly observations of student engagement and development.
- -Participation tracking for all Resume4Life and Best Buy Tech Center sessions, including skills practiced and hours completed.
- -Student surveys that gather qualitative feedback on interest, confidence, and understanding of career options.
- -Activity logs that document use of STEAM equipment and participation in field-based career learning experiences.
- -Data is reviewed quarterly by program leadership to assess progress, adjust implementation, and report outcomes aligned with workforce readiness benchmarks.

Estimated total number of individuals expected to attend your program/event:

1-50

Please specify the number of City 50 of Pompano Beach residents your organization will serve if the program/event is funded:

population you are impacting with this program/event:

Describe the demographics of the The students served through Handy's YouthForce program at Pompano Beach Middle School are primarily youth ages 11 to 14, enrolled in grades 6-8. 100% of participants are economically disadvantaged, with many residing in households earning 100% below the Federal Poverty Line. A significant portion are in foster care, living with relatives, or experiencing housing instability.

> The student body reflects the racial and ethnic diversity of the local community, with a majority identifying as Black/African American and Hispanic/Latino. These students face systemic barriers to academic and career success, including limited access to technology, enrichment programs, and mentorship. YouthForce is designed to meet their needs with consistent, culturally responsive support that promotes education, exposure to workforce pathways, and long-term opportunity.

Include a description of the geographic area your program/event(s) will serve and how it will impact the area:

This program specifically serves youth attending Pompano Beach Middle School, located within the City of Pompano Beach. By embedding all activities directly on campus, the program removes common barriers to access and reaches students in the neighborhoods where the need is greatest.

The impact extends beyond individual student outcomes. As more youth engage in high-quality, skills-based programming during their middle school years, the city benefits from increased school engagement, reduced risk behaviors, and a stronger foundation for long-term workforce participation. This early investment builds momentum toward a more educated, career-ready community and supports the City's broader efforts to foster opportunity and economic growth from within.

How does your organization specifically market your program/event to City of Pompano Beach residents?

Handy promotes the YouthForce program through direct collaboration with Pompano Beach Middle School staff, counselors, and administrators, who help identify and refer eligible students. Program information is shared with families through school communication channels, flyers, and parent-teacher events.

In addition, Handy leverages its partnerships with local housing providers, community organizations, and youth-serving agencies within Pompano Beach to reach families who may benefit from the program. Outreach efforts are culturally responsive and tailored to meet families where they are, including bilingual communication, in-person engagement, and school-based presence that builds trust over time.

This grassroots, relationship-driven approach ensures the program is visible, accessible, and responsive to the unique needs of the Pompano Beach community.

How does a City of Pompano Beach resident access the services/program your nonprofit provides?

Pompano Beach residents can access the YouthForce program through direct enrollment at Pompano Beach Middle School. Students are referred by school staff or may express interest during on-campus orientations and outreach events. Handy's team is embedded on-site, making it easy for students to join and participate in afterschool activities without needing transportation or additional paperwork beyond school-based consent.

Families in the community can also connect with Handy through referrals from partner organizations or by contacting our team directly. Because the program is delivered fully on campus, access is streamlined, familiar, and free of logistical barriers, ensuring students can consistently benefit from services where they already spend their day.

Start Date of Program/Event:	Jul 01, 2025
End Date of Program/Event:	Jun 30, 2026
Does your program/event have a start time/end time?	No
Name of Program/Event Venue:	Handy's YouthForce
Address of Program/Event Venue Location:	310 NE 6th Street Pompano Beach, FL 33060
Attire of Program/Event (select the one that best applies):	Casual

List any benefits or partnership opportunities the City of **Pompano Beach receives:**

Handy has become a trusted leader in youth development and workforce readiness across Broward County. As a valued funding partner, the City of Pompano Beach will receive public recognition across multiple platforms throughout the program year.

The City's support will be highlighted on Handy's social media channels, reaching over 6,000 followers and generating significant local visibility.

Acknowledgement will also be included in Handy's annual report, distributed to over 6,000 members, donors, nonprofit partners, and board members.

Additional opportunities for recognition include inclusion in press releases, event signage, and community engagement activities where City investment has a visible impact.

This partnership not only supports workforce development in Pompano Beach, it ensures the City is recognized as an active investor in its youth and future workforce.

Total dollar amount of the overall 3193557 program/event budget:

Total dollar amount being requested from the City:

20000

How will your organization use the City of Pompano Beach funding? City funding will be used to enhance Handy's YouthForce program at Pompano Beach Middle School, which equips middle school students with the academic support, life skills, and career exposure needed for long-term workforce success. Specifically, funds will support:

- -Staffing and personnel costs to ensure trained mentors and program staff are available to deliver daily academic and workforce-readiness programming.
- -Resume4Life workforce materials, including career exploration curriculum, mock interview tools, and job-readiness resources tailored to middle school students.
- -STEAM and technology kits for Best Buy Teen Tech Center mobile workshops, allowing students to engage in hands-on learning in areas like robotics, coding, 3D printing, and digital design.
- -Transportation and field trip support for students to participate in real-world, career-connected learning experiences outside the classroom. Nutritious snacks and meals provided during off-site workforce learning activities, ensuring all students can fully participate in extended programming without barriers related to food insecurity or long program hours.

These investments will contribute to increased student engagement, deeper skill-building, and greater exposure to career pathways, all delivered in a safe, supportive, and equitable learning environment.

Are you applying for a second program/event?

No

Additional Activities

Are there any additional activities associated with the primary sponsorship event (Examples include VIP event, Kickoff event, Awards Ceremony, Thank You/Recognition Party, etc...)

No

Additional Information

What are your organization's credentials? Tell us why your organization does it better than anyone else.

Handy brings four decades of experience delivering youth-centered services with a deep understanding of how to create lasting change, particularly for students navigating poverty, trauma, or instability. What distinguishes Handy is not just our longevity, it's our consistency and credibility within the community.

We've been embedded in the City of Pompano Beach for years, trusted by schools, families, and partners alike. Our team is made up of educators, social workers, and career coaches who take a whole-student approach to development. Many of our staff share lived experiences with the youth we serve, which allows us to build trust quickly and design programming that resonates.

We don't operate in isolation. Handy has built strong, sustained partnerships with institutions like Microsoft Philanthropies, Best Buy, and the Children's Services Council of Broward County to bring national resources to local youth. Our programs are designed to evolve with the workforce landscape, ensuring our students aren't just supported, they're competitive.

Where others offer temporary support, Handy builds long-term outcomes. We are not only preparing youth for high school graduation, we are preparing them for jobs, for college, and for lifelong success.

Other than the program/event you are applying for, how is your organization serving the residents of the City of Pompano Beach? Handy is proud to offer 67 diverse services to 50 youth in Pompano Beach, anchored by our five foundational pillars: youth development, workforce development, education transitions, mental health support, and affordable housing. Additionally, the Keeping Families Together program addresses mental health challenges by offering preventive case management services to families. Identified by the Broward Sheriff's Office as at risk of losing their children to the child welfare system due to housing issues, these families benefit significantly from our support. All participants in Handy's programs undergo individual and/or group intake assessments, ensuring that each person receives tailored guidance through the most suitable program(s) to meet their specific needs.

Any other information you wish to share?

President/CEO/Executive Director:

Handy is committed to addressing the challenges faced by youth through exposure to career pathways and additional educational support, paving the way for their success. Our services enhance academic performance and foster creativity, preparing youth for a post-secondary environment, whether in education or a career. Activities such as video and music production not only provide hands-on learning experiences but also expose youth to less explored fields.

City of Pompano Beach Funding History						
Has your organization been funded before by City of Pompano Beach?	Yes					
If yes, when was the most recent year?	2024					
What was the name of program/event funded?	Life Program					
How much was the funding for this program/event?	20000					
Requested Budget Informati	ion					
What is your organization's operational budget?	5313063					
What is the total value your nonprofit is applying for?	20000					
If you are not awarded the full funding requested for your program/event(s), will you be able to complete your project?	Yes					
About Your Staff and Leader	rship					
Total Number of Employees:	55					
Full Name of	Kirk Brown					

Include your
President/CEO/Executive
Director's biography:

Kirk Brown is the Chief Executive Officer at Handy, Inc. in Broward County. He a local graduate of ELY High School. He earned a Bachelor's of Arts degree in Criminal Justice and a Bachelors of Arts Degree in Sociology from Florida Atlantic University and a Masters in Social Work from Barry University. He has twenty-five years of experience working with economically disadvantaged families. Mr. Brown helped to guide the development of the Handy's program and actively recruited youth, community partners, donors and policy personnel to become involve in the mission of educating, empowering and embracing communities of need. Mr. Brown has served on the National Governor's Policy Academy, taught as a Professor of Social Work at FSU, was the Statewide Director of Independent Living for DCF, was also Policy and Performance Analyst with DEO and the Lead Behavioral Management personnel with Big Bend Community Based Care. He enjoys creating community partnerships in order to secure more options in employment, education, mental health and housing for youth and relative care families. Kirk Brown is very involved in program planning and operations and is a community liaison that serves on various boards and committees. Mr. Brown is married and is the proud father of 4 children, Kirk Jr., Malachi, Daxton, and Zoey. Kirk's leadership example is Marcus Aurelius: "If someone is able to show me that what I think or do is not right, I will happily change, for I seek the truth, by which no one was ever truly harmed. It is the person who continues in his self-deception and ignorance who is harmed."

About Tour Board of Directo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Total Board Members:	31
How many board members contribute financially to the organization?	31
Is there a formal give/get policy for board members?	Yes
If so, what is the required amount?	10000

About Your Partnerships and Contributors

About Your Board of Directors

Does your organization have any
programmatic collaborations with
other community partners? If so,
please list them and provide a
brief description of their
involvement with your
organization.

Best Buy - Best Buy staff support the delivery of STEAM and technology curricula through hands-on instruction and mentorship.

Scholarship Plug - Provides direct linkage to scholarship opportunities, helping youth identify and secure funding for postsecondary education.

What other funders have supported your organization within the past year? Please include their levels of contribution.

Children's Services Council: \$1,123,324

Frederick A DeLuca: \$212,000

Moss Foundation: \$170,000

Jim Moran Foundation: \$160,000

Financial Information

How does your nonprofit organization currently undergo financial scrutiny and assurance? Please select from one of the applicable options:

External Financial Audit conducted by an professional auditing firm

Upload your documents: All items in this section are mandatory.

Itemized Program/Event Budget -Please provide a budget ONLY for the program/event you are applying for.

Itemized Program/Event Budget - https://www.formstack.com/admin/download/file/17949904188

Agency Operational Budget

https://www.formstack.com/admin/download/file/17949904189

Agency External or Internal Audit and/or a combined PDF with your organization's Balance Sheet and P&L.

Agency External or Internal Audit https://www.formstack.com/admin/download/file/17949904190

IRS 501(c)(3) Determination

W9

Letter

https://www.formstack.com/admin/download/file/17949904191

Articles of Incorporation

https://www.formstack.com/admin/download/file/17949904192

https://www.formstack.com/admin/download/file/17949904193

Most Recent 990 Form	https://www.formstack.com/admin/download/file/17949904194						
List of Board of Directors	https://www.formstack.com/admin/download/file/17949904195						
Matching Gift Documentation	on						
Does Your Organization Receive Matching Funds?	No						
President/CEO/Executive Dir	President/CEO/Executive Director Contact Information						
Name	Kirk Brown						
Title	Chief Executive Officer						
Email	kbrown@handyinc.org						
Phone Number	(954) 982-2442						
Mailing Address	2101 North Andrews Ave Fort Lauderdale, FL 33311						
Primary Nonprofit Contact							
Name	Kirk Brown						
Title	Chief Executive Officer						
Email	kbrown@handyinc.org						
Phone Number	(954) 982-2442						

Certification and Authorization

I HEREBY CERTIFY BY READING AND SELECTING EACH STATEMENT LISTED BELOW THAT THE:

Applicant certifies that information contained in this application is complete and accurate. = Select to Agree

Applicant certifies that their organization is a Not For Profit Corporation authorized to do business in the State of Florida. = Select to Agree

Applicant has read and understands the application instructions and requirements of the program. = Select to Agree Applicant agrees that if recommended for funding, the nonprofit will attend the Mandatory Nonprofit Orientation Workshop and that they will participate in a Nonprofit Program Services Fair as required by the City. = Select to Agree

Applicant certifies that the awarded program/event(s) will serve City of Pompano Beach residents. = Select to Agree Applicant acknowledges that a recommended award letter is subject to commission approval. = Select to Agree Applicant acknowledges that only an executed contract with the City authorizes the initiation of program/event services or activities and incurring expenditures. = Select to Agree Applicant acknowledges that narrative and financial reporting will be required and the organization will meet the assigned deadlines as set forth by the City. = Select to Agree

Applicant acknowledges that the program/event(s) will be completed by the end of the contract term. = Select to Agree Applicant certifies that the organization has the capacity to comply with all requirements of the program/event(s). = Select to Agree

Applicant will not use funds for disallowed expenditures as set forth by the City. = Select to Agree

Applicant confirms that the organization has an anti-discrimination policy. = Select to Agree

Applicant acknowledges that the program/event(s) submitted will not be eligible to receive funding for if the program/event(s) receives a separate grant from the City for the same program. = Select to Agree

Applicant acknowledges that current policies for general liability, sexual molestation, automobile and workers compensation insurance are required to contract with the City. = Select to Agree Applicant understands that the submission of their funding request does not guarantee the organization will be selected to receive funding. = Select to Agree

Applicant acknowledges that all information submitted in the partnership application along with any email or correspondence you provide to the City of Pompano Beach becomes a public record and may be subject to disclosure to anyone who requests it under the State's Public Records Laws, to another government agency as required by state or federal law; and/or in response to a court or administrative order, subpoena or search warrant. Your application may be subject to inspection and copying by the public, unless an exception in law exists. = Select to Agree



In reply refer to: 4077550279 Aug. 31, 2012 LTR 4168C 0 59-2507617 000000 00

00035713

BODC: TE

HELPING ABUSED NEGLECTED
DISADVANTAGED YOUTH-HANDY-INC
501 NE 8TH ST
FT LAUDERDALE FL 33304-2728



019379

Employer Identification Number: 59-2507617
Person to Contact: Sophia Brown
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your July 09, 2012, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in December 1985.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

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

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before	you begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.						-				
	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's n entity's name on line 2.)	ame	on lin	e 1, a	nd	enter the	e bu	sine	ss/dis	regan	ded
	ELPING ADVANCE AND NUTURE THE DEVELOPMENT OF YOUTH INC										
	2 Business name/disregarded entity name, if different from above.										****
	f/k/a HELPING ABUSED NEGLECTED DISADVANTAGED YOUTH, INC										
3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. Individual/sole proprietor					4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) (Applies to accounts maintained outside the United States.) e and address (optional)						
	7 List account number(s) here (optional)										
Pan	Taxpayer Identification Number (TIN)										
		Soci	rial e	soudi	hr m	umber					
backur	our TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid withholding. For individuals, this is generally your social security number (SSN). However, for a	-	Jan 3		1	CHILDER	7	7-		1	
resider	t alien, sole proprietor, or disregarded entity, see the instructions for Part I. later. For other			-	-		-				
entities	, it is your employer identification number (EIN). If you do not have a number, see How to get a	or									
TIN, lai	er.		mployer Identification number								
Note: 1	f the account is in more than one name, see the instructions for line 1. See also What Name and			Ī			T	T		T	i
Numbe	r To Give the Requester for guidelines on whose number to enter.	5	9	- [:	2	5 0	7	6	1	7	
Part	II Certification					11				1	
Under	penalties of perjury, I certify that:										
2. I am Serv no lo	number shown on this form is my correct taxpayer identification number (or I am waiting for a number ont subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have rice (IRS) that I am subject to backup withholding as a result of a failure to report all interest or divide inger subject to backup withholding; and	ot b	een r	otifie	ed l	by the	Inte	mai ied	Reve	enue nat i a	am
	a U.S. citizen or other U.S. person (defined below); and										
	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is con										
becaus acquisi other th	ation instructions. You must cross out item 2 above if you have been notified by the IRS that you are one you have failed to report all interest and dividends on your tax return. For real estate transactions, item items to an individual retirement an interest and dividends, you are not required to sign the certification, but you must provide your correct an interest and dividends, you are not required to sign the certification, but you must provide your correct.	2 do arran	oes n	otap ent(II	poly RA)	, Form and, o	ortg gene	gage erali	inter	est p	ts
Sign Here	Signature of U.S. person Waxing Brown: Date					202					- 1
Gen	eral Instructions New line 3b has been add				-			ugh	entit	y is	-

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

HANDY INC Article of Incorporation

RESTATED ARTICLES OF INCORPORATION OF HELPING ABUSED, NEGLECTED, DISADVANTAGED YOUTH, INC. Document #N07971

Pursuant to the provisions of section 617.1007, Florida Statutes, this Florida Not For Profit Corporation restates it articles in full as follows:

Article I

The name of the corporation is:

HELPING ABUSED, NEGLECTED, DISADVANTAGED YOUTH, INC.

Article II

The principal place of business address:

501 NE 8th STREET, FORT LAUDERDALE, FLORIDA 33304

The mailing address of the corporation is:

501 NE 8th STREET, FORT LAUDERDALE, FLORIDA 33304

Article III

The specific purpose for which this corporation is organized is are exclusively religious, charitable, scientific, literary and educational within the meaning of section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue law, specifically:

TO ASSIST ABUSED, NEGLECTED, DISADVANTAGED YOUTH IN BROWARD COUNTY FLORIDA

Article IV

The manner is which trustees are elected or appointed is:

THE METHOD OF ELECTION AS STATED IN THE BYLAWS



Article V

The name and Florida street address of the registered agent is:

The date of adoption of the amendment(s) was:____

AGENTS AND CORPORATIONS, INC. 300 5TH AVENUE SOUTH SUITE 101-330 NAPLES, FLORIDA 34102 US

Article VI

Notwithstanding any other provisions of these articles, this organization shall not carry on any activities not permitted to be carried on by an organization exempt from Federal income tax under section 501 (c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue law.

