# Form **990**

**Return of Organization Exempt From Income Tax** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information

_	F4	h- 2022l	laurraan andarraan kaninnina	2022					20
<u>A</u>			lar year, or tax year beginning	, 2022,	and ending				20
В	Check	if applicable:	С				<b>D</b> Employ	er identifi	ication number
	A	ddress change	RED HOOK ART PROJECT, IN	NC.			26-6	56589	25
	N	lame change	291 VAN BRUNT STREET				E Telepho	ne numbe	er
	Ir	nitial return	BROOKLYN, NY 11231				(34	7) 88	9-4098
	l Fi	nal return/terminated						,	
	$\mathbf{H}$	mended return					<b>G</b> Gross re	ceints \$	779,480.
	$\mathbf{H}$	pplication pending	F Name and address of principal officer:	N . 1 . 0 . 1 .	lı	I(a) Is this a			
	⊔^	pplication pending	F Name and address of principal officer: Dr.	Natasha Campbe.	<sub>TT</sub>	` '			
_	т		Same As C Above	t \	1 1507	H(b) Are all s If "No," a	attach a list.	See instr	ructions.
<u> </u>		-exempt status:		nsert no.) 4947(a)(1) or	527				
J			DHOOKARTPROJECT.ORG			H(c) Group ex			
K		n of organization:	X Corporation Trust Association	Other L Y	ear of formatio	n: 2014	M s	tate of le	gal domicile: NY
Pa	ırt I	Summar							
	1	Briefly descr	be the organization's mission or most	significant activities:MEN	TORING	AND TU	TORING	G FOR	R HIGH-RISK
a		CHILDREN	AND YOUTH IN OR NEAR RE	D HOOK, BROOKLY	N.				
Governance									
Ĕ									
Š	2	Check this be						net ass	ets.
9			ting members of the governing body (					3	9
တ္	4		dependent voting members of the gove				L	4	3
≝	5		of individuals employed in calendar ye					5	3
Activities &	6		of volunteers (estimate if necessary).				L	6	30
Ă			d business revenue from Part VIII, co					7a	0.
	b	Net unrelated	business taxable income from Form 9	990-1, Part I, line 11				7b	0.
	_	0 1 1 1					ior Year	0.0	Current Year
Revenue	8		and grants (Part VIII, line 1h)				672,9	20.	779,480.
	9		ice revenue (Part VIII, line 2g)						
ě	10		come (Part VIII, column (A), lines 3, 4	•					
ш	11		e (Part VIII, column (A), lines 5, 6d, 8d	· · · · · ·			600 0	0.0	
	12		- add lines 8 through 11 (must equa				672,9	20.	779,480.
	13		milar amounts paid (Part IX, column (						
	14		to or for members (Part IX, column (A						
S	15	Salaries, oth	r compensation, employee benefits (F	Part IX, column (A), lines	5-10)		152,7	55.	250,178.
Expenses	16a	Professional	undraising fees (Part IX, column (A),	line 11e)					
be	b	Total fundrai	ing expenses (Part IX, column (D), lin	e 25) 4	4,774.				
Щ	17		es (Part IX, column (A), lines 11a-11d	· · · · · · · · · · · · · · · · · · ·			428,6	1 /	380,032.
	18		es. Add lines 13-17 (must equal Part I				•		
	19	•	expenses. Subtract line 18 from line	• • • • • • • • • • • • • • • • • • • •			581,3		630,210.
		Revenue les	expenses. Subtract line 18 from line	12			91,5		149,270.
Net Assets or Fund Balances	20	Total assats	Dort V. line 16)			Beginning	of Curren		End of Year
3964 3919	20		Part X, line 16)				188,4		340,259.
¥ F	21							28.	3,000.
			fund balances. Subtract line 21 from	line 20			187,9	89.	337,259.
Pa	ırt II	Signatui	e Block						
Und	er pena	Ities of perjury, I d	clare that I have examined this return, including ac	companying schedules and staten	nents, and to th	ne best of my	knowledge	and belie	f, it is true, correct, and
com	piete. L	Declaration of prepare	rer (other than officer) is based on all information of	T WRICH preparer has any knowled	ige.				
Sig	ηn	Signature of	officer			Date			
He	re	Dr. Na	tasha Campbell		Pi	resider	nt		
_			name and title						
		Print/Type	reparer's name Preparer's sig	nature	Date	(	Check	if F	PTIN
Pa	id	Dexte	A. Morse CPA Dexter	A. Morse CPA			ے self-employe	ed F	200536272
	iu epar				1		1 3 -		
Us	e Or	ily Firm's addr					Firm's EIN	26-	3957706
	1	J Fillins addr							765-2200
N/1~	ı, tha	IDS discuss #	Bonita Springs, FL 3 is return with the preparer shown above					Z1Z_	
ivid	y ule	เกอ นเรยนรร์ โเ	is return with the brebarer 200MU 900/	/c: 366    ISU UCUOHS					X Yes No