Article VII

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501 (c)(3) of the Internal Revenue Code of 1986, or corresponding section of any future Federal tax code, or shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the organization is then located, exclusively for such purposes.

Additionally, Article III is amended to now read:

APRIL 16, 2008

	bers or members entitled to vote on the amendment. There) adopted by the board of trustees.	h
HELPING ABUSED,	NEGLECTED, DISADVANTAGED, YOUTH (HANDY), INC.	
Ву:	•	
Title:	Secretary	_
Name:	Chuck Pisciotta	_
	C.P.	
Signature:		

ARTICLES OF INCORPORATION OF

HELPING ABUSED, NEGLECTED, DEPENDENT YOUTH, (HANDY.), INCLEED

A FLORIDA NOT FOR PROFIT CORPORATION

SECRETARY WASTESTE

The name of this Corporation is HELPING ABUSED, NEGLECTED, DEPENDENT YOUTH (H.A.N.D.Y.), INC.

ARTICLE TWO

This is a non-profit corporation organized solely for general charitable purposes pursuant to the Florida Corporations Not For Profit law set forth in Chapter 617 of the Florida Statutes.

ARTICLE THREE

- (a) This organization is formed exclusively for charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1954, as amended.
- (b) The purposes of this organization include: increasing public awareness of the plight of abused and neglected children in Broward County and the State of Florida; to assist children adjudicated as dependent by the courts of Florida and to facilitate the exchange of information regarding services, available to dependent children in the State of Florida.
- (c) This corporation shall not, as a substantial part of its activities, carry on propaganda or otherwise attempt to influence legislation; nor-shall it participate or intervene in any political campaign on behalf of any candidate for public office.

ARTICLE FOUR

This corporation shall have a perpetual existence.

ARTICLE FIVE

The corporation shall have a membership distinct from the board of trustees. The authorized number and qualifications of the members of the corporation, the manner of their admission, the different classes of membership, if any, the voting and other rights and privileges of members, and their liability for dues and assessments and the method of collection thereof, shall be set forth in the bylaws.

ARTICLE SIX

- (a) The principal office of this corporation is to be located in Broward County, Florida.
- (b) The name and address of this corporation's registered agent is Edward Pudaloff at 220 El Dorado Parkway, Plantation, Floreda 33317.

ARTICLE SEVEN

The names and residence addresses of the subscribers of the subscriber

Edward Pudaloff 220 El Dorado Parkway Plantation, Florida 33317

Irving Reisfeld 730 S.W. 68 Avenue Pembroke Pines. Florida 33023

Leslie Bennis 6008 Linden Circle Tamarac, Florida 33319

Patsy Birnbaum 3520 N. 54 Avenue Hollywood, Florida 33021

Elizabeth Smith 1260 N.E. 40 Street Pompano Beach, Florida 33064

Page 2 of 8

ARTICLE EIGHT

(a) BOARD OF TRUSTEES. The powers of this corporation shall be exercised, its properties controlled, and its affairs conducted by a board of trustees. The number of trustees of the corporation shall be seven (7); provided, however, that such number may be changed by a bylaw duly adopted by the membership.

The trustees named herein as the first board of trustees shall hold office until the first meeting of members, to be held on October 23, 1985, at 8 o'clock p.m. at the Broward County, Courthouse, 601 S.E. Sixth Street, Ft. Lauderdale, Florida, at which time an election of trustees shall be held.

Trustees elected at the first annual meeting and at all times thereafter, shall serve for a term of two (2) years until the first annual meeting of members following the election of trustees and until the qualification of successors in office, except that three of the trustees elected at the first annual meeting shall serve an initial term of one (1) year. Thereafter, staggered terms shall be maintained.

Annual meetings shall be held at 8 o'clock p.m. on the fourth Tuesday in October of each year at the principle office of the corporation or such place as the board of trustees may from time to time designate by resolution.

Any action required or permitted to be taken by the board of trustees under any provision of law may be taken without a meeting, if all members of the board shall individually or collectively consent in writing to such action. Such consents shall be filed with the minutes of the proceedings of the board, and any such

action by written consent shall have the same force and effect as if taken unanimous vote of the trustees.

The names and addresses of such first members of the board of trustees are as follows:

Edward Pudaloff

220 El Dorado Parkway

Plantation, Florida 33317

Irving Reisfeld
730 S.W. 68 Avenue
Pembroke Pines, Florida 33023

Leslie Bennis 6008 Linden Circle Tamarac, Florida 33319

Patsy Birnbaum

3520 N. 54 Avenue

Hollywood, Florida 33021

Elizabeth Smith

1260 N.E. 40 Street

Pompano Beach, Florida 33064

(b) OFFICERS. The board of trustees shall elect the following officers: Chairperson, 1st Vice-Chairperson, 2nd Vice-Chairperson,

j

Secretary and Treasurer and any such other officers as the bylaws of this corporation may authorize trustees to elect from time to time. Initially, such officers shall be elected at the first annual meeting of the board of trustees. Until such election is held, the following persons shall serve as corporate officers:

Chair: Edward Pudaloff

1st Vice Chairperson: Elizabeth Smith

2nd Vice-Chairperson: Leslie Bennis

Secretary: Patsy Birnbaum

Treasurer: Irving Reisfeld

. ARTICLE NINE

Subject to the limitations contained in the bylaws, and any limitations set forth in the Corporations Not For Profit law of Florida, concerning corporate action that must be authorized or approved by the members of the corporation, bylaws of this corporation may be made, altered, rescinded, added to, or new bylaws may be adopted by a majority vote of the members present and voting at a membership meeting called for such purpose.

ARTICLE TEN

The property of this corporation is irrevocably dedicated to the charitable purposes and no part of the net income or assets of this corporation shall ever inure to the benefit of any director, trustee, officer or member thereof, or to the benefit of any private individual.

ARTICLE ELEVEN

Upon the dissolution or winding up of this corporation, its assets remaining after payment, or provision for payment of all debts

and liabilities of this corporation shall be distributed to a non-profit fund, foundation or corporation which is organized for the same or similar purposes as this corporation and which has been established as an organization exempt from taxation under Section 501(c)(3) of the Internal Revenue Code of 1954, as amended, or any corresponding subsequent federal tax law.

ARTICLE TWELVE

Amendments to these articles of incorporation may be proposed by a resolution of the board of trustees and presented to a quorum of members for their vote. Amendments may be adopted by the vote of two thirds of a quorum of members of the corporation.

SECTUTATION OF STATE NATIONAL VIEWS FOR STATE

We, the undersigned, being the incorporators of this corporation, and including all persons named herein as subscribers of this corporation, for the purposes of forming this not for profit charitable corporation under the laws of Florida have executed these articles of incorporation on this 25th day of February, 1985.

EDWARD PUDALOFF

ELIZABETH SMITH Junes

LESLIE BENNIS

PATRY BYRNBAUM

TRVING REISFEED

Sworn to and subscribed before me

, 1985.

NOTARY PUBLIC STATE OF FLORIDA

My Commissison Expires:

NOTARY PUBLIC STATE OF FLORIDA MY COMMISSION EXPIRES MAR 15 1987 MY COMMISSION EXPIRES MAR 15 1987 MY COMMISSION EXPIRES MAR 15 1987 MY COMMISSION OF FLORIDA

Pursuant to Elorida Statute 48.091 and 617.023, the following is submitted;

That Helping Abused, Neglected, Dependent Youth (H.A.N.D.Y.), desiring to organize as a non-profit corporation under the laws of the state of Florida, with its principle office in the city of Plantation, County of Broward, Florida, has name Edward Pudaloff, located at 220 El Dorado Parkway, City of Plantation, County of Broward, Florida as its agent to accept service of process within this state.

ACCEPTANCE OF APPOINTMENT

Having been named to accept service of process for the non-profit corporation, I agree to act in this capacity, and agree to comply with the statutory provisions relative to the maintenance of an office.

EDWARD PUDALOFF

Sworn to and subscribed before me this 2500 day of Achustus

1984.

NOTARY PUBLIC. STATE OF FLORIDA

My Commission Expires:

NOTÄRY PUBLIC STATE OF FLORIDA MY COMMISSION EXPIRES MAR 15 1982, RONDED THEU CENTRAL INSURANCE IN DE

Page 8 of 8

HANDY INC BYLAWS

AMENDED AND RESTATED BYLAWS

OF

HELPING ABUSED NEGLECTED DISADVANTAGED YOUTH (HANDY), INC.

(A Not-For-Profit Florida Corporation)

ARTICLE 1

NAME

Section 1.1. Name. The name of the Corporation shall be HELPING ABUSED NEGLECTED DISADVANTAGED YOUTH (HANDY), INC. (the "Corporation").

ARTICLE 2

ORGANIZATION

Section 2.1. <u>Statement of Purposes</u>. The purposes of this Corporation, as expressed in its Articles of Incorporation, shall be for the purpose of transacting any or all lawful business for which corporations may be incorporated under the Florida Not for Profit Corporation Act and to operate within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986. The specific purpose of the Corporation is to assist abused, neglected, or disadvantaged youth in and around Broward County, Florida.

Section 2.2. <u>Dissolution</u>. In the event of the dissolution of the Corporation, the Board of Directors ("Board") shall, after paying or making provision for the payment of all of the liabilities of the Corporation, dispose of all of the remaining assets of the Corporation, exclusively for the purposes of the Corporation in such manner, or to such organization or organizations organized and operated exclusively for charitable, educational, religious or scientific purposes, as shall at the time qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code of 1986 (or the corresponding provisions of any future United States Internal Revenue Law), as the Board shall determine. Any of such assets not so disposed of shall be disposed of by the court having proper jurisdiction in the county where the principal office of the Corporation is then located, exclusively for such purposes or to such organization or organizations, as said court shall determine, which are organized and operated exclusively for such purposes.

ARTICLE 3

MEMBERSHIP

Section 3.1. <u>Members.</u> This Corporation is a non-profit, non-stock corporation, and shall have a membership consisting of the Board of Directors of this Corporation serving from time to time.

ARTICLE 4

BOARD OF DIRECTORS

- **Section 4.1.** <u>Management.</u> All powers of the Corporation shall be exercised by and under the authority of the Board, and the property, business and affairs of the Corporation shall be managed under the Board's direction. Except as specifically set forth to the contrary herein, the Board may not take any action, except upon the approval thereof by the affirmative vote of a majority of the Board present at a meeting at which a quorum of at least 60% of the Directors are present. The affirmative vote of a seventy-five percent (75%) of the total Directors, whether present at a meeting or not, shall be necessary for all actions by the Board relating to the following:
- **4.1.1.** Approval of charitable gifts, transfers, distributions, and grants by the Corporation to other entities;
 - 4.1.2. Adoption of an amendment to the Articles of Incorporation or the Bylaws;
 - 4.1.3. Organization of a subsidiary or affiliate by the Corporation; and
- 4.1.4. Approval of any merger, consolidation or sale or other transfer of all or a substantial part of the assets of the Corporation.
- Section 4.2. Number of Directors. The Board shall initially consist of the Directors named in the attached Schedule 4.2, which may be updated at any time, to reflect the then current composition of the Board, by the Secretary with copies of any updates also provided to the Board via electronic or standard mail. The number of Directors may at any time be increased or decreased by a majority vote of the Board, but in no event shall the number of Directors be fewer than three (3). In the event of an increase in the number of Directors, the additional directorships created shall be filled in the manner prescribed herein for the Election of Directors in accordance with Section 4.4.

Section 4.3. Nomination of Directors. Not less than one (1) month prior to a regular meeting, the Board may appoint a nomination committee to consist of no fewer than two (2) Board members. The nomination committee will compile and submit to the Board a slate of candidates for the directorships and offices to be filled at the upcoming meeting, which slate shall be approved by the Board. If the Board does not approve of any nominee, then the nominee shall be removed from the slate, and the committee may replace the removed nominee with another nominee approved by the Board. These submissions shall be deemed to be nominations of each person named.

Section 4.4. <u>Election and Term of Office</u>. Directors shall be elected by the Board from a slate of nominees at any meeting when there is an expiring term or at any meeting during which the Board otherwise desires to elect a new Director. A duly elected Director shall hold office for a term of two (2) years from the close of the next annual meeting and shall be eligible for reelection for a maximum of three (3) total terms. Each Director shall continue to serve until the election and qualification of their successors or their earlier death, resignation or removal.

Section 4.5. <u>Vacancies.</u> Vacancies occurring in an elected Directorship, however caused, shall be filled as soon as practicable by election in accordance with the nominating provisions of Section 4.3 and Section 4.4 hereinabove. Except for a Director elected due to the natural expiration of his predecessor's term, a Director so elected to fill a vacancy shall hold office for the remainder of his predecessor's term.

Section 4.6. Resignation or Removal of Directors. A Director of the Corporation may resign at any time by tendering his resignation in writing to the Corporation, which resignation shall become effective upon the date specified therein, or if no date is specified, upon receipt by the Corporation at its principal place of business. Any elected Director may be removed at any time, with or without cause, by a majority vote of the other Directors.

Section 4.7. Compensation of Directors. Directors will not receive compensation for services rendered in their capacities as Directors. However, nothing herein contained shall be construed to preclude any Director from receiving compensation from the Corporation for other services actually rendered or for expenses incurred for serving the Corporation as a Director or in any other capacity.

Section 4.8. Annual Meetings of the Board. The annual meeting of the Board shall be held without other notice than this Bylaw on the first business day of April of each year, unless the

Chair, or the Board by resolution, provide for a different time and place for the holding of such annual meetings. The annual meeting may be held at such other time and place, without other notice than such resolution.

Section 4.9. Special Meetings. Special meetings of the Board may be called at any time by the Chair of the Corporation. Further, special meetings of the Board must be called by the Chair within fourteen (14) days of receipt of a written request of any two (2) or more Directors. Written notice of special meetings shall be given to each Director not less than five (5) days prior to such meeting. The notice shall set forth the time, place and purpose of the meeting. The business to be transacted at any special meeting shall be limited to those items set forth in the notice or waiver thereof.

Section 4.10. Regular Meetings. The Board shall meet at least one (1) time each quarter year, including the annual meeting. The Secretary shall mail notice of all regular and annual meetings to each Director at the address on file with the Secretary at least fourteen (14) days prior to a meeting, indicating the date, place and time of the meeting, e-mail notice is permitted.

Section 4.11. Quorum and Action of the Board. At least sixty percent (60%) of the Directors must be present in person at a meeting to constitute a quorum for the transaction of business at such meeting. Except as otherwise provided by law, the Articles of Incorporation, or these Bylaws, the affirmative vote of a majority of the Directors present at a meeting at which a quorum is present shall be necessary for an action of the Board. A majority of the Directors present, whether or not a quorum exists, may adjourn any meeting of the Board to another time and place. Notice of any such adjourned meeting shall be given to the Directors who were not present at the time of adjournment. A Director's telephonic presence at a meeting of the Board shall constitute valid attendance for purposes of establishing a quorum.

Section 4.12. <u>Voting Shares of Stock</u>. In the event the Corporation owns shares of stock in another corporation, such shares shall be voted by the Chair, or his designee, as authorized by a vote of the Board as set forth in Section 4.1 hereinabove.

Section 4.13. Action without a Meeting. Any action required by law or these bylaws to be taken at a meeting of the Board may be taken without a meeting if the action receives the affirmative vote, by written consent, of the same number of Directors as would have been required

to take said action at a fully attended meeting of the Board. Action taken under this section is effective when the action is signed by the requisite number of Directors.

ARTICLE 5 OFFICERS

Section 5.1. Number. The Corporation may have a Chair, Vice Chair of Fund Development and Expansion, Vice Chair of Program Development, Vice Chair of Legal Matters, Vice Chair of Housing, Secretary and Treasurer, each of whom shall be elected by the Board. Such other officers and assistant officers as may be deemed necessary may be elected or appointed by the Board. Any two (2) or more offices may be held by the same person. Officers need not be residents of the State of Florida or United States citizens. The failure to elect an officer shall not affect the existence of the Corporation.

Section 5.2. Election and Term of Office. Officers shall be elected by the Board from a slate of nominees at any meeting when there is an expiring term or at any meeting during which the Board otherwise desires to elect a new Officer. A duly elected officer shall hold office for a term of one (1) year from the close of the next annual meeting, and until the election and qualification of their successors or their earlier death, resignation or removal.

Section 5.3. <u>Vacancies</u>. A vacancy in any office because of death, resignation, removal, disqualification or otherwise (including removal in the event an officer is not reelected during his term in office) shall be filled by an election by the Board as set forth in Section 5.2 for the remaining unexpired term of such office.

Section 5.4. Resignation or Removal of officers. An officer of the Corporation may resign at any time by tendering his/her resignation in writing to the Chair or the Secretary. Resignations shall become effective upon the date specified therein or, if no date is specified, upon receipt by the Corporation. An officer of the Corporation may be removed at any time, with or without cause, at any meeting of the Board by a vote of the Board as set forth in Section 4.11 hereinabove.

Section 5.5. Chair. The Chair of the Board shall preside at all meetings of the Board and shall perform such other duties as may be assigned to him/her by the Board. The Chair shall be the principal executive officer of the Corporation and, subject to the control of the Board, shall in general supervise and control all of the business and affairs of the Corporation. He/She/They

shall act as a duly authorized representative of the Board and the Corporation in all matters in which the Board has not formally designated some other person to act. He/She/They shall report as directed to the Board at each meeting. He/She/They may sign, with the Secretary or any other proper officer of the Corporation authorized by the Board, deeds, mortgages, bonds, contracts or other instruments which the Board has authority to execute, except in cases where the signing and execution thereof shall be expressly delegated by the Board or by these Bylaws to some other officer or agent of the Corporation, or shall be required by law to be otherwise signed or executed; and in general, shall perform all duties incident to the office of President and such other duties as may be prescribed by the Board from time to time.