# Form 990 (2022) RED HOOK ART PROJECT, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "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 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, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Х	
b	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
С	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," complete Schedule F, Parts II and IV.	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

# Form 990 (2022) RED HOOK ART PROJECT, INC. Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		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? <i>If "Yes," complete Schedule J.</i>	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		Х
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? <i>If "Yes," complete Schedule R, Part VI.</i>	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	NO
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
D A A	(gambling) winnings to prize winners?	1c	990	(0000

Form 990 (2022) RED HOOK ART PROJECT, INC.

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

			res	NO
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 8			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	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?	5b 5c		Х
	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
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7</b> f		X
•	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		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring			
^	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:	36		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
	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			
	Enter the amount of reserves on hand			37
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O.</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
-	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would			
	result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
AΑ	TEEA0105L 09/01/22	Form	990 (	2022)

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year. . . . . 9 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent..... 8 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates?..... 10a Χ b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule 0 Χ 12a Did the organization have a written conflict of interest policy? If "No," go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ **14** Did the organization have a written document retention and destruction policy?..... 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official...... 15a **b** Other officers or key employees of the organization..... 15b X If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year?..... 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements?... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records.

KEVIN BRANDES 291 VAN BRUNT STREET BROOKLYN NY 11231 (347) 889-4098

Form 990	(2022)	RED	$H \cap \cap K$	ΔRT	PROJECT.	TNC
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26-6658925

Page 7

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

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

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

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

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

Check this box if neither the organization nor any relat	ed organiz	ation	con	nper	ısate	ed any	/ cu	rrent officer, direct	or, or trustee.	
				(C)	)					
(A) Name and title	(B) Average hours	thar	one both	box, an c	unles	eck mores s personand a ee)	on	(D) Reportable compensation from	(E) Reportable compensation from	<b>(F)</b> Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-271099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Tiffiney Davis	40									
Executive Dir.	0			Χ				86,887.	0.	0.
(2) Robin Chamberlain	2									
Trustee	0	Х						0.	0.	0.
(3) Crystal Harper	5									
Treasurer	0	Х		Χ				0.	0.	0.
_(4) Alyce Erdekian	5									
Secretary	0	Х		Χ				0.	0.	0.
(5) Dr. Natasha Campbell	5									
Chairperson	0	Х		Χ				0.	0.	0.
(6) Heather Corbett	5									
Co-Chairperson	0	Х		Χ				0.	0.	0.
(7) Melanie Paul	2									
Trustee	0	Х						0.	0.	0.
(8) Laura Vogel	2									
Trustee	0	Х						0.	0.	0.
(9) Mary Waugh	2									
Trustee	0	Х						0.	0.	0.
(10)										
(11)										
(12)										
(13)										