Section 5.6. <u>Vice-Chair</u>. The Vice-Chair shall act in the place and stead of the Chair in the event of the Chair's absence, inability or refusal to act, and shall exercise and discharge such other duties as may be required of him/her by the Board.

Section 5.7. Secretary. The Secretary shall keep or cause to be kept all of the records of the Corporation, record or cause to be recorded the minutes of the meetings of the Board, send out or cause to be sent out all notices of meetings of the Board and all Committees, attest to the seal of the Corporation where necessary or required, and keep or cause to be kept a register of the names and addresses of each Director. The Secretary shall perform such other duties as may be prescribed by the Board.

Section 5.8. <u>Treasurer.</u> The Treasurer shall insure or cause to be insured that a true and accurate accounting of the financial transactions of the Corporation is made and that such accounting is presented to and made available to the Board. The Treasurer shall perform such other duties as may be prescribed by the Board.

Section 5.9. Other Officers. Other officers elected by the Board shall have such duties and responsibilities as the Board deems advisable.

Section 5.10. Succession of Officers. Unless otherwise directed by a vote of the Board, in the event that an officer of the Corporation has not resigned or been removed but is unable to act in such position for a period of one (1) month or more, whether due to disability or other reason, then another officer of the Corporation shall serve in that office until such officer is either removed or is able to perform his/her services in the following order:

5.10.1. The Vice-Chair shall perform the services of the Chair.

- 5.10.2. The Chair shall perform the services of the Secretary and the Vice-Chair.
- **5.10.3.** The Secretary shall perform the services of the Treasurer.

Section 5.11. <u>Salaries.</u> Officers will not receive compensation for services rendered as officers of the Corporation. However, nothing herein contained shall be construed to preclude any officer from receiving compensation from the Corporation for other services actually rendered or for expenses incurred for serving the Corporation as an officer or in any other capacity.

ARTICLE 6

COMMITTEES OF THE BOARD

Section 6.1. Committees of the Board. The Board may, by resolution, establish standing committees and special committees of the Board. Unless otherwise specified by resolution of the Board or these Bylaws, the Chair shall annually appoint the members and the chairs of the standing committees and shall fill vacancies on any standing committee. Appointments by the Chair shall be made at the annual meeting of the Board. In addition, the Chair may, if so authorized by the Board, appoint the members and chairmen of such special committees as the Board may create, which members and chairmen may include persons who are not members of the Board. All committee appointments and chairmen appointments must be approved by a vote of the Board.

- **Section 6.2.** <u>Standing Committees.</u> Standing committees shall be created as required by resolution of the Board. The purpose, duties, number of members and reporting requirements of each standing committee shall be specified in the resolution creating the committee.
- **Section 6.3.** <u>Special Committees.</u> Special committees shall be created as required by resolution of the Board. The purpose, duties, number of members and reporting requirements of each special committee shall be specified in the resolution creating the committee.
- **Section 6.4.** <u>Committee Members' Term of Office</u>. Unless otherwise specified by resolution of the Board, members of each committee shall continue in office until the next annual meeting of the Board and until their successors are appointed, unless the committee of which they are members shall be sooner terminated by resolution of the Board or until their earlier death, resignation or removal as committee members.

Section 6.5. Committee Meetings. Meetings of any committee may be called by the chair of such committee or upon the written request of one-third (1/3) of the committee members. The call for any meeting shall be by giving notice of such meeting which sets forth its time and place and is delivered to the residence or place of business of the committee members as listed in the Secretary's office at least two (2) days prior to such meeting. Unless otherwise provided in these Bylaws, a majority of the members of any committee shall constitute a quorum for the transaction of business. After a quorum has been established at a committee meeting, the subsequent withdrawal of committee members from the meeting so as to reduce the number of committee members present to fewer than the number required for a quorum shall not affect the validity of any action taken at the meeting. Each committee shall keep minutes of its meetings and report to the Board as necessary with recommendations.

Section 6.6. Resignation or Removal of Committee Members. A member of any committee may resign at any time by tendering his resignation in writing to the Chair of the Board. The Board, by a vote, may remove, with or without cause, any member from a committee and specifically, but not by way of limitation, may remove any member from a committee for failing to attend three (3) consecutive meetings of the committee.

ARTICLE 7

DIRECTOR EMERITUS

Section 7.1. A former Director may be designated as a Director Emeritus by the Board at any meeting of the Board. Director Emeritus is an honorary position and shall not carry with it any voting rights; however, every Director Emeritus shall be permitted to attend all meetings of the Board and shall receive notice of such meetings in accordance with Article 4.

ARTICLE 8

COMMUNITY REPRESENTATIVE

Section 8.1. A Broward County resident may be designated as a Community Representative Board Member by the Board at any meeting of the Board. Community Representative is a voting board member and is required to meet all the expectations of a regular board member, except the annual Give / Get financial requirement. Community Representative shall be permitted to attend all meetings of the Board and shall receive notice of such meetings in accordance with Article 4.

ARTICLE 1

INDEMNIFICATION OF DIRECTORS AND OFFICERS

Section 1.1. Indemnification. The Corporation shall indemnify to the fullest extent permitted by law each of its officers, Directors, whether or not then in office (and his executor, administrator and/or heirs) or any person who may have served at its request as a director or officer, of another corporation, partnership, joint venture, trust or other enterprise as well as the executor, administrator and heirs of any of them against all reasonable expenses (including attorneys' fees), judgments, fines and amounts paid in settlement actually and necessarily incurred by him in connection with any threatened, pending or completed action, suit, proceeding or arbitration, whether civil or criminal, administrative or investigative (including any appeal thereof), to which He/She/They is or is threatened to be made a party because He/She/They is or was a Director, officer, employee or agent of this Corporation, or such other corporation, partnership, joint venture, trust or other enterprise. He/She/They shall have no right to reimbursement, however, in relation to matters as to which he has been adjudged liable to the Corporation for gross negligence or willful misconduct in the performance of his/her duties to the Corporation. The foregoing right of indemnification shall be in addition to and not exclusive of all other rights to which such Director. officer, employee or agent may be entitled.

Section 1.2. <u>Insurance</u>. The Corporation may purchase and maintain insurance on behalf of any person who is or was a Director, officer, employee or agent of the Corporation or who is or was serving at the request of the Corporation as a director, officer, employee or agent of another corporation, partnership, joint venture, trust or other enterprise against any liability asserted against him/her and incurred by him/her in any such capacity or arising out of his status as such, whether or not the Corporation would have the power to indemnify him/her against such liability under the provisions of this Article VII.

ARTICLE 2

CONTRACTS, CHECKS, DEPOSIT BOOKS AND RECORDS

Section 2.1. Contracts. The Board may authorize any officer or officers, agent or agents, to enter into any contract or execute and deliver any instrument in the name of and on behalf of the Corporation, and such authority may be general or confined to specific instances.

Section 2.2. <u>Loans.</u> No loans shall be contracted on behalf of the Corporation and no evidences of indebtedness shall be issued in its name unless authorized by a resolution of the Board, which authority may be general or confined to specific instances.

Section 2.3. Checks, Drafts, Etc. All checks, drafts or other orders for the payment of money, notes or other evidences of indebtedness issued in the name of the Corporation shall be signed by such officer or officers, agent or agents of the Corporation and in such manner as shall from time to time be determined by resolution of the Board.

Section 2.4. <u>Deposits</u>. All funds of the Corporation not otherwise employed shall be deposited from time to time to the credit of the Corporation in such banks, trust companies or other depositories as the Board may select.

Section 2.5. Gifts. The Board may accept, on behalf of the Corporation, any contributions, gifts, bequests or devise.

Section 2.6. <u>Books and Records</u>. The Corporation shall keep correct and complete books and records of account and shall keep minutes of the proceedings of its Board and committees of the Board. Any books, records and minutes may be in written form or in any other form capable of being converted into written form within a reasonable time.

Section 2.7. Financial Statements. Not later than two (2) months after the close of each fiscal year, the Corporation shall prepare a balance sheet showing in reasonable detail the financial condition of the Corporation as of the close of its fiscal year, a profit and loss statement showing the results of the operations of the Corporation during its fiscal year, and any other financial statements as may be required by a resolution of the Board. The balance sheets and profit and loss statements shall be filed in the principal office of the Corporation, shall be kept for at least five (5) years, and shall be subject to inspection during business hours by any Board member.

ARTICLE 3

CERTIFICATES FOR MEMBERS AND THEIR TRANSFER

Section 3.1. Certificates for Members. The Board shall not initially issue Certificates of Membership. The Board may elect to provide for the issuance of certificates evidencing membership in the Corporation. The form of such certificates shall be determined by the Board. The certificates will be signed by the Chair or Vice-Chair and by the Secretary. The certificates shall be sealed with the corporate seal and shall be separately numbered. The name and address of each member and the date of issuance of the certificates shall be recorded in the corporate records. If a certificate is lost, mutilated or destroyed, it may be reissued in the manner determined by the Board. The certificates shall be non-transferable.

ARTICLE 4

FISCAL YEAR

Section 4.1. Fiscal Year. The fiscal year shall be July 1st through June 30.

ARTICLE 5

CORPORATE SEAL

Section 5.1. Corporate Seal. The Board shall provide a corporate seal which shall be circular in form and shall have inscribed thereon the name of the Corporation and the state of incorporation and the words "Corporate Seal".

ARTICLE 6

NOTICE

Section 6.1. General. Whenever, under the provisions of any statute, the Articles of Incorporation or these Bylaws, notice is required to be given to any Director or officer, it shall not be construed to require personal notice; rather, such notice may be given, unless otherwise required by these Bylaws, either personally or sent by first class mail, by e-mail or facsimile (or similar electronic means) or by a nationally recognized overnight courier, charges prepaid, addressed to such Director or officer at his address as the same appears in the records of the

Corporation; and three (3) days after the same shall be so mailed or delivered shall be deemed to be the time of the giving of such notice.

Section 6.2. Waiver. Whenever by law, the Articles of Incorporation, or these Bylaws notice is required or permitted to be given to any Director or officer, a waiver thereof in writing signed by the person or persons entitled to such notice, whether before or after the time stated therein, shall be equivalent to the giving of such notice. Attendance of a person at a meeting shall constitute a waiver of notice of such meeting, except when the person attends a meeting for the express purpose of objecting at the beginning of the meeting to the transaction of any business because the meeting is not lawfully called or convened. The business to be transacted and the purpose of any special meeting of the Board shall be specified in any written waiver of notice thereof.

ARTICLE 7 AMENDMENTS

Section 7.1. By Directors. These Bylaws may be amended or repealed wholly or in part, consistent with any bylaws adopted by the Board, at any meeting at which a quorum is present by seventy-five percent (75%) vote of the Board.

These Amended Bylaws were approved at a meeting of the Board of Directors of HELPING ABUSED NEGLECTED DISADVANTAGED YOUTH (HANDY), INC. on June 23, 2021 and supersede the prior bylaws adopted October 31, 2018.



Michael Wild

Board Chair

WFP Law Company Company Role CEO Industry Law



Phillip DiBiasi

Immediate Past Chair

Company Intero Group

Company Role CEO

Healthcare Industry



Paul Minoff

Vice Chair

Company **CATIC Commerical**

Company Role VP & Commercial Sales Manager

Industry Real Estate



Shea Smith

Vice Chair

Berkowitz Pollack Brant Advisors + CPAs Company

Company Role CPA | Director of Assurance and Advisory Services

Industry **Finance**





Kathleen Thomsen

Vice Chair

Kathleen Thomsen Consulting Company

Company Role Owner

Industry Community Advocate



Lina Nageondelestang

Secretary

Company **DPR** Construction Company Role **Talent Partner** Industry Construction



Adam Spiegel

Treasurer

Company **BDO**

Company Role Tax Partner Industry

Accounting



Julie Blackmore

Board Member

Company Holland and Knight

Company Role **Partner** Industry Law





Charmaine Borda

Board Member

Blue Couch Company

Company Role

Industry

CEO Mental Health



Nisha Deshmukh

Board Member

Company Ghost Tree Capital, LLC

Head of Marketing & Investor Relations Company Role

Industry Accounting



Stephanie Fortune

Board Member

Fortune Consulting Company

Company Role **CEO**

Industry **Human Resources**



Andre Gonzalez

Board Member

Bank of America Company **Private Client Advisor** Company Role

Industry Banking





Ashley Hays

Board Member

Company Company Role SouthState Bank SVP/Portfolio Manager

Industry Banking



Todd Kirkpatrick

Board Member

Company Whitaker Real Estate

Company Role **Partner** Industry **Real Estate**



Malcolm MacInnes

Board Member

MGM General Contracting Company

Company Role **CEO**

Industry Construction



Henry Mack

Board Member

Company Northwest Florida State College

Company Role Provost & Vice President, Academic Affairs

Education Industry





Katie Masucci

Board Member

Company Company Role

Industry

Northern Trust

Vice President, New Business Specialist

Finance



Ricardo Moncada

Board Member

Company

Company Role

Industry

RMS Consultant

CEO

Construction



Clifford Moore

Board Member

Company

Company Role

Industry

Journey C+D Group, Inc

CEO

Construction



Casey Schu

Board Member

Company

Company Role

Industry

Family Office

Investment Strategist

Finance





Zachary Simpson

Board Member

The General Counsel Law Firm Company

Company Role **Managing Partner**

Industry Law



Marc Spoto

Board Member

Company Company Role Industry

JMA GROUP AVP Marketing Marketing

Centennial Bank



Michelle Sweet

Board Member

Company Company Role

Vice President Industry Banking



Felicia Turnley

Board Member

Company Memorial Hospital Pembroke

Company Role CEO

Healthcare Industry





Aaron Weeks

Board Member Company

Company Role Industry

Miami-Dade County DTPW **Budget/Finance Administrator**

Finance



Dan Wobby

Board Member

Company

Company Role Industry

Moss Construction

CFO

Construction



Andrew Wong

Board Member

Company

Company Role

Industry

Comerica Bank

Senior Vice President

Banking



Kevin Worrell

Board Member

Company Company Role

Industry

Hypower CFO

Construction





Dan Young

Board Member

Company Company Role

Industry

Young Consulting Group

CEO

Accounting



Marsha Levy

Emeritus

Company

Company Role

Industry

Advocate

Community Advocate

N/A



Elaine Appel

In Memoriam

Company

Company Role

Industry

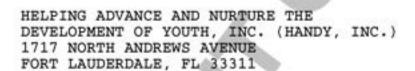
Advocate

Community Advocate

N/A



CITRIN COOPERMAN ADVISORS LLC 6550 N. FEDERAL HIGHWAY, 4TH FLOOR FT. LAUDERDALE, FL 33308



Inflantiantiantiantificat





Helping Advance and Nurture the Development of Youth, Inc. (HANDY, INC.) 1717 North Andrews Avenue Fort Lauderdale, FL 33311



Enclosed are the original and one copy of the 2023 Exempt Organization return, as follows...

2023 Form 990

A copy of the Organization's tax returns, e-filing authorizations and estimated tax vouchers, if applicable, are being provided to you via SafeSend to ensure proper protection of your personal information. Please download all enclosures and save them to your computer or print them for future reference. Your tax returns will be available in the SafeSend portal for 12 months from the date of the receipt. If applicable, your package will include paper copies of tax returns required to be mailed directly by you to a taxing jurisdiction. Please follow the instructions provided for each return.

These returns were prepared from the information furnished by you. Please review them before filing to ensure there are no omissions or misstatements of material facts.

Please be sure to e-sign and return the e-filing authorization forms to us via SafeSend to ensure timely processing.

We sincerely appreciate the opportunity to serve the Organization. Please contact us if you have any questions concerning the tax return.

Sincerely,

Tyler Johnson

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

June 30, 2024

Prepared For:

Helping Advance and Nurture the Development of Youth, Inc. (HANDY, INC.) 1717 North Andrews Avenue Fort Lauderdale, FL 33311

Prepared By:

Citrin Cooperman Advisors LLC 6550 N. Federal Highway, 4th Floor Ft. Lauderdale, FL 33308

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE in SafeSend to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by May 15, 2025.

Form 8879-TE

IRS E-file Signature Authorization for a Tax Exempt Entity

ing JU	L 1	, 2023, and ending	JUN	30	.20 2

4

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of filer

For calendar year 2023, or fiscal year beginn

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

Go to www.irs.gov/Form8879TE for the latest information. HELPING ADVANCE AND NURTURE THE

DEVELOPMENT OF VOITH TNC / UNNIDV TNO Y

EIN or SSN 59-2507617

Name and title of officer or person subject to tax KIRE	BROWN	
CHIL	F EXECUTIVE OFFICER	
Part I Type of Return and Return In		
Check the box for the return for which you are using t Form 5330 filers may enter dollars and cents. For all o or 10a below, and the amount on that line for the retu whichever is applicable, blank (do not enter -0-). But, it than one line in Part I.	ther forms, enter whole dollars only. If you check the m being filed with this form was blank, then leave line	box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b,
1a Form 990 check here X b To	tal revenue, if any (Form 990, Part VIII, column (A), lin	ю 12) 16 4,473,583.
2a Form 990-EZ check here b To	tal revenue, if any (Form 990-EZ, line 9)	2b
3a Form 1120-POL check here b To	tal tax (Form 1120-POL, line 22)	36
4a Form 990-PF check here b Ta	x based on investment income (Form 990 PF, Part)	/, lne 5) 4b
5a Form 8868 check here b Ba	lance due (Form 8868, line 3c)	5b
	tal tax (Form 990-T, Part III, line 4)	
7a Form 4720 check here b To	tal tax (Form 4720, Part III, line 1)	7ь
	V of assets at end of tax year (Form 5227, Item D)	
9a Form 5330 check here b Ta	x due (Form 5330, Part II, line 19)	9b
	nount of credit payment requested (Form 8038 CP,	
The state of the s	thorization of Officer or Person Subject	to Tax
Under penalties of perjury, I declare that $oxed{X}$ I am ar	officer of the above entity or 📗 I am a person sub	ject to tax with respect to (name
of entity)	(EIN)	and that I have examined a copy of the
payment of taxes to receive confidential information of personal identification number (PIN) as my signature f PIN: check one box only X I authorize CITRIN COOPERMAN	or the electronic return and, if applicable, the consent	to electronic funds withdrawal.
	ERO firm name	Enter five numbers, but do not enter all zeros
with a state agency(les) regulating charities on the return's disclosure consent screen. As an officer or person subject to tax with re-	onically filed return. If I have indicated within this return as part of the IRS Fed/State program, I also authorize aspect to the entity, I will enter my PIN as my signatur that a copy of the return is being filed with a state age on the return's disclosure consent screen.	the aforementioned ERO to enter my PIN re on the tax year 2023 electronically filed
ins red/state program, I will enter my PIN	on the return's disclosure consent screen.	2210
Part III Certification and Authenticat	ion	Date
ERO's EFIN/PIN. Enter your six-digit electronic filing in number (EFIN) followed by your five-digit self-selected	6504500	
I certify that the above numeric entry is my PIN, which submitting this return in accordance with the requiren Business Returns.	is my signature on the 2023 electronically filed return	indicated above. I confirm that I am
ERO's signature TYLER JOHNSON	Date	02/12/25
ERO N	fust Retain This Form - See Instructions	
	This Form to the IRS Unless Requested 1	To Do So
For Privacy Act and Paperwork Reduction Act Noti		Form 8879-TE (2023)

LHA 002521 01-05-24

Form **990**

EXTENDED TO MAY 15, 2025 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Open to Public Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service 2024 A For the 2023 calendar year, or tax year beginning JUL 1, 2023 and ending JUN 30, C Name of organization D Employer identification number Check if applicable HELPING ADVANCE AND NURTURE THE Address DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) Name change 59-2507617 Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final 1717 NORTH ANDREWS AVENUE 954-522-2911 terms ated 4,843,652. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts 8 Amended return FORT LAUDERDALE, FL 33311 H(a) is this a group return Applica-tion pending F Name and address of principal officer: KIRK BROWN Yes X No for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) (4947(a)(1) or 527 If "No," attach a list. See instructions (insert no.) WWW.HANDYINC.ORG J Website: H(c) Group exemption number K Form of organization; X Corporation Trust Association Other L Year of formation: 1985 M State of legal domicile; FL Part I Summary Briefly describe the organization's mission or most significant activities: HANDY'S MOST SIGNIFICANT Activities & Governance ACTIVITIES ARE TO PROVIDE CUSTOMIZED PROGRAMS THAT MEET THE 2 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) 26 26 Number of independent voting members of the governing body (Part VI, line 1b) 4 127 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 60 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0. Prior Year Current Year 4,390,602. 3,676,444. Contributions and grants (Part VIII, line 1h) Revenue 0. 0. 9 Program service revenue (Part VIII, line 2g) 17,429. 22,220. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d); 602,909. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 774,919. 5,010,940. 4,473,583. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 431,342. 510,741. Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 3,076,630. 3,114,700. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e). 480,056. b Total fundraising expenses (Part IX, column (D), line 25): 1,393,397. 1,409,932. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 4,901,369. 5,035,373. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -561,790. 109,571. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year 53 5,151,562. 4,374,740. 20 Total assets (Part X, line 16) 2,717,188. 2,932,220. 21 Total liabilities (Part X, line 26) 2,219,342. 1,657,552. 22 Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Date Sign KIRK BROWN, CHIEF EXECUTIVE OFFICER Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature 02/12/25 P01959117 Paid TYLER JOHNSON TYLER JOHNSON Preparer CITRIN COOPERMAN ADVISORS LLC Firm's EIN 87-2525370 Firm's name Firm's address 6550 N. FEDERAL HIGHWAY, 4TH FLOOR Use Only

FT. LAUDERDALE, FL 33308

No

X Yes

Phone no. 954-771-0896

Pa	rt III Statement of Program Service Accomplishments
1010	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	HANDY'S MISSION IS TO EMBRACE, EDUCATE AND EMPOWER VULNERABLE YOUTH TO
	BECOME ENGAGED, PRODUCTIVE ADULTS.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
2	
3	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 S
	THE ORGANIZATION'S LIFE PROGRAM (LIFE SKILLS, INDEPENDENT LIVING,
	FOUNDATION BUILDING, AND EDUCATION/EMPLOYMENT) PROVIDES SERVICES THAT
	FOCUSE ON EDUCATION, YOUTH DEVELOPMENT AND ECONOMIC SELF-SUFFICIENCY TO
	ENSURE AT-RISK YOUTH DO NOT DROP OUT OF SCHOOL, DO NOT ENGAGE IN
	CRIMINAL ACTIVITIES, COMPLETE THEIR EDUCATION AND ENTER THE WORKFORCE
	AS SELF-SUFFICIENT, CONTRIBUTING MEMBERS OF THE COMMUNITY. ALL YOUTH
	RECEIVE ASSESSMENTS, LIFE PLAN AND EVALUATIONS, INTENSIVE CASE
	MANAGEMENT, COUNSELING AND MENTORS. ADDITIONAL PROGRAM ACTIVITIES
	INCLUDE: TUTORING, MENTORING, SOCIAL AND RECREATIONAL ACTIVITIES,
	EMERGENCY NEEDS ASSISTANCE FOR FOOD, CLOTHING, HOUSING, EDUCATION
	WORKSHOPS, LIFE SKILL TRAINING, POST-SECONDARY EDUCATION SUPPORT,
	INTERNSHIPS AND JOB PLACEMENTS, SERVICE LEARNING PROJECTS,
4b	(Code:) (Expenses 5
_	
4c	(Code:) (Expenses \$
	2
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 4,096,609.
	Form 990 (2023)

HELPING ADVANCE AND NURTURE THE

Form 990 (2023)

Part IV | Checklist of Required Schedules

DEVELOPMENT OF YOUTH, INC. (HANDY, INC.)

1-1-6			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		858	
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	207	7.000	
	public office? # "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	58		
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	500		
	similar amounts as defined in Rev. Proc. 98-197 // "Yes," complete Schedule C, Part III	5	_	Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	690		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	_	Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	523		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	_	Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	20		
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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.			
u	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
1100	Part VI	11a	Х	-
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	_	Х
c		l		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	_	^
a	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		х	
9/3	Part X, line 167 If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? # "Yes, " complete Schedule D, Part X	11e	A	
1	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)? # "Yes," complete Schedule D, Part X	111		x
100	Did the organization obtain separate, independent audited financial statements for the tax year? # "Yes," complete	111		-
120	Schedule D. Parts XI and XII	12a	х	
ъ.	Was the organization included in consolidated, independent audited financial statements for the tax year?	12.0		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				-
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			- ,
20	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			100
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			100
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		590 m	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			30.0
	domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21		X

352003 12-21-23

Form 990 (2023)

Part IV Checklist of Required Schedules (continued)

DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) 59-2507617

		_	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	-
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? // "Yes," complete		х	
24.0	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	-	_
240	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No." go to line 25a	24a	_	x
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	2.40		
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			·
	transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			-
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? # "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	32.00		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			2000
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these personn? If "Yes," complete Schedule L., Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #	507780		
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? #			
22	"Yes," complete Schedule L, Part IV	28c	10	X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	2222		
	contributions? # "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? # "Yes," complete Schedule N, Part I	31		Α.
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	- 20		x
20	Schedule N, Part II	32		-
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		-
34		34		x
35 n	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity.	- OUR		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	3000		
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	1		
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance	- 01.072.0		4-5
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 95	_		
		2		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garning	البيال		
_	(gambling) winnings to prize winners?	1c	Х	

Statements Regarding Other IRS Filings and Tax Compliance (continued

Part V

DEVELOPMENT OF YOUTH, INC. (HANDY, INC.)

Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements. 127 filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a 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). X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a х b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). х a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827 7c d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums are a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 71 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor lidvised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds.... a Did the sponsoring organization make any taxable distributions under section 4966? 90 b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990. Part VIII, line 12, for publicuse of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 110 b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand Х 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or x excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. x 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.

Form 990 (2023) 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.

Can	Check if Schedule O contains a response or note to any line in this Part VI				Helb	X
Sec	tion A. Governing Body and Management			-	W	
-	Enter the number of voting members of the governing body at the end of the tax year	l ta l	26	IA Y	Yes	No
10	If there are material differences in voting rights among members of the governing body, or if the governing	18	20			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.					
	Enter the number of voting members included on line 1a, above, who are independent	1b	26			
20	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					
2	officer, director, trustee, or key employee?	p with any our	1	2		х
	Did the organization delegate control over management duties customarily performed by or under the	n direct rupes	wion.	-		-
3	of officers, directors, trustees, or key employees to a management company or other person?	e direct supers	all	3		х
	Did the organization make any significant changes to its governing documents since the prior Form 9	200 was filed?		4		X
-	Did the organization become aware during the year of a significant diversion of the organization's as:	A CONTRACTOR OF THE PARTY OF TH		5		X
5		ALC: ALC:		6		X
6	Did the organization have members or stockholders, or other persons who had the power to elect or a			0		A
7a	[1] 크림(1), 리티(1) [1] [1] (1) (1) [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	100mm - 100mm	Were Storm Sc	7a		х
	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, s			74		A
		accordinaters, or	Ū	7b		x
	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the ve	as by the following		70		Α
8			7700	0-	х	
n	The governing body?			8a	X	
ь	Each committee with authority to act on behalf of the governing body?		1-1-11-11-11-11-	8b	^	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	iched at the		9		х
Sac	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			y		Α
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code.)				
	Did the considering have been been been been been been by a stiffer to 2		1	40-	Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a	_	Δ.
D	If "Yes," did the organization have written policies and procedures governing the activities of such of	napters, aman	rs,	404		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	. No fore dillor	h. f	10b	х	_
0.00	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	ly before fring I	he form?	11a	Λ	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				х	
12n	Did the organization have a written conflict of interest policy? If "No," go to line 13	to an afficient		12a	X	-
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12b	Δ.	-
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If *					
	on Schedule O how this was done			12c	X	_
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	^	
15	Did the process for determining compensation of the following persons include a review and approvi		ont			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				х	
a	The organization's CEO, Executive Director, or top management official			15a		
D	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	and the same of th				
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange					v
	taxable entity during the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua-	10. 10. 10. 10. 10. 10. 10. 10. 10. 10.	non			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nization's				
6	exempt status with respect to such arrangements?			16b		_
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed FL	- 4000 T (on EDALLISM			- Le
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	ind 990-1 (secti	on 501(c)(3)8	only)	avaitat	010
	for public inspection. Indicate how you made these available. Check all that apply.		01			
46		n on Schedule			del	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, or	orifict of intere	st policy, and	mark	2686	
	statements available to the public during the tax year.		3			
20	State the name, address, and telephone number of the person who possesses the organization's bo MAXINE BROWN-WEBSTER - 954-522-2911 1717 NORTH ANDREWS AVENUE. FORT LAUDERDALE. FL. 33		8			

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.

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

- 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.

(A) Name and title	(B) Average hours per week	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	individual truthe or director.	Institutional tractes	Official	Rey employee	Highest compensable employee	Symet	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) KIRK BROWN	40.00		П	200		1	P		1	W
CHIEF EXECUTIVE OFFICER		\vdash	L	Х		A	1	162,447.	0.	0.
(2) MAXINE BROWN-WEBSTER	40.00			63	4	v	1			39
CHIEF PINANCIAL OFFICER		┕		Х		_		92,033.	0.	0.
(3) DESIREE SAUNDERS	40.00	1		S		10		- N (2000)		
VP OF DEVELOPMENT		┖		X				88,669.	0.	0.
(4) NARDEGE LAFOREST	40.00		0	4	(a)		Г	(33) 9225	1 20	12
CHIEF PROGRAM OFFICER		1	1	X	7	₽	⊢	81,283.	0.	0.
(5) PHILIP DEBIASI	4.00	6	1	V	10			2	20	125
BOARD CHAIR		X		Х	g/	⊢	⊢	0.	0.	0.
(6) KATHLEEN THOMSEN	4.00			7				2	2	2
VICE BOARD CHAIR		X	10	X		-	⊢	0.	0.	0.
(7) SHEA SMITH	4.00		b."					2	2	2
VICE CHAIR PROGRAM DEVELOP	4.00	Х		Х	-	-	H	0.	0.	0.
(8) PAUL MINOFF	4.00	٧					1		2	
VICE CHAIR HOUSING	4.00	Х	⊢	Х	-	-	Н	0.	0.	0.
(9) MICHAEL WILD	4.00									
VICE CHAIR LEGAL	2.00	Х	\vdash	Х	-	-		0.	0.	0.
(10) LINA NAGEONDELESTANG SECRETARY	2.00	x		x				0.	0.	0.
(11) ADAM SPIEGEL	2.00							86	1 syl	88
TREASURER		Х		Х				0.	0.	0.
(12) DAN YOUNG	2.00							63	82	
IMMEDIATE PAST CHAIR		X	\perp	Х		_	\perp	0.	0.	0.
(13) JULIE BLACKMORE	2.00							88	85	
DIRECTOR		Х				_		0.	0.	0.
(14) CHARMAINE BORDA	2.00						1		831	- 0
DIRECTOR		X	┡			-	┡	0.	0.	0.
(15) STEPHANIE PORTUNE	2.00	-						92	2	929
DIRECTOR		X	-		-		1	0.	0.	0.
(16) ISABEL GONZALEZ	2.00	-						8		121
DIRECTOR		X	-			-	-	0.	0.	0.
(17) TERI KAYE	2.00									
DIRECTOR		X						0.	0.	0.

Form 990 (2023)

DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) 59-2507617 Page 8

Part VII Section A. Officers, Directo (A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
(18) TODD KIRKPATRICK	(list any hours for related organizations below line)	individual trattee or director	nathutonal trades	Officer	Gay employee	Highest companished employee	famer	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	from the organization and related organizations	
(18) TODD KIRKPATRICK	2.00						- 1	3		- 3	
DIRECTOR		X						0.	0.	0.	
(19) MARIE MCGINLEY DIRECTOR	2.00	x						0.	0.	0.	
(20) RICARDO MONCADA	2.00		П	П	7		- 1				
DIRECTOR	100000000000000000000000000000000000000	X						0.	0.	0.	
(21) MELISSA SHIFF	2.00				-					422	
DIRECTOR	10000000	X						0.	0.	0.	
(22) MICHELLE SWEET	2.00			П					A	602	
DIRECTOR	12.00.5000	X						0.	0.	0.	
(23) DAN WOBBY	2.00							0		92	
DIRECTOR	10000000	X					-	0.	0.	0.	
(24) ANDREW WONG	2.00				2		- 0		1	- 20	
DIRECTOR	1,0000-700	X						0.	0.	0.	
(25) KEVIN WORRELL	2.00					1	9	100	1	95	
DIRECTOR		X				1		0.	0.	0.	
(26) ANDRE GONZALEZ	2.00				4	r			1		
DIRECTOR	10.00	X					-	0.	0.	0.	
1b Subtotal						1		424,432.	0.	0.	
c Total from continuation sheets to	Part VII, Section A		4		-			0.	0.	0.	
d Total (add lines 1b and 1c)	One of the Control of		di.	7	Dr.	- Harr		424,432.	0.	0.	

Total number of individuals (including but not limited to those listed above) who rece

			Yes	No
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			1000
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization		10000	
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X	-
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			10000
2772	rendered to the organization? # "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

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.