Part VII   Section A. Officers, Directors, Tr		Key	Em		_	es, a	and	d Highest Com	pensated Empl	oyees	<b>(</b> conti	nued)
(A) (B) (C)  Position (do not check more than on												
(A)		(do	not c	heck	more	than	one	<b>(D)</b> Reportable	<b>(E)</b> Reportable		(F)	
Name and title	hours per week		cer an	nd a d		or/trus	tee)	compensation from	compensation from related organizations	(	ated amo	
	(list any hours	Indi or d	Insti	Officer	Key	High	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	the o	nsation i rganizati	ion
	for related	dividual director	utio	<u>e</u>	emp	Highest co employee	ner	111100/1033 1120/	micorross NEO		d related anization	
	organiza - tions	al tr	nal t		Key employee	comp						
	below dotted	ndividual trustee or director	Institutional trustee		ðí	Highest compensated employee						
	line)		Ж			ated						
(15)												
	1	•										
(16)												
(17)	<b></b>											
(18)												
<u>(19)</u>												
(20)												
(21)												
	1	•										
(22)												
(23)												
(24)												
(25)												
		-										
1b Subtotal								86,887.	0.			0.
c Total from continuation sheets to Part VII, Sect	ion A							0.	0.			0.
d Total (add lines 1b and 1c)								86,887.	0.			0.
2 Total number of individuals (including but not limited	d to those I	isted	abov	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	ensatio	n	
from the organization 0											1	
											Yes	No
3 Did the organization list any former officer, direction line 1a? If "Yes,"complete Schedule J for suc	ctor, truste	ee, ke	ey er	mplo	oyee	e, or	high	nest compensated	employee	3		Х
,												$\Lambda$
4 For any individual listed on line 1a, is the sum of the organization and related organizations great	if reportab er than \$1	1e coi	mpe 00?	ensa If "Y	ition Y <i>es.</i>	and " con	oth nple	er compensation ete Schedule J for	from			
such individual							·			4		X
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If "Ye	le comper	satio	n fro	om :	any	unre	late	ed organization or	individual	5		Х
Section B. Independent Contractors	s, compr	ele 3	CHEC	uuie	3 10	)i Sui	CII L	Derson				Λ
1 Complete this table for your five highest comper	nsated ind	epen	dent	cor	ntrad	ctors	tha	t received more th	nan \$100,000 of			
compensation from the organization. Report compe		the ca	alen	dar <u>y</u>	year	endıı	ng v	i			•	
(A) Name and business address								(B) Description (	of services	Compe	<b>C)</b> :nsatio	n
2 Total number of independent contractors (including		ited to	tho	se I	isted	abo	ve)	who received more	than			
\$100,000 of compensation from the organization	0											

Par	t VI				a resp	onse or note to any	y line in this Part VI	IL		
					<u> </u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
t, ts		Federated campaig	ıns .		1a					
s, Grant Amount	b	Membership dues.			1b					
S, G	С	Fundraising events			1c					
		Related organization			1d					
ns, Gift Similar	е	Government grants (cont			1e					
			779,480.							
Contributic and Other	g	lines 1a-1f  Total. Add lines 1a			1g	181,338.	770 400			
	п	Total. Add lines Ta	-11.		· · · · · · ·	Business Code	779,480.			
ž	2a				-	Business Gode				
eve	b									
8	c									
šķ	d									
Š	e									
Jr ag	f	All other program s	ervi	ce revenu	e					
Program Service Revenue	q	Total. Add lines 2a			_					
	3	Investment income (								
		other similar amou	nts).							
	4	Income from invest				· ·				
	5	Royalties								
	_	0	_	(i) R	eal	(ii) Personal				
		Gross rents	6a							
		Less: rental expenses	6b							
		Rental income or (loss)		200)						
	d Net rental income or (loss)				(ii) Other					
	7a	Gross amount from sales of assets		(1) 0000	11105	(ii) Other				
	١.	other than inventory	7a							
	b	Less: cost or other basis and sales expenses	7b							
	c	Gain or (loss)	7c							
		Net gain or (loss).								
a)		Gross income from fund								
Ž	Oa	(not including \$		-						
šve		of contributions reported	l on li	ne 1c).	_					
ď		See Part IV, line 18 $\dots$			8a					
Other Revenue		Less: direct expens			8b					
ರ	С	Net income or (loss	s) fro	om fundra	ising e	vents				
	9a	Gross income from gami See Part IV, line 19	ng ac	tivities.	9a					
	b	Less: direct expens	ses.		9b					
	С	Net income or (loss	s) fro	om gamin	g activ	ities				
	10a	Gross sales of inventory,	less							
		returns and allowances.			1 <b>0</b> a					
		Less: cost of goods			1 Ob					
	С	Net income or (loss	s) fro	om sales	of inve					
S						Business Code				
8 3 3	11a b c d									
<u>a</u>	b									
Se Se	C	All other revenue.								
Miscellaneous Revenue		<b>Total.</b> Add lines 11:			<u>_</u>					
		Total revenue. See					779 480	0	0	0