(B) Description of services	(C) Compensation
OFFICE LEASE	233,232.
EVENT COORDINATION	113,480.
	OFFICE LEASE

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2023)

\$100,000 of compensation from the organization

(B) Average				C)			(D)	(E)	(F)
hours	(c	Position (check all that apply)				(v)	Reportable compensation	Reportable compensation	Estimated amount of
per week (list any hours for related organizations below line)	des ar director	999	Officer	Key employee	Highest compensated employee	Farmer	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
2.00	x						0.	0.	0
2.00	x						0.4	0.	0
2.00			П		П		- 46		
2.00	X	\vdash	Н			_	0.	0.	0
2.00	х		L				0.	0.	0
	-	H	H		H				
	H	H	H		H		\cup		
	-	L	H		d	0			
	H	L	H	4	P			<u>, , , , , , , , , , , , , , , , , , , </u>	
	-			7	6	Ĺ	× .		
		6	1	2					
	1	L	P	À	P				
4		-	Ы	7					
	7	0							
	1								
	(list any hours for related organizations below line) 2.00	(list any hours for related organizations below line) 2.00 X 2.00 X 2.00 X 2.00	(list any hours for related organizations below line) 2.00 X 2.00 X 2.00 X 2.00	(list any hours for related organizations below line) X 2.00 X 2.00 X 2.00	(list any hours for related organizations below line) 2.00 X 2.00 X 2.00 X 2.00 X 2.00	(list any hours for related organizations below line) 2.00 X 2.00 X 2.00 X 2.00	(list any hours for related organizations below line) 2.00 X 2.00 X 2.00 X 2.00 X 2.00	(list any hours for related organizations below line) 2.00 X 2.00 X 2.00 X 2.00 X 2.00 X 2.00 X 2.00 0.00	(list any hours for related organizations below line) X 2.00 X 2.00

Form 990 (2023)

DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) 59-2507617

Pai	t VII		onnonio.	or note to any line	s in this Dort VIII			
		Check if Schedule O contains a	европве	or note to any an	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
22 99	1 a	Federated campaigns	1a					
in the	b		1b					
98	c	Fundraising events	1c	45,849.				
#Z	d	Related organizations	1d					
양웹		Government grants (contributions)	10	1,906,448.			100	
53	1	All other contributions, gifts, grants, and	20	D0000000000000000000000000000000000000			4	
哲智		similar amounts not included above	1f	1,724,147.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f	1g S	86,065.		:4		
용된	h	Total, Add lines 1a-1f			3,676,444.	-00		
				Business Code				
8	2 a	7					V	
Program Service Revenue	b							
8 2	c						W	
E Se	d					1 4		
27	0		_		-			
۵.	1	All other program service revenue						
-	-	Total, Add lines 2a 2f				-		
	3	Investment income (including divider other similar amounts)			22,220.			22,220
	4	Income from investment of tax-exem		enonade				22,220
	5	Royalties	ре воем р	roceeds	-//		- 0	
	9		Real	(ii) Personal	1700		3	
	6 0		22,742.		7. 0			
	b	Less: rental expenses 6b	0.		1			
	0		22,742.					
	d	Net rental income or (loss)			22,742.			22,742
			ocurities	(ii) Other			T T	-
		assets other than inventory 7a		111.11	An .			
	b	Less: cost or other basis		A 76				
9		and sales expenses 7b		40 40				
Revenue	o	Gain or (loss) 7c		100			2	
Be		Net gain or (loss)					2	
Other		Gross income from fundraising events (n including \$ 45,849., contributions reported on line 1c). Se Part IV, line 18	of so 8a	Contract to the same of the same of				
		Less: direct expenses Net income or (loss) from fundraising		279,9921	637,292.		-	637,292
		Gross income from gaming activities			***************************************			007,000
	. w . a	Part IV, line 19						
	h	Less: direct expenses	9b	_				
		Net income or (loss) from gaming act						
		Gross sales of inventory, less returns			1			
		and allowances						
	ь	Less: cost of goods sold	108				120	
		Net income or (loss) from sales of inv		uncumber and				4
200	10.000			Business Code	7		8	7
500	11 a	MISCELLANEOUS		900099	114,885.			114,885
BUR	ь			1	7		37	
alec ave	c							
Miscellaneous Revenue	d	All other revenue			N		8	
_		Total. Add lines 11a-11d			114,885.			
	12	Total revenue. See instructions			4,473,583.	0,	0,	797,139.

16560212 790347 241634

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 (B) (D) Fundraising Do not include amounts reported on lines 6b, Program service expenses Management and general expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 510,741. 510,741. individuals. See Part IV. line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 442,130. 369,822. 33,760. 38,548. trustees, and key employees 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 2,176,745. 1,817,824. 180,290. 178,631. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 281,411. 23,337. 235,073. 23,001. Other employee benefits 214,414. 179,108. 17,525. 17,781. 10 Payroll taxes Fees for services (nonemployees): Management Legal Accounting Lobbying Professional fundraising services, See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 322,146. 111,183. column (A), amount, list line 11g expenses on Sch O.) 137,633. 73,330. 33,777. 140,683. 80,354. 26,552. Advertising and promotion 12 32,985. 24,648. 3,820. 4,517. 13 Office expenses 14 Information technology Royalties 15 428,115. 369,784. 35,553. 22,778. Occupancy 16 47,545. 44,883. 2,662. 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 20 Payments to affiliates 21 18,030. 197,926. 161,027. 18,869. Depreciation, depletion, and amortization 22 57,629. 46,096. 8,653. 2,880. 23 Other expenses, Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 71,005. 99,709. 13,191. 15,513. SPECIFIC ASSISTANCE 3,272. REPAIRS AND MAINTENANCE 50,585. 41,867. 5,446. 14,069. 4,553. 9,206. 310. STAFF TRAINING 4,771. d DUES AND SUBSCRIPTIONS 7,319. 1,466. 1,082. 11,221. 2,918. 7,578. 725. All other expenses 5,035,373. 4,096,609. 458,708. 480,056. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if tollowing SOP 98-2 (ASC 958-720)

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 987,854. 449,650. Cash - non-interest-bearing 1 190,137. 191,500. 2 2 Savings and temporary cash investments 290,789. 354,782. 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 8 Inventories for sale or use 8 21,757. 36,815. 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 2,054,562. basis. Complete Part VI of Schedule D 10a 988,957. 1,217,115. 1,065,605. 10b 10c b Less: accumulated depreciation 11 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 2,443,910. 2,276,388. 15 Other assets. See Part IV, line 11 15 5,151,562. 4,374,740. 16 16 Total assets, Add lines 1 through 15 (must equal line 33) 145,449. 183,523. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 290,562. 246,817. 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons. 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 2,458,135. 2,324,922. 2,932,220. 2,717,188. 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here Assets or Fund Balances and complete lines 27, 28, 32, and 33, 1,822,453. 27 1,447,629. Net assets without donor restrictions 396,889. 209,923. Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 31 2,219,342. 1,657,552. 32 Total net assets or fund balances 32 5,151,562. 4,374,740. Total liabilities and net assets/fund balances

Check if Schedule O contains a response or note to any line in this Part XI 1 Total revenue (must equal Part XII, column (A), line 12) 2 Total expenses (must equal Part XI, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 3 -561, 790. 4 Not assets or fund belances at beginning of year (must equal Part X, line 32, column (A)) 4 Not assets or fund belances at beginning of year (must equal Part X, line 32, column (A)) 5 Not unrealized gains (posses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund belances (explain on Schedule O) 10 Not assets or fund belances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 Total services and use of facilities 11 Accounting method used to prepare the Form 990: Cash Accrual Other 12 If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 13 Were the organization's financial statements audited by an independent accountant? 14 "Yes," check a box below to indicate whether the financial statements for the year were composed or exceeded on a separate basis. Consolidated basis, or both: 15 Separate basis Consolidated basis Both consolidated and separate basis 16 Were the organization's financial statements audited by an independent accountant? 17 If "Yes," check a box below to indicate whether the financial statements for the year were composed or exceeded on a separate basis. 16 Total consolidated basis Both consolidated and separate basis 17 Consolidated basis Consolidated basis Both consolidated and separate basis. 28 X 29 X 30 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, or both: 29 X 30 As a result of a federal award, was 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 accou		t XI Reconciliation of Net Assets	0,017	7.00	9.16
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 3 -561,790. 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash X Accrual Other 1 He organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization is financial statements completed or reviewed by an independent accountant? 1 H'Yes," check a box below to indicate whether the financial statements for the year were completed or reviewed on a separate basis. 2b Were the organization's financial statements and selection of an independent accountant? 2c X 1 H'Yes," check a box below to indicate whether the financial statements for the year were accepted or reviewed on a separate basis. 2c If 'Yes,' check a box below to indicate whether the financial statements for the year were acceptable for the audit, review, or compliation of its financial statements and selection of an independent accountant? 2b X 1 H'Yes," check a box below to indicate the selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 3b If "Yes," did the organization undergo the required addit or audits? If the briganization did not undergo the required audit or audits,	Pa				
2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 3 -561,790. 4 Net assets or fund belances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund belances (explain on Schedule O) 9 0. 10 Net assets or fund belances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 Net assets or fund belances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 11 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements completed or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were completed or seviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. C if "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to sudderso an audit or audits as set forth in t	_	Check if Schedule O contains a response or note to any line in this Part XI			
2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 3 -561,790. 4 Net assets or fund belances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund belances (explain on Schedule O) 9 0. 10 Net assets or fund belances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 Net assets or fund belances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 11 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements completed or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were completed or seviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. C if "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to sudderso an audit or audits as set forth in t	1	Total revenue (must equal Part VIII, column (A), line 12)	4,47	3,58	33.
3	2	-0.747 (1.757 (1.754 (1			
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 9 0. Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (8)) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (8)) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (8)) 11 Accounting method used to prepare the Form 990:	3		-56	1,79	0.
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 9 Other changes in net assets or fund balances (explain on Schedule O) 9 Other changes in net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (8)) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (8)) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (8)) 11 Accounting method used to prepare the Form 990: Cash X Accrual Cher If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 11 Accounting method used to prepare the Form 990: Cash X Accrual Cher If the organization's financial statements compiled or reviewed by an independent accountant? 11 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: 12 Separate basis Consolidated basis Both consolidated and separate basis. 13 Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: 14 Yes, check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 15 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? 12 Yes If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 13 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. Pert 200, Subpart F? 13 If the organization of a federal award, was the organization r	4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4	2,21	9,34	12.
7 Investment expenses 7 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 9 0. Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (Bi) 1, 657 , 552. Part XIII Financial Statements and Reporting Check If Schedule O contains a response or note to any line in this Part XII	5	- 3.3 P. 1.1.2.1.1.2.1.2.1.2.1.2.1.3.1.3.1.1.1.1.	20000-1000	W11-100	
8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 9 O. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 I, 657, 552. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	6	Donated services and use of facilities 6			
9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 1, 657, 552. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No	7	Investment expenses 7			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990; Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? Begarate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? Were the organization's financial statements audited by an independent accountant? Were the organization's financial statements audited by an independent accountant? Were the organization's financial statements audited by an independent accountant? X Separate basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis C If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. Sa 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? By If "Yes," did the organization undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits By It "Yes," did the organization by on Schedule O and describe any steps taken to undergo such audits By It "Yes," did the organization why on Schedule O and describe any steps taken to undergo such audits	8	Prior period adjustments			-
column (Bi) 1, 657, 552. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII X The organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? By the organization's financial statements compiled or reviewed by an independent accountant? By the organization's financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Soperate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? By the organization's financial statements audited by an independent accountant? The separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis. Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separa	9	Other changes in net assets or fund balances (explain on Schedule O)			0.
Check If Schedule O contains a response or note to any line in this Part XII Check If Schedule O contains a response or note to any line in this Part XII Check If Schedule O contains a response or note to any line in this Part XII Yes No Yes No 1 Accounting method used to prepare the Form 990: Cash X Accrual Other, explain on Schedule O. 2a Were the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X Yes, check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2b X If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 3a X b If "Yes," did the organization undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits 3b In the organization who on Schedule O and describe any steps taken to undergo such audits	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,			
Check if Schedule O contains a response or note to any line in this Part XII Yes No Yes No Accounting method used to prepare the Form 990:			1,65	7,55	52.
Yes No Accounting method used to prepare the Form 990;	Pa	t XIII Financial Statements and Reporting			2000
1 Accounting method used to prepare the Form 990:		Check if Schedule O contains a response or note to any line in this Part XII			X
separate basis, consolidated basis	1 2a	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	- 2a		х
consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c if "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 3a X b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits 3b	b	separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	2b	х	
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. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 3a X b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits 3b		consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 3a X b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits 3b		review, or compilation of its financial statements and selection of an independent accountant?	2c	х	
Uniform Guidance, 2 C.F.R. Part 200, Subpart F? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits 3b					
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits 3b	3a	1800년 이 나타지어가는 이 전에 다른 이번 내가 되었다. 이번 이 자연이 가면 나를 되었다. 하는 사람들은 이 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은			
or audits, explain why on Schedule O and describe any steps taken to undergo such audits 3b			3a	-	Λ
	ь				
	_	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	36	000 -	2000

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

Inspection

HELPING ADVANCE AND NURTURE THE Name of the organization DEVELOPMENT OF YOUTH, INC. (HANDY, INC.)

Employer identification number

59-2507617 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). A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990),) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi), (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/396 of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization yested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, 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 (III) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10) organization support (see instructions) support (see instructions) Yes above (see instructions))

DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) 59-2507617 Page 2

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.)

Sec	tion A. Public Support	700	3000	112				
Cale	idar year (or fiscal year beginning in)	(a) 2019	(p) 5050	(c) 2021	(d) 2022	(e) 2023	(f) Total	1
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2961441.	2937065.	3946403.	5273149.	3630595.	1874865	53.
2	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf			2		4		
3	The value of services or facilities furnished by a governmental unit to the organization without charge				4	1		
4	Total, Add lines 1 through 3	2961441.	2937065.	3946403.	5273149.	3630595.	1874865	53.
5	The portion of total contributions					7		
	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,				0	b		
	column (f)			OP.			215553	21
	Public support, Subtract line 5 from line 4.			- 11	- 10		1659312	
	tion B. Total Support			- 6			дозэзаг	
-	idar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(e) 2021	(d) 2022	(e) 2023	(f) Total	i
	Amounts from line 4	2961441.	2937065.	3946403.	5273149.	3630595.		
	Gross income from interest.							
77	dividends, payments received on		, in					
	securities loans, rents, royalties,							
	and income from similar sources	10,488.	21,221.	20,981.	20,001.	44,962.	117.65	53.
9	Net income from unrelated business		- 4					
	activities, whether or not the			b-				
	business is regularly carried on		111 11 1	~				
10	Other income. Do not include gain		1					
	or loss from the sale of capital	1 1	0	5790000 200-2000	MATERIAL PROPERTY.	-0-030-010-000	0.0000000000000000000000000000000000000	
	assets (Explain in Part VI.)	:		130,818.	35,665.	114,885.	281,36	58.
11	Total support. Add lines 7 through 10						1914767	
12	Gross receipts from related activities,	etc. (see instructio	ns) ///			12 2	,601,35	54.
	First 5 years. If the Form 990 is for the organization, check this box and stop	o here	~	ourth, or fifth tax y	year as a section 5	01(c)(3)		
	tion C. Computation of Publi	Commence of the Party of the Pa	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN				06.66	
	Public support percentage for 2023 (202000000			14	86.66	96
	Public support percentage from 2022					15	90.52	96
16a	33 1/3% support test - 2023. If the o stop here. The organization qualifies							X
	33 1/3% support test - 2022. If the		선생님이 아름아 가는 얼마나 있다.		lina 15 is 99 1/394			Tar.
	and stop here. The organization qual			2200				
170	10% -facts-and-circumstances test				13 16a or 16b a			_
	and if the organization meets the fact	20 No. 10 No. 10 No. 10 No. 10 No.						
	aria e are organization meste are race				en and broad and	Trion and organi		
	meets the facts and circumstances to	SE TOU ORGANIZATION			AND DESCRIPTION OF THE PARTY OF			
b	meets the facts and circumstances te 10% -facts-and-circumstances test						10% or	
b	10% -facts-and-circumstances test	- 2022. If the org	anization did not o	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or	
b		- 2022. If the org	anization did not di stances test, che	heck a box on line ok this box and st	13, 16a, 16b, or 1 top here. Explain i	7a, and line 15 is n Part VI how the	10% or	

Schedule A (Form 990) 2023 DEVELOPMENT OF YOUTH, INC. (HA 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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not				1.790/00/2000		
32	include any "unusual grants.")				_		
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513				- //	10	
4	Tax revenues levied for the organ- ization's benefit and either paid to					(
2	or expended on its behalf					-	
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
			_	-	A	+	
	Total. Add lines 1 through 5			- 11		+	
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	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			1			
	Add lines 7a and 7b		- 4	. 0			
	Public support. (Subsettine 7: hom line 6)						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	WW. 1000000				1	
10:	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		V				
t	Unrelated business taxable income		1				
	(less section 511 taxes) from businesses acquired after June 30, 1975	-	1				
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	U					
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)					3	14
14	First 5 years. If the Form 990 is for the	organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organization	on,
	check this box and stop here	unorumoto concessos	unterestera communicació		HIGH HELD WATER		
Se	ction C. Computation of Public	Support Per	rcentage	1000	1.000 - 111 2.0		11000
15	Public support percentage for 2023 (lin	e 8, column (f), c	fivided by line 13,	column (f))		15	9
_	Public support percentage from 2022 5					16	9
Se	ction D. Computation of Invest	ment Income	e Percentage				
17	Investment income percentage for 202	3 (line 10c, colu	mn (f), divided by I	ne 13, column (f))		17	
	Investment income percentage from 2				menummen men	18	9
19:	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line 17	7 is not
t	more than 33 1/3%, check this box and 33 1/3% support tests - 2022. If the						ind
-	line 18 is not more than 33 1/3%, chec						
20	Private foundation. If the organization						

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	2.6		
	1		_
	2		
	3a		
	8 0		
	3b		
	3c		_
	4a		_
	4b		
	An.		
	4c		
	5a		
	5b		
	5c		_
	6		
	7		_
	8		_
	9a		_
	9b		
	9c		_
	10a		
	10b		
lule	A (Form	n 990)	2023

Par	IV Supporting Organizations (continued)			
0000			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	2.6		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a	-	_
	A family member of a person described on line 11a above?	11b		_
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	4.0		
Sect	detail in Pert VI. ion B. Type I Supporting Organizations	11c		_
3601	on B. Type I Supporting Organizations		Yes	No
	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	1	Tes	NO
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	100000		
	organization(s) that operated, supervised, or controlled the supporting organization? // "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
		_	Yes	No
	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). ion D. All Type III Supporting Organizations	1	_	_
9601	ion b. All Type III Supporting Organizations		J	
	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	61		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		<u> </u>
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	s).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
ь	The organization is the parent of each of its supported organizations. Complete line 3 below.		0.00	
2	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see Activities Test. Answer lines 2a and 2b below.	nstruction	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	F- 1	105	140
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	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	10		
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	122		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		_
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	133.		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		6

332025 12-21-23 Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) 59-2507617 Page 6

Par 1	t V Type III Non-Functionally Integrated 509(a)(3) Supportin Check here if the organization satisfied the Integral Part Test as a qualifyin			Part VI). See instruction
	All other Type III non-functionally integrated supporting organizations must			
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or		4	
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6	/	
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see		1000	
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		7
1.50	Average monthly cash balances	1b	2	
	Fair market value of other non-exempt-use assets	10	A	
_	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors	100	bodl .	
	(explain in detail in Part VI):	- 1		
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,	40		
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from tine 4, unless subject to	6		
7	emergency temporary reduction (see instructions) Check here if the current year is the organization's first as a non-functional		of Tono III as a section	almotion to a

Schedule A (Form 990) 2023

instructions).

HELPING ADVANCE AND NURTURE THE

Schedule A (Form 990) 2023 DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) 59-2507617 Page 7

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (contin	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exem				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpos	ses of supported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is responsive		(0.1	
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6		_//	9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2023	ns	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			3	
2	Underdistributions, if any, for years prior to 2023 (reason-	8		- 0	
	able cause required - explain in Part VI). See instructions.			- 1	
3	Excess distributions carryover, if any, to 2023			- 8	
a	From 2018	All I	4		
b	From 2019			9.0	
c	From 2020		Total II		
d	From 2021	. Altr		3 8	
0	From 2022				
t	Total of lines 3a through 3e				
q	Applied to underdistributions of prior years	W. 60		- 1	
h	Applied to 2023 distributable amount				
-	Carryover from 2018 not applied (see instructions)		+		
1	Remainder, Subtract lines 3g, 3h, and 3i from line 3f.	4		- 0	
4	Distributions for 2023 from Section D, line 7:				
n	Applied to underdistributions of prior years			- 1	
	Applied to 2023 distributable amount	A			
	Remainder, Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.	F			
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in				
-	Part VI. See instructions.	7			
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:	1			
a	Excess from 2019	1			
b	Excess from 2020	0		3 3	
	Evenes from 2021	SI (2)			

Schedule A (Form 990) 2023

Excess from 2022
 Excess from 2023

HELPING ADVANCE AND NURTURE THE

DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) 59-2507617 Page 8 Schedule A (Form 990) 2023 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B

Department of the Treasury Internal Revenue Service

(Form 990)

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545 0047

2023

Name of the organization

HELPING ADVANCE AND NURTURE THE DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) Employer identification number

59-2507617

Filers of: Section: Form 990 or 990-EZ X 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions total property) from any one contributor. Complete Parts I and II. See instructions for determining a contribut Special Rules	
4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special General Rule For an organization filing Form 990, 990 EZ, or 990 PF that received, during the year, contributions total property) from any one contributor. Complete Parts I and II. See instructions for determining a contribut Special Rules	
527 political organization	1
Form 990-PF	
4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (6), or (10) organization can check boxes for both the General Rule and a Special General Rule For an organization filing Form 990, 990 EZ, or 990 PF that received, during the year, contributions total property) from any one contributor. Complete Parts I and II. See instructions for determining a contribut Special Rules	
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Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special II General Rule For an organization filing Form 990, 990 EZ, or 990 PF that received, during the year, contributions total property) from any one contributor. Complete Parts I and II. See instructions for determining a contribut)
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special I General Rule For an organization filing Form 990, 990 EZ, or 990 PF that received, during the year, contributions total property) from any one contributor. Complete Parts I and II. See instructions for determining a contribut Special Rules	
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special I General Rule For an organization filing Form 990, 990 EZ, or 990 PF that received, during the year, contributions total property) from any one contributor. Complete Parts I and II. See instructions for determining a contribut Special Rules	
General Rule For an organization filing Form 990, 990 EZ, or 990 PF that received, during the year, contributions total property) from any one contributor. Complete Parts I and II. See instructions for determining a contribut Special Rules	Rule. See instructions.
For an organization filing Form 990, 990 EZ, or 990 PF that received, during the year, contributions total property) from any one contributor. Complete Parts I and II. See instructions for determining a contribut Special Rules	
property) from any one contributor. Complete Parts I and II. See instructions for determining a contribut Special Rules	
property) from any one contributor. Complete Parts I and II. See instructions for determining a contribut Special Rules	
Special Rules	(B. 1 1 1 1 1 1 1 1.
	or's total contributions.
TVI s	
X For an organization described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% support	ort test of the regulations under
sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b,	[10] [10] [10] [10] [10] [10] [10] [10]
contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on	
or (ii) Form 990-EZ, line 1. Complete Parts I and II.	the cost and the same state
3 (4) 3 (1) 3	
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received fro	m any one
contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable,	
literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts	
"N/A" in column (b) instead of the contributor name and address), II, and III.	, (unusung
Terr in contain populational on the continuous marie and accordingly in the in-	
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fro	m any one contributor, during the
year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled	기업하다면 전환 시간 나는 살아 없는 것이 없는데 없다.
is checked, enter here the total contributions that were received during the year for an exclusively religi	
purpose. Don't complete any of the parts unless the General Rule applies to this organization because	
religious, charitable, etc., contributions totaling \$5,000 or more during the year	
respond among to a commonder town of the part and the last and the las	
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B	(Form 990) but it must
answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-	(19) (19) (19) (19) (19) (19) (19) (19)
that it doesn't meet the filing requirements of Schedule B (Form 990).	

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

Schedule B (Form 990) (2023)

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BANK OF AMERICA FOUNDATION 401 EAST LAS OLAS BLVD, STE 2100 FT LAUDERDALE, FL 33301	ss	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE JIM MORAN FOUNDATION 100 JIM MORAN BLVD DEERFIELD BEACH, FL 33442	s 345,506.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	UNITED WAY OF BROWARD COUNTY 1300 S ANDREWS AVE FT LAUDERDALE, FL 33316	s <u>86,885.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	MOSS FOUNDATION, INC. 2101 NORTH ANDREWS AVENUE SUITE 300 FT LAUDERDALE, FL 33311	ss	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	THE FREDERICK A. DELUCA FOUNDATION, INC. 500 EAST BROWARD BLVD, STE 2300 FT LAUDERDALE, FL 33394	s 112,057.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	YOLLES CHARITABLE FOUNDATION INC 3100 NORTH OCEAN BLVD #701 FT LAUDERDALE, FL 33308	ss	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additions	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	BROWARD COLLEGE 111 EAST LAS OLAS BLVD FT LAUDERDALE, FL 33301	s81,133.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	CAREER SOURCE BROWARD 6301 NW 5TH WAY STE 3000 FT LAUDERDALE, FL 33309	s91,801.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	CHILDREN'S SERVICES COUNCIL OF BROWARD 6600 W COMMERCIAL BLVD LAUDERHILL, FL 33319	s 1,390,012.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	PERLMAN FAMILY FOUNDATION, INC. 3200 SW 42ND ST HOLLYWOOD, FL 33312	s150,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	BEST BUY FOUNDATION 300 BRICKSTONE SQUARE STE 601 ANDOVER, MA 01810	s133,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	BROWARD COUNTY - ECOSTA 115 S ANDREWS AVE FORT LAUDERDALE, FL 33313	s104,732.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	fitional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	COMMUNITY FOUNDATION OF BROWARD 910 EAST LAS OLAS BLVD FORT LAUDERDALE, FL 33304	s107,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	JM FAMILY ENTERPRISES, INC. 111 JIM MORAN BLVD. DEERFIELD BEACH, FL 33316	ssssssss	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		s	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		s	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		s	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		= 1	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a)		\$	
No. from Part I	(b) Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
-		= s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	, -
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-			

Name of organization Employer identification number HELPING ADVANCE AND NURTURE THE DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) 59-2507617 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious. charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

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

2023 Open to Public

Name of the organization

HELPING ADVANCE AND NURTURE THE

DEVELOPMENT OF YOUTH, INC. (HANDY, INC.)

Employer identification number 59-2507617

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line to		s or Accounts. Complete if the
		(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 wri	ting that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's ex		Yes No
6	Did the organization inform all grantees, donors, and donor adv	isors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor or d	lonor advisor, or for any other purpose	conterring
-	impermissible private benefit?	The second secon	Yes No
Pai	rt II Conservation Easements. Complete if the organ		Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	2000 CONTROL OF CONTROL PRINTING	
	Preservation of land for public use (for example, recreation		of a historically important land area
	Protection of natural habitat	Preservations	of a certified historic structure
72	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the form	/
	day of the tax year.		Held at the End of the Tax Year
u			2a
b	Total acreage restricted by conservation easements		
c	Number of conservation easements on a certified historic struct		2c
d	Number of conservation easements included on line 2c acquire	d after July 25, 2006, and not	100
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	sed, extinguished, or terminated by th	e organization during the tax
	year		
4	Number of states where property subject to conservation easer	200	•
5	Does the organization have a written policy regarding the period		prompt prompt
2	violations, and enforcement of the conservation easements it is		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	nating of violations, and enforcing con	servation easements during the year
_	Amount of expenses incurred in monitoring, inspecting, handlin	and violations, and enforcing economic	otion cocoments during the uses
7	Amount or expenses incurred in monitoring, inspecting, narded	g or violations, and emorcing conserv	ation easements during the year
8	Does each conservation easement reported on line 2d above sa	disfutbe requirements of section 1700	by/AVEVI)
	and parties 1705/(DISDO	로 사내 경영 중앙 이 사람들은 사람들이 얼마나 없었다.	Ty.,
0	In Part XIII, describe how the organization reports conservation	easements in its revenue and expense	CHICAGO CONTRACTOR CON
ँ	balance sheet, and include, if applicable, the text of the footnot		
	organization's accounting for conservation easements.	e to the organization a time total action	THE STATE STATE STATE STATE
Pai	t III Organizations Maintaining Collections of A	rt, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form 98	[40] [12] [13] [14] [14] [15] [15] [15] [15] [15] [15] [15] [15	
10	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	- 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
	service, provide in Part XIII the text of the footnote to its financia		
b	If the organization elected, as permitted under FASB ASC 958,		
100	art, historical treasures, or other similar assets held for public ex	일하다 하다 있었다. 이 아이들 때문에 되었다면 없는 사람들이 되었다.	
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		s
2	If the organization received or held works of art, historical treasure		
10.5	the following amounts required to be reported under FASB ASC		
. 0	: (1) : ()		
b	Assets included in Form 990, Part X		s

332051 09-28-23

Schedule D (Form 990) 2023

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

HELPING ADVANCE AND NURTURE THE

	rt III Organizations Maintaining C	ollections of Art				ets (continued)
3	Using the organization's acquisition, accessi-					Teres in secure
	collection items (check all that apply).					
8	Public exhibition	d	Loan or ex	change program		
b	Scholarly research			67 1972		
c	Preservation for future generations					
4	Provide a description of the organization's co	ollections and explain	how they further	the organization's e	xempt purpose in Pa	art XIII.
5	During the year, did the organization solicit of			나는 이 시간 (100명) 이번 전에 가장 없었다.	1640 T. H.	
	to be sold to raise funds rather than to be mi					Yes No
Pai	rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa	TOUR SOURCE OF THE PROPERTY OF	te if the organization	on answered "Yes" o	on Form 990, Part IV	, line 9, or
1a	Is the organization an agent, trustee, custodi on Form 990, Part X?	an, or other intermed	fiary for contribution	ns or other assets r	not included	Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:			
		•		0		Amount
C	Beginning balance			4	/1c	7777010000
d	Additions during the year				1d	
	Distributions during the year				Te	
1	Ending balance			100	11	. 90 1727.2
2a	Did the organization include an amount on F-				ibility?	Yes No
	If "Yes," explain the arrangement in Part XIII.			**************************************		
Pai	rt V Endowment Funds Complete if	the organization ans	swered "Yes" on Fo	orm 990, Part IV, line	e 10.	5000 O CONT. C. P. C. C. C.
		(a) Current year	(b) Prior year	(c) Two years back	k (d) Three years ba	ck (e) Four years back
ta	Beginning of year balance	77.00.7072.001.				
b	A CONTRACTOR OF	9			9	1 ()
c	Net investment earnings, gains, and losses					
d	Grants or scholarships	8				10
0	Control of the contro					
	Administrative expenses			12	12	1 2
	End of year balance		100			
2	Provide the estimated percentage of the curr	ont year and balance	dino 1n mohimm (all hold as:		-
	Board designated or quasi-endowment		76	ayy riona aa.		
h	Permanent endowment	96				
c		96	W.			
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%				
30	Are there endowment funds not in the posse		tion that are held a	and administered for	r the	
97.77	organization by:					Yes No
	(i) Unrelated organizations?					3n(i)
	(iii) Palatada a a a la companio de la companio del la companio de					0.00
b	If "Yes" on line 3a(ii), are the related organiza					3b
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.			
Pai	rt VI Land, Buildings, and Equipm	ent	- A 501 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A	24 - 12 W - 12 - 12 CW - 12 US	0.00 i 0.00 ii	
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a.	See Form 990, Part	X, line 10.	
	Description of property	(a) Cost or o basis (investre	20 000 000 000 000 000 000 000 000 000) Accumulated depreciation	(d) Book value
10	Land					
b	Buildings	73				
0	Leasehold improvements		1.7	75,608.	759,491.	1,016,117.
d	Equipment			74,954.	229,466.	45,488.
	Other			4,000.		4,000.
_	I. Add lines 1a through 1e. (Column (d) must e	and From 200 Pari	V Sue 10e selve			1,065,605.

Schedule D (Form 990) 2023

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c. column (B))

Schedule D (Form 990) 2023 DEVELOPMENT Part VII Investments - Other Securities	OF YOUTH, IN	IC. (HANDY, INC.) 59	-2507617 Page 3
Complete if the organization answered "Yes" or	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	d-of-year market value
(1) Financial derivatives	20000-0000-0000		
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)		A	
(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" of	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	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)		W. 30	
(6)			
(7)			
(8)	- /		
(9)	117		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets	100000000000000000000000000000000000000		
Complete if the organization answered "Yes" or	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
The state of the s	Description		(b) Book value
(1) DEPOSITS			76,260.
(2) OPERATING LEASE RIGHT OF U	SE ASSET		2,200,128.
(3)			
(4)	4		
(5)	100		
(6)			
(7)			
(8)			
(9)	1		-
Total. (Column (b) must equal Form 990, Part X line 15, col. Part X Other Liabilities	(B))		2,276,388.
Complete if the organization answered "Yes" or	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
 (a) Description of liability 			(b) Book value
(1) Federal income taxes			
(2) CURRENT PORTION OF OPERATI	NG LEASE		
(3) LIABILITY	0.000 (0.000)		148,028.
(4) LONG TERM PORTION OF OPERA	TING		
(5) LEASE LIABILITY		<u> </u>	2,176,894.
(6)			
(7)			
(8)			

Total. (Column (b) must equal Form 990, Part X, line 25, col. (Bi) 2, 324,

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) 2023

2,324,922.

(9)

100	mplete if the organization answered "Yes" on Form 990, Part	IV. line 12a		
1 Total rever	nue, gains, and other support per audited financial statemen		1	4,473,583.
	ncluded on line 1 but not on Form 990, Part VIII, line 12:	C. Innerenmenthandeleliminen		-//
	ized gains (losses) on investments	2a		
	ervices and use of facilities	11111000 11111111111		
	s of prior year grants	20240		
	scribe in Part XIII.)	U1101000000000000000000000000000000000		
	2a through 2d		2e	0.
	ne 2e from line 1		3	4,473,583.
4 Amounts in	ncluded on Form 990, Part VIII, line 12, but not on line 1:		4	
	t expenses not included on Form 990, Part VIII, line 7b	40	The second	
b Other (Des	scribe in Part XIII.)		/	
c Add lines	\$4.50 NO - 1.00 NO 1 ALEXANDER - 1.00 NO 1.		40	0.
5 Total rever	nue. Add lines 3 and 4c. (This must equal Form 990, Part I. li	ne 12.)	5	4,473,583.
Part XII Re	conciliation of Expenses per Audited Financia	al Statements With Expens	es per Return	1
Cor	mplete if the organization answered "Yes" on Form 990, Part	IV, line 12a.	450	
1 Total expe	nses and losses per audited financial statements		1	5,035,373.
2 Amounts in	ncluded on line 1 but not on Form 990, Part IX, line 25:			
a Donated s	ervices and use of facilities	28		
b Prior year	adjustments	26		
c Other loss				
d Other (Des	scribe in Part XIII.)	2d		
e Add lines :	2a through 2d		2e	0.
3 Subtract li	ne 2e from line 1		3	5,035,373.
4 Amounts in	ncluded on Form 990, Part IX, line 25, but not on line 1:		3172.03.19.20.1	
a investment	t expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Des	scribe in Part XIII.)	4b		
c Add lines	4a and 4b		4c	0.
5 Total expe	nses. Add lines 3 and 4c. (This must equal Form 990, Part I.	line 18.1	5	5,035,373.
ines 2d and 4b;	and Part XII, lines 2d and 4b. Also complete this part to prov	ide any additional information.		
	6			

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number Name of the organization HELPING ADVANCE AND NURTURE THE DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) 59-2507617 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Ð ь Internet and email solicitations f Solicitation of government grants Phone solicitations Special fundraising events c In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid (iii) Did fundraiser have custody or control of (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) ontributions Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

LHA 332081 09-13-23

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

Schedule G (Form 990) 2023

DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) 59-2507617 Page 2

		(a) Event #1 SCHOLARS	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
		BREAKFAST	MOONRISE	5	col. (c))
		(event type)	(event type)	(total number)	000 (0)
1	Gross receipts	392,115.	472,949.	188,146.	1,053,210
2	Less: Contributions			45,849.	45,849
3	Gross income (line 1 minus line 2)	392,115.	472,949.	142,297.	1,007,361
	Cash prizes				
*	Count preses				
5	Noncash prizes	9			
6	Rent/facility costs				
			- 6		
7	Food and beverages				-
8	Entertainment				
9	Other direct expenses		239,065.	72,963.	370,069
10					370,069
11	Net income summary. Subtract line 10 from				637,292
		(a) Bingo	blingo/progressive bingo	(c) Other gaming	col. (a) through col.
1	Gross revenue	-			
2	Cash prizes		~		
3	Noncash prizes				
4	Rent/facility costs				
5	Other direct expenses				
6	Volunteer labor	Yes %	Yes% No	Yes %	
7	Direct expense summary. Add lines 2 throu	igh 5 in column (d)			
	Net gaming income summary, Subtract line				
	recegaring moone summary. Coolerant in	r nomina i, ociona (a)			
	ter the state(s) in which the organization con				
	the organization licensed to conduct gaming No,* explain:				Yes N
We	ere any of the organization's gaming licenses	revoked, suspended, or te	erminated during the tax v	ear?	Yes N
	Yes," explain:				
_					
_					dule G (Form 990)

HELPING ADVANCE AND NURTURE THE

Sch	dule G (Form 990) 2023	DEVELOPMENT OF YOUTH, INC	C. (HANDY, INC.) 59-	2507617	Page 3
11	Does the organization conduct	gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, be	neficiary or trustee of a trust, or a member of a partn	ership or other entity formed		Carrier Control
	to administer charitable gaming	?		Yes	No
13	Indicate the percentage of gam	ng activity conducted in:		Escape I	
a	The organization's facility			13a	96
b				13b	96
14	Enter the name and address of	the person who prepares the organization's gaming/s	special events books and records:		
	Name				
	Address		4		
15a	Does the organization have a co	ontract with a third party from whom the organization	receives gaming revenue?	Yes	☐ No
b	그녀는 그 집에 가지를 하고 있다고 있었다. 그 하는 사이를 가는 것이 되었다.	ming revenue received by the organization \$ _	and the amount		
	of gaming revenue retained by	he third party \$			
c	If "Yes," enter name and address	s of the third party:			
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation				
	Description of services provided		3673		
	Director/officer	Employee Independent co	physical		
	bractoronica		milactor		
17	Mandatory distributions:				
		er state law to make charitable distributions from the	a gamina proceeds to		
- "	retain the state gaming license?		garing processes to	Yes	No
b		is required under state law to be distributed to other	exempt organizations or spent in the		
	organization's own exempt acti				
Pa		ormation. Provide the explanations required by Pa	art I, line 2b, columns (iii) and (v); and Pr	ert III, lines 9,	9b, 10b,
		as applicable. Also provide any additional information			
_					
_					
_					

HELPING ADVANCE AND NURTURE THE

The state of the s	LOTI LONG 4
Part IV Supplemental Information (continued) DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) 59-250	
6.7	
A	
Pb.	dule G (Form 90

SCHEDULE (Form 990)

Internal Revenue Service

Name of the organization

Department of the Treasury

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.

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

HELPING ADVANCE AND NURTURE THE

Open to Public OMB No. 1545-0047

Employer identification number

Inspection

2 59-2507617 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, (petpo) (e) Amount of assistance noncash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. INC. (d) Amount of cash grant Entar total number of section 501(c)(3) and government organizations listed in the line 1 table (HANDY, (c) IRC section (if applicable) INC. Enter total number of other organizations listed in the line 1 table DEVELOPMENT OF YOUTH, General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government. Parti Part II

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

Schedule I (Form 990) 2023

HELPING ADVANCE AND NURTURE THE

DEVELOPMENT OF YOUTH, INC. (HANDY, INC.)

Page 2

59-2507617

Schedule | (Form 990) 2023 DEVELOPMENT OF YOUTH, INC. (HANDY, INC.)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

monant or admit an enterior of monant of the control of the contro					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	9	47,377.	.0	0,0087	
EDUCATIONAL ASSISTANCE & WORK ASSISTANCE	Ø)	1,038,	0.	0,0087	
SOCIAL RECREATION ACTIVITIES/INCENTIVES	88	46,322,	*0	9,003,0	
EMERGENCY NEEDS ASSISTANCE	2988	164,695,	5	0,0087	
MEALS/REFRESHMENTS	133	46, 321,		0,0087	
Part IV Supplemental Information. Provide the information required in Part II, line 2, Part III, column (b); and any other additional information.	equired in Part I, line	2; Part III, column	(b); and any other ad	ditional information.	
PART I, LINE 2:					
HERETAL MEMORAL AND ADDRESS AN	DESTRUCTION	Omittee die	NAME AND ADD	THE WATER WATER	

WRITTEN POLICIES & PROCEDURES ARE REVIEWED AND MONITORED BY MANAGEMENT WITH

AND ITS COMMITTEES, DRIVEN BY THE THE ASSISTANCE OF THE BOARD OF DIRECTORS,

ORGANIZATION'S VISION & MISSION.

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Schedule Form 990) DEVELOPMENT OF YOUTH, INC. (HANDY, INC.	YOUTH, IN	I, INC. (HANDY,	INC.)		59-2507617 Page 2
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
TRANSPORTATION	80.	164,004.		2.002.0	
HOLIDAY GIPTS/CERTIFICATES	198,	.006,6		COST	
CLIENT INCENTIVES	213.	7,516.		0,0057	
BACK TO SCHOOL SHOPPING	186,	.19,041,	7	2500	
BUS PASSES	63,	6,117.		0, COST	
	7				
					Schedule I (Form 990)

SCHEDULE J (Form 990)

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 for instructions and the latest information.

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

HELPING ADVANCE AND NURTURE THE DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) Employer identification number 59-2507617

				Yes	No
a	Check the appropriate box(es) if the organization provided	그들은 아이들 아는 아이들 이 내려가 되면 하게 하나 하는 그리고 있는데 아이들을 하는데			1
	Part VII, Section A, line 1a. Complete Part III to provide an	y relevant information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	 Payments for business use of personal residence 			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (such as maid, chauffeur, chef)			
ь	If any of the boxes on line 1a are checked, did the organization	ation follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses describe	ed above? If "No," complete Part III to explain	1b		
	Did the organization require substantiation prior to reimbur	rsing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director	or, regarding the items checked on line 1a?	2		
	Indicate which, if any, of the following the organization use	and to establish the compensation of the overviewhen's			
	그렇게 되었다. 이 이 없는 것이 하게 되었습니다. 그 이 없는 이 구시 점에 하고 있습니다. 이 경기를 받는데 없다.	k any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, bu				
	Compensation committee	Written employment contract			
		X Compensation survey or study			
	Independent compensation consultant	X Approval by the board or compensation committee			
	Form 990 of other organizations	Approval by the board or compensation committee			
	During the year, did any person listed on Form 990, Part V	11, Section A, line 1a, with respect to the filing			
	organization or a related organization:				7,000
a	Receive a severance payment or change-of-control payme	nt?	4a		X
b	Participate in or receive payment from a supplemental non	qualified retrement plan?	4b		X
c	Participate in or receive payment from an equity-based cor	mpensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organiz	ations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a	a, did the organization pay or accrue any compensation			
	contingent on the revenues of:				
а	The organization?		5a		X
ь			5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.	•	-		1000
5	For persons listed on Form 990, Part VII, Section A, line 1a	a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:				
a	The organization?		6a		Х
ь	Any related organization?		6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.		1 3		
7	For persons listed on Form 990, Part VII, Section A, line 1a	a. did the organization provide any nonfixed payments			
	이 대회 가는 아이들이 하는 이번에 하는 아름다면서 가지 않는데 이 사람들이 없는데 아이를 내려면서 하는 사람이 되었다면서 다른데 나를 다 되었다.	II	7		х
3	Were any amounts reported on Form 990, Part VII, paid or				-
	initial contract exception described in Regulations section	53 4058 4(a)/3/2 If "Vos." describe in Dort III	8		x
		33.4530-4a r ii Tes, describe iii Part iii	-		1000
9	If "Yes" on line 8, did the organization also follow the rebu	ttable presumption procedure described in			

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

Schedule J (Form 990) 2023

59-2507617 INC.) HELPING ADVANCE AND NURTURE THE

(HANDY, INC. DEVELOPMENT OF YOUTH,

Schedule J (Form 990) 2023

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Do not list any individuals that aren't listed on Form 990, Part VII.

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

		(B) Breakdown of W	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	7		reported as deferred on prior Form 990
(1) KIRK BROWN	8	162,447.	0.	.0	0.	0.	162,447.	0.
CHIEF EXECUTIVE OPPICER	1	0.	.0	0.	.0	0.	.0	0.
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							Schedu	Schedule J (Form 990) 2023

Schedule J (Form 990) 2023 DEVEL Part III Supplemental Information

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.

SCHEDULE M (Form 990)

Noncash Contributions

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

Open to Public

59-2507617

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

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

HELPING ADVANCE AND NURTURE THE DEVELOPMENT OF YOUTH, INC. (HANDY, Inspection Employer identification number

OMB No. 1545-0047

Types of Property (a)(b) (c) (d) Noncash contribution Number of Check if Method of determining amounts reported on contributions or applicable noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art 2 Art - Historical treasures Art - Fractional interests 3 Books and publications 5 Clothing and household goods 6 Cars and other vehicles Boats and planes Intellectual property 8 Securities - Publicly traded Securities - Closely held stock 10 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures Qualified conservation contribution - Other Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 18 Collectibles 19 Food inventory 20 Drugs and medical supplies Taxidermy 21 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 86,065.U.S WHOLESALE PRICE/ FUNDRAISING ITE 25 Other 26 Other 27 Other 28 Other 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 No Yes 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for х exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II. х 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? b If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

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

Schedule M (Form 990) 2023

HELPING ADVANCE AND NURTURE THE

riedule ivi	(Form 990) 2023 Supplemental	DEVELOP	MENT OF	TOUTH	INC.	(HANDY,	INC.)	59-2507617	Page
art II	Supplemental is reporting in Part this part for any a	I Information t I, column (b), the dditional informa	 Provide the ne number of tion. 	e information contributions	required by , the numb	Part I, lines 30 er of items rece	b, 32b, and 3 sived, or a com	3, and whether the organiz abination of both. Also com	ation plete
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SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

HELPING ADVANCE AND NURTURE THE INC. DEVELOPMENT OF YOUTH, INC. (HANDY,

Employer identification number 59-2507617

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: INDIVIDUAL NEEDS OF A CHILD THAT TAKE THEM FROM EARLY CHILDHOOD TO ADULTHOOD. THE ORGANIZATION HAS MET THE NEEDS OF MORE THAN 50,000 BROWARD COUNTY CHILDREN AND YOUTH IN FOSTER, RELATIVE AND NON-RELATIVE THEY HAVE PROVIDED HOPE, ENCOURAGEMENT AND INSPIRATION TO CARE. AT-RISK YOUTH ASSOCIATED WITH BROWARD COUNTY'S DEPENDENCY SYSTEM.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: SELF-ADVOCACY LEARNING AND MORE. THE ORGANIZATION'S LIFE PROGRAM ANNUALLY SERVES OVER 525 MIDDLE, HIGH SCHOOL, AND COLLEGE AGE YOUTH. IN ADDITION, HANDY PROVIDES ASSISTANCE WITH EMERGENCY NEEDS FOR FOOD AND CLOTHING, BACK TO SCHOOL SUPPLIES AND CLOTHES, AND/OR HOLIDAY GIFTS.

FORM 990, PART VI, SECTION B, LINE 11B:

A COPY OF FORM 990 IS REVIEWED BY THE EXEMPT ORGANIZATION'S CHAIRMAN & TREASURER.

FORM 990, PART VI, SECTION B, LINE 12C:

OFFICERS SELF-REPORT CONFLICTS OF INTEREST TO THE BOARD OF DIRECTORS ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF DIRECTORS' FINANCE COMMITTEE REVIEWS THE COMPENSATION OF THE TOP EXECUTIVE OFFICIALS ANNUALLY AND DETERMINES COMPARABLE SALARY BASED ON

RESEARCH OF NATIONAL AND LOCAL INFORMATION FOR NON-PROFIT EXECUTIVES.

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

Schedule O (Form 990) 2023

332211 11-14-25

Name of the organization HELPING ADVANCE AND NURTURE THE DEVELOPMENT OF YOUTH, INC. (HANDY, INC.)	Employer identification number 59-2507617
DEVIDENT OF TOOTH, THEY (HENDE), THEY	, 0, 2,0,,02,
FORM 990, PART VI, SECTION C, LINE 18:	
AVAILABLE UPON REQUEST.	
DODY OOA DADE UT GEGETON G. T.THE 10.	
FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.	
DOCUMENTS AVAIDABLE TO THE PUBLIC OFON REQUEST.	0
FORM 990, PART XII, LINE 2C	
NO CHANGE FROM PRIOR YEAR.	

Form 8868

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information. OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/efile-providers/efile-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Type or HELPING ADVANCE AND NURTURE THE Print 59-2507617 DEVELOPMENT OF YOUTH, INC. (HANDY, INC.) File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filling your 1717 NORTH ANDREWS AVENUE City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. FORT LAUDERDALE, FL 33311 Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return Application Is For Return Code Code Form 4720 (other than individual) Form 990 or Form 990-EZ 01 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 8870 12 Form 5330 (individual) Form 990-T (trust other than above) 06 13 Form 5330 (other than individual) 07 Form 990-T (corporation) 14 08 After you enter your Return Code, complete either Part II or Part III, Part III, including signature, is applicable only for an extension of time to file Form 5330. If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of MAXINE BROWN-WEBSTER 1717 NORTH ANDREWS AVENUE - FORT LAUDERDALE, FL 33311 Telephone No. 954-522-2911 Fax No. If the organization does not have an office or place of business in the United States, check this box. If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box _____ and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until MAY 15 ,20 25 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 _____ or X tax year beginning JUL 1 .20 23 JUN 30 2024 , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3cο.

HANDY - APPROVED BUDGET FY 2024-2025	
HANDT - APPROVED BUDGET FT 2024-2025	7/1/24-6/30/25
REVENUE:	
Foundation Grant Income - Existing & New	1,475,502
Government Grants & Contracts	2,160,069
County Grant - Youth Placements/Youth Stipend	11,000
Revenue from Interns Employers for Placements -Fringe Benefits	2,073
Contributions-General	428,327
Special Events Gross - (Major & 3rd Party)	1,112,000
Rental Income	22,296
Other Miscel Revenue	0
Miscel. Revenue -Rent Credits	33,996
Inter-Company Revenue	67,800
In-Kind Contributions	
Total Revenues	5,313,063
EXPENSES:	
Salaries/Benefits and Taxes	3,252,542
County Grant - Gross Wages Youth Interns/Youth Stipend	11,000
County Grants - Youth Placements Interns - Fringe Benefits Bank Charges/CC Processing Fees	2,073 6.144
Equipment Lease/Repairs & Maintenance	10,848
Dues/Subscriptions/Licenses/seminars	28,047
Occupancy:	
Utilities, Bldg Mnt, Insurance, Telephone,	220,478
Rental of Property - Admin Office	328,397
Postage & Printing	4,960
Program & General Office Supplies	40,438
Inter-Company Expenses	5,000
Professional Fees/Contractual Services	365,205
Direct Fundraising Expenses	334,000
Vehicle Mnt-Repairs, & Staff Travel	59,932
In-Kind Expenses -(Events,Thks.Giving, Holiday Gifts)	0
Client Assistance:	
Scholarships & Educational Assistance	90,138
Back to School Shopping & Holiday GiftsG/C, etc	25.200
Emergency Needs-(Rent,Food,Utilities,Clothing ,Health)	148,051
Client Meals/Refreshments for Meetings	58,400
Client Transport -Contracted Transportation	138,557
Client Bus Passes	15,100
Life Soc Rec/Camp/Incentives	53,001
Total Expenses	5,197,511
Changes In Net Assets - Before Depreciation	115,552
Estimated Depreciation	190,800
Changes In Net Assets - After Depreciation	(75,248)
onangoo iii not noocto - nitoi poprociation	(13,240)

Line Item	Description
Personnel- Salary	Program Manager approx 8% of salararies and benefits
Transportation	\$500 x 4 Field trips (50 youth)
Resume4Life Programming	STEAM Education activities, Career Exploration Activities, Entrepreneurial Activities
Food/Snacks	Food/snacks for field trips \$40 x 50 youth
Tech Center Mobile Makers Space	Sphero mini activity kits, irobot, build a bridge kit for kids and 3d painting filament (20 youth per activity)
Total Budget	
Total buuget	

Total	
\$	6,000.00
\$	2,000.00
\$	5,000.00
\$	3,000.00
\$	4,000.00
\$ 2	20,000.00

Exhibit "B" Payment Schedule

A. AWARD DISBURSEMENTS

The awards disbursement process will begin in October, 1 and end in September, 30 for the fiscal year that this contract is approved.

B. PAYMENT SCHEDULE

The total amount awarded for the HELPING ADVANCE AND NURTURE THE DEVELOPMENT OF YOUTH, INC. for Handy YouthForce for the current fiscal year is: <u>Fifteen Thousand Dollars</u> (\$15,000.00).

There will be four (4) payout/s during the period (depending on the amount awarded to each organization):

- 1. The first (1st) will equal twenty-five percent (25 %) of the total allocation or Three Thousand Seven Hundred and Fifty Dollars (\$3,750.00); be issued in advance. For any funds advanced the RECIPIENT agrees to provide the CITY with an itemization of how funds advanced were spent, along with invoices and proof of payment. Such an accounting must be provided to the CITY in the quarterly narrative and financial report as indicated in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description. Failure to comply with this requirement may result in the denial of the future requests for payments.
- 2. The second (2nd) will equal twenty-five percent (25%) of the total allocation or <u>Three Thousand Seven Hundred and Fifty Dollars (\$3,750.00)</u>; will be issued upon receipt AND approval of the second quarterly narrative and financial report (including any additional requested documents);
- 3. The third (3rd) payout will equal twenty-five percent (25%) of the total allocation or <u>Three Thousand Seven Hundred and Fifty Dollars (\$3,750.00)</u>; will be issued upon receipt AND approval of the third quarterly narrative and financial report (including any additional requested documents);
- 4. The fourth (4th) payout will be the final twenty-five percent (25%) of the total allocation or Three Thousand Seven Hundred and Fifty Dollars (\$3,750.00) and will be issued in upon receipt AND approval of the final quarterly narrative and financial report (including any additional requested documents).

All payments and reporting requirements apply for each project which is a part of the awarded contract. Payments and reports shall be handled separately for each project.

EXHIBIT C

INSURANCE REQUIREMENTS: NON PROFIT ORGANIZATION

ORGANIZATION shall not commence services under the terms of this Agreement until certification or proof of insurance detailing terms and provisions has been received and approved in writing by the CITY's Risk Manager. If you have questions regarding the insurance requirements hereunder, please contact the City's Purchasing Department at (954) 786-4098. If the contract has already been awarded, please direct any queries and proof of the requisite insurance coverage to City staff responsible for oversight of the subject project/contract.

ORGANIZATION is responsible to deliver to the CITY for timely review and written approval/disapproval Certificates of Insurance which evidence that all insurance required hereunder is in full force and effect and which name on a primary basis, the CITY as an additional insured on all such coverage. Such policy or policies shall be issued by United States Treasury approved companies authorized to do business in the State of Florida. The policies shall be written on forms acceptable to the City's Risk Manager, meet a minimum financial A.M. Best and Company rating of no less than Excellent, and be part of the Florida Insurance Guarantee Association Act. No changes are to be made to these specifications without prior written approval of the City's Risk Manager.

Throughout the term of this Agreement, CITY, by and through its Risk Manager, reserve the right to review, modify, reject or accept any insurance policies required by this Agreement, including limits, coverages or endorsements. CITY reserves the right, but not the obligation, to review and reject any insurer providing coverage because of poor financial condition or failure to operate legally.

Failure to maintain the required insurance shall be considered an event of default. The requirements herein, as well as CITY's review or acceptance of insurance maintained by ORGANIZATION, are not intended to and shall not in any way limit or qualify the liabilities and obligations assumed by ORGANIZATION under this Agreement.

Throughout the term of this Agreement, ORGANIZATION and all subcontractors or other agents hereunder, shall, at their sole expense, maintain in full force and effect, the following insurance coverages and limits described herein, including endorsements.

- A. Worker's Compensation Insurance covering all employees and providing benefits as required by Florida Statute, Chapter 440, regardless of the size of the company (number of employees) or the state in which the work is to be performed or of the state in which the ORGANIZATION is obligated to pay compensation to employees engaged in the performance of the work. ORGANIZATION further agrees to be responsible for employment, control and conduct of its employees and for any injury sustained by such employees in the course of their employment.
 - B. Liability Insurance.
- (1) Naming the City of Pompano Beach as an additional insured as City's interests may appear, on General Liability Insurance only, relative to claims which arise from

ORGANIZATION'S negligent acts or omissions in connection with Contractor's performance under this Agreement.

Such Liability insurance shall include the following checked types of (2) insurance and indicated minimum policy limits.

Type of Insurance

Limits of Liability

GENERAL LIABILITY: Minimum \$1,000,000 Per Occurrence and \$2,000,000 Per Aggregate

* Policy to be written on a claims incurred basis

* Policy to be written on a claims incurred basis										
XX XX —	comprehensive form premises - operations explosion & collapse hazard underground hazard	bodily injury and property damage bodily injury and property damage								
\overline{XX}	products/completed operations hazard	bodily injury and pr	operty damage co	ombined						
XX XX XX XX	contractual insurance broad form property damage independent contractors personal injury	bodily injury and property damage combined bodily injury and property damage combined personal injury								
XX —	sexual abuse/molestation liquor legal liability	Minimum \$1,000,00 Minimum \$1,000,00								
AUT	OMOBILE LIABILITY:	Minimum \$10,000/\$20,000/\$10,000								
XX XX	comprehensive form owned hired non-owned									
REA	L & PERSONAL PROPERTY	,								
	comprehensive form	Agent must show proof they have this coverage.								
EXC	ESS LIABILITY		Per Occurrence	Aggregate						
_	other than umbrella	bodily injury and property damage combined	\$1,000,000	\$1,000,000						
PRO	FESSIONAL LIABILITY		Per Occurrence	Aggregate						

* Policy to be written on a claims made basis \$1,000,000 \$1,000,000

- (3) If Professional Liability insurance is required, Contractor agrees the indemnification and hold harmless provisions of Section 12 of the Agreement shall survive the termination or expiration of the Agreement for a period of three (3) years unless terminated sooner by the applicable statute of limitations.
- C. Employer's Liability. ORGANIZATION and all subcontractors shall, for the benefit of their employees, provide, carry, maintain and pay for Employer's Liability Insurance in the minimum amount of One Hundred Thousand Dollars (\$100,000.00) per employee, Five Hundred Thousand Dollars (\$500,000) per aggregate.
- D. Policies. Whenever, under the provisions of this Agreement, insurance is required of the ORGANIZATION, the ORGANIZATION shall promptly provide the following:
 - (1) Certificates of Insurance evidencing the required coverage;
 - (2) Names and addresses of companies providing coverage;
 - (3) Effective and expiration dates of policies; and
- (4) A provision in all policies affording CITY thirty (30) days written notice by a carrier of any cancellation or material change in any policy.
- E. Insurance Cancellation or Modification. Should any of the required insurance policies be canceled before the expiration date, or modified or substantially modified, the issuing company shall provide thirty (30) days written notice to the CITY.
- F. Waiver of Subrogation. ORGANIZATION hereby waives any and all right of subrogation against the CITY, its officers, employees and agents for each required policy. When required by the insurer, or should a policy condition not permit an insured to enter into a pre-loss agreement to waive subrogation without an endorsement, then ORGANIZATION shall notify the insurer and request the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others, or its equivalent. This Waiver of Subrogation requirement shall not apply to any policy which includes a condition to the policy not specifically prohibiting such an endorsement, or voids coverage should ORGANIZATION enter into such an agreement on a pre-loss basis.



NMITEVSKA



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/30/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER. AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER CIC Hotaling 2301 NW 87th Suite 401	Insurance Services LLC Ave	CONTACT NAME: PHONE (A/C, No, Ext): (305) 393-8981 EMAIL ADDRESS: Info@hgfin.net							
Doral, FL 331	72	ADDITEGO:	INSURER(S) AFFORDING CO	OVERAGE	NAIC#				
		INSURER A:	Philadelphia Indemnity I	nsurance Co	18058				
INSURED		INSURER B							
	Helping Advance and Nurture The Development of Youth, Inc.	INSURER C	APPROVED	Daniel Boo	hon				
	2101 N Andrews Ave Wilton Manors, FL 33311-3946								
'			By Daniel Beecher	at 10:19 am, Aug	18, 2025				
		INSURER F							
COVEDAGE	CERTIFICATE NUMBER:		PEVIS	ION NUMBER:					

CERTIFICATE NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE			SUBR		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
Α	X COMMERCIAL G	ENERAL LIABILITY						EACH OCCURRENCE	\$	1,000,000
	CLAIMS-MA	DE X OCCUR	Х		PHPK2657502-009	3/18/2025	3/18/2026	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000
								MED EXP (Any one person)	\$	5,000
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN'L AGGREGATE L	IMIT APPLIES PER:						GENERAL AGGREGATE	\$	3,000,000
	X POLICY P	RO- ECT LOC						PRODUCTS - COMP/OP AGG	\$	3,000,000
	OTHER:								\$	
Α	AUTOMOBILE LIABILI	TY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	ANY AUTO				PHPK2657502-009	3/18/2025	3/18/2026	BODILY INJURY (Per person)	\$	
	OWNED AUTOS ONLY	SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
	X HIRED AUTOS ONLY	X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
	7.0.00 0.12.	7.0100 0.1.21						,	\$	
Α	X UMBRELLA LIAB	X OCCUR						EACH OCCURRENCE	\$	1,000,000
	EXCESS LIAB	CLAIMS-MADE	≣		PHUB901253-009	3/18/2025	3/18/2026	AGGREGATE	\$	
	DED X RET	ENTION \$ 10,000)					Aggregate	\$	1,000,000
	WORKERS COMPENSAND EMPLOYERS' LIA	RILITY						PER OTH- STATUTE ER		
	ANY PROPRIETOR/PAR	RTNER/EXECUTIVE T	N/A					E.L. EACH ACCIDENT	\$	
	OFFICER/MEMBER EXC (Mandatory in NH)	CLUDED?	N/A					E.L. DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	
Α	T				PHPK2657502-009	3/18/2025	3/18/2026	OCC/AGG		1,000,000
Α	Prof Liability				PHPK2657502-009	3/18/2025	3/18/2026	OCC/AGG		1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Certificate holder is included as additional insured with respect to the General Liability on a Primary and Non-Contributory basis as required by written contract.

CERTIFICATE HOLDER	CANCELLATION
City of Pompano Beach 100 West Atlantic Boulevard Pompano Beach, FL 33060	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
r ompano Beach, i E 33000	AUTHORIZED REPRESENTATIVE
	mad that y

HOTALING INS SVCS 8 FLETCHER PLACE MELVILLE, NY 11747

APPROVED Daniel Beacher By Daniel Beecher at 10:20 am, Aug 18, 2025



Named insured

HANDY 1717 NORTH ANDREWS AVENUE TAMARAC, FL 33311

Commercial Auto Insurance Coverage Summary

This is your Declarations Page Your coverage has changed

Policy number: 860052566

Underwritten by:
Progressive Express Ins Company
July 22, 2025
Policy Period: Jul 11, 2025 - Jul 11, 2026
Page 1 of 2

progressiveagent.com Online Service

Make payments, check billing activity, print policy documents, update your policy or check the status of a claim.

1-845-790-5082

HOTALING INS SVCS

Contact your agent for personalized service.

1-800-444-4487

For customer service if your agent is unavailable or to report a claim.

Your coverage began the later of July 11, 2025 at 12:01 a.m. or the effective time shown on your application. This policy period ends on July 11, 2026 at 12:01 a.m.

This coverage summary replaces your prior one. Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for an auto may not be combined with the limits for the same coverage on another auto, unless the policy contract allows the stacking of limits. The policy contract is form 6912 (02/19). The contract is modified by forms 2852FL (02/19), 1652FL (02/23), 4757FL (02/19), Z311 (02/19), 4852FL (02/19), 4881FL (02/19), Z228 (01/11) and Z313 (04/21).

The named insured organization type is a corporation.

Policy changes effective July 11, 2025

Changes processed on	July 21, 2025 11:48 a.m.
Premium change:	\$0.00
Changes:	The mailing address information has changed.

The changes shown above will not be effective prior to the time the changes were requested.

Outline of coverage

Description	Limits	Deductible	Premium
Liability To Others		***************************************	\$3,638
Bodily Injury and Property Damage Liability	\$300,000 combined single limit		40,020
Uninsured Motorist - Nonstacked	\$300,000 combined single limit	***************************************	1.034
Basic Personal Injury Protection			199
Without Work Comp-Named Insured Only	\$10,000 each person	\$0	
Medical Payments	\$5,000 each person		73
Comprehensive		***************************	98
See Auto Coverage Schedule	Limit of liability less deductible		
Collision		***** *********************************	242
See Auto Coverage Schedule	Limit of liability less deductible		
Rental Reimbursement		***********************	46
See Auto Coverage Schedule			
Roadside Assistance			7
See Auto Coverage Schedule	Limit of liability less deductible		•
Total 12 month policy premium			\$5,337



Rated drivers

- 1. Stephanie Williams
- 2. Dominique Martineau
- 3. Martha Thomas

Liability

Auto coverage schedule

2024 CHEVROLET EXPRESS G3500 Actual Cash Value (plus \$2,000.00 Permanently Attached Equip) VIN: 1GAZGPFP2R1206324 Garaging Zip Code: 33311 Radius: 50 miles

Personal use: N Body type: Passenger Van

Liability	Dability Premium	Premium	Premium Premium	Med Pay Premium	
Premium	\$3638	\$1034	\$199	\$73	
Physical Damage	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	
Premium	\$500	\$98	\$500	\$242	
Other Coverages	Rental Limit	Rental Premium	Roadside Deductible	Roadside Premium	uto Total
Premium	\$30 per day Max \$900	\$46	\$0	\$7	5,337

Med Pay

Premium discounts

Policy	
860052566	Paid In Full and Multi-Product
Vehicle	
2024 CHEVROLET EXPRESS G3500	Anti-Lock Brakes, Airbag and Anti-Theft Device Standard

Policyholder inquiries

You may call your agent at 1-845-790-5082 to present inquiries or obtain information about coverage, and to obtain assistance with any complaints.

Agent signature

Mark Part

Potricial Court

Company officers

Secretary

GULS04D 001000

APPLICATION FOR VEHICLE/VESSEL CERTIFICATE OF TITLE

114242550

TITLE NUMBER	,	VEHICLE/VESSEI	DENTIFICATI	ON#	YR. MA	KE MAKE or MANUFACTURER	TYPE	VEHIC	LE COLOR	WT/LE	ENGTH	PRINC OPER	PL G	VW/LO
155629408	1G	AZGPFP2R1	206324		2024	CHEV	VN	WHI		6205		-		
	TRANS CODE	VEHICLE USE	HULL MATERIAL	PROPU	LSION	ENGINE FUEL DRIVE		SEL PE	WATER	F <u>i</u> . NL	JMBER		JTH ESTRU	TION
07 23 25	TRT	PRIVATE												,
Applicant//	Owner's No	erne & Address						·————	BIRTH SEX MO.		R Y	RESID	ENT ALIEN	CNT RES.
HELPIN	NG ADV		NURTURE	THE DI	EVELO	PMENT OF YOUTI	ł				X			10
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ction Reque	sted:	TRANSFER	TITLE				Branc	is:						
REV. STATE	DA	ATE ACQUIRED	NEW	USED	ODO	METER / VESSEL MANU	FACTURER					ODO	METER	
		07/09/2025	DATE OF LIEN	XX	1	802 MI 07/09/2025 /			ND DATE OF	BIRTH		CER	CCOUN	ON ION
IEN INFORM	/ATIO	07/09/2025	DATE OF LIEN	*****	19,8	802 MI 07/09/2025 /	DR FL/DLA		ND DATE OF	BIRTH	and the same of th	CER	TIFICAT	ON ION
IEN INFORMATE OF FIRST LIENFORMESS ELLER INFORME OF SELLER, FLOER ENTERPRISHODORESS 2150 N STATILAUDERDAL LAUDERDAL LAUDERDAL LICENSE NO. VI10241991	MATIO: HOLDER: DRMATORIDADE E LEAS TE RD 7 LE LAK	07/09/2025 N CION ALER, OR OTHER	R PREVIOUS O	WNER	19,8	802 MI 07/09/2025 A	DR FL/DLA	AND SEX A		BIRTH		CER	TIFICAT	ON ION
IEN INFORM ME OF FIRST LIENF DRESS ELLER INFO ME OF SELLER, FLO ENTERPRISI DRESS 2150 N STAT LAUDERDAI ALER LICENSE NO.	MATIO: HOLDER: DRMATORIDADE E LEAS TE RD 7 LE LAK	07/09/2025 N CION ALER, OR OTHER	R PREVIOUS O	WNER	19,8	802 MI 07/09/2025 A	E TYPE	AND SEX A		T#	21592	DEC CER DMVA	TIFICAT	ON ION
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HELPING ADVANCE AND NURTURE THE DEVELOPMENT **OF YOUTH**

2101 N ANDREWS AVE WILTON MANORS, FL 33311-3946

- 1. The Florida license plate must remain with the registrant upon sale of vehicle.
- 2. The registration must be delivered to a Tax Collector or Tag Agent for transfer to a replacement vehicle.
- 3. Your registration must be updated to your new address within 30 days of moving.
- 4. Registration renewals are the responsibility of the registrant and shall occur during the 30-day period prior to the expiration date shown on this registration. Renewal notices are provided as a courtesy and are not required for renewal purposes.
- 5. I understand that my driver license and registrations will be suspended immediately if the insurer denies the insurance information submitted for this registration.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/6/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

	is certificate does not confer rights				ıch en	dorsement(s)		require	an endo	orsement	. AST	atement on
	DUCER	CONTACT NAME: Certificates Department										
10:	Insurance Marketing Inc 167 W Sunrise Blvd, 3rd Floor	PHONE (A/C, No, Ext): 888-728-0817 FAX (A/C, No): 954-452-0450										
	entation FL 33322	E-MAIL ADDRESS: Certificates@bbimi.com										
		INSURER(S) AFFORDING COVERAGE							NAIC#			
						INSURER A: AmTrust North America Inc						42376
	red Iping Advance and Nurture the Dev	اممام	mont	HELPABU-01	INSURE	RB:						
	17 N Andrews Avenue	elobi	пеп	. Or Toutil, IIIC	INSURE	RC:						
Ft.	Lauderdale FL 33311-7834				INSURE	R D :						
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	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERA	AL AGGREC	GATE	\$	
	POLICY PRO- JECT LOC	By	Dai	niel Beecher at 10	:21 a	m, Aug 1	8, 2025	PRODUCTS - COMP/OP AGG \$				
	OTHER:								ES ANIAL		\$	
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	ANY AUTO							BODILY	INJURY (P	er person)	\$	
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A	AND EMPLOYERS' LIABILITY Y / N			TWC4529568		1/1/2025	1/1/2026		R ATUTE	OTH- ER		
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A							CH ACCIDE		\$ 1,000	
	(Mandatory in NH) If yes, describe under									EMPLOYEE		
	DÉSCRIPTION OF OPERATIONS below							E.L. DISE	EASE - POL	LICY LIMIT	\$ 1,000	0,000
Soc Ce	cription of operations / Locations / vehic cial Services Organization located at 17 rtificate Holder is additional insured with icy.	17 N	Andre	ews Avenue, Fort Lauderda	ale, FL	33311.		•	ed Endo	rsement a	attache	d to the
	-											
CE	RTIFICATE HOLDER				CANO	CELLATION						
	City of Pompano Beach	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.										
	100 W. Atlantic Blvd. Pompano Beach FL 33060)			AUTHO	RIZED REPRESEI	NTATIVE		1			
	r ompano beach FL 33060	,			6.77							

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