# Form 990 (2022) RED HOOK ART PROJECT, INC. Part IX | Statement of Functional Expenses

	Check if Schedule O contains a re	sponse or note to any	line in this Part IX		
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		·		·
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members	86,887.	69,509.	13,033.	4,345.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0.	0	0
7	Other salaries and wages	0.		0.	0. 7,092.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	141,845.	113,476.	21,277.	7,092.
9	Other employee benefits				
10	Payroll taxes	21,446.	17,157.	3,217.	1,072.
11	Fees for services (nonemployees):	==, ===+	=:,==::	-,	
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	52,681.	42,145.	7,902.	2,634.
12	(A), amount, list line 11g expenses on Schedule 0.)	7,663.	2,299.	1,302.	5,364.
13	Office expenses	6,446.	4,514.	1,932.	3,304.
14	Information technology	1,482.	1,037.	445.	
15	Royalties	1,402.	1,057.	113.	
16	Occupancy	42,633.	34,106.	6,395.	2,132.
17	Travel	1,915.	1,532.	383.	2,152.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,313.	1,332.	303.	
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,615.		1,615.	
23	Insurance	32,743.	22,920.	9,823.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Program expenses	209,520.	209,520.		
b	Miscellaneous	22,135.			22,135.
С	Bank and service fees	1,199.		1,199.	
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	630,210.	518,215.	67,221.	44,774.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720).				

_		Check if Schedule O contains a response or note to	o any lir	ne in this Part X	<u> </u>	<u></u>				
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year			
	1	Cash — non-interest-bearing			185,540.	1	259,361.			
	2	Savings and temporary cash investments				2				
	3	Pledges and grants receivable, net				3	48,750.			
	4	Accounts receivable, net			2,877.	4	1,463.			
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pe	er office I contrib	er, director, outor, or 35%		5				
	6	Loans and other receivables from other disqualified p								
	U	section 4958(f)(1)), and persons described in section				6				
	7	Notes and loans receivable, net	· · · · · _		7					
S	8	Inventories for sale or use	<b>—</b>		8					
Assets	9	Prepaid expenses and deferred charges		_		9				
As	_	•	1 1			9				
γ.		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		32,300.						
	b	Less: accumulated depreciation	10b	1,615.		10c	30,685.			
	11	Investments — publicly traded securities				11				
	12	Investments — other securities. See Part IV, line 11				12				
	13	Investments — program-related. See Part IV, line 11.	<del>-</del>		13					
	14	Intangible assets				14				
	15	Other assets. See Part IV, line 11				15				
	16	Total assets. Add lines 1 through 15 (must equal line	33)		188,417.	16	340,259.			
	17	Accounts payable and accrued expenses	428.	17	3,000.					
	18	Grants payable		<u> </u>		18 19				
	19		Deferred revenue							
ω.	20	Tax-exempt bond liabilities		_		20				
ties	21	Escrow or custodial account liability. Complete Part		<u> </u>		21				
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these pe	ncer, ai utor, or rsons	35%		22				
_	23	Secured mortgages and notes payable to unrelated the		<u> </u>		23				
	24	Unsecured notes and loans payable to unrelated third	•	<u></u>		24				
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to rel	ated third parties, art X of Schedule D.		25				
	26	Total liabilities. Add lines 17 through 25		<u> </u>	428.	26	3,000.			
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	•	X			·			
lan	27	Net assets without donor restrictions			187,989.	27	288,509.			
Ва	28	Net assets with donor restrictions		<u> </u>	101/3031	28	48,750.			
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here				10//001			
or l	29		-		29					
ts	30		stock or trust principal, or current fundsor trust principal, or capital surplus, or land, building, or equipment fund							
se	31	Retained earnings, endowment, accumulated income		<u> </u>		30 31				
As	32	Total net assets or fund balances			107 000	32	227 250			
Vet	33	Total liabilities and net assets/fund balances			187,989.	33	337,259. 340,259.			
<u>~</u>				11 09/01/22	188,417.	၁၁	340,259.			

Par	t XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI.							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7	79,4	180.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	6	30,2	210.			
3	Revenue less expenses. Subtract line 2 from line 1	3	1	49,2	70.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1	87,9	989.			
5	Net unrealized gains (losses) on investments.	5						
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	10	2	27 0	) F ()			
Day	t XII   Financial Statements and Reporting	10	3	37,2	239.			
Гаг					_			
	Check if Schedule O contains a response or note to any line in this Part XII							
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Χ				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:    X   Separate basis	ed on a						
h	Were the organization's financial statements audited by an independent accountant?		2b		Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate							
	basis, consolidated basis, or both:	110						
	Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?	, 	2c	Х				
	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 Guidance, 2 C.F.R Part 200, Subpart F?		За		Х			
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					
BAA	TEEA0112L 09/01/22		Form	990	(2022)			

#### **SCHEDULE A** (Form 990)

# **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.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

2022

Open to Public Inspection

	lame of the organization Employer identification number						
	HOOK ART PROJECT, IN					26-665892	
	Reason for Public Cha						ctions.
The c	organization is not a private found				•	•	
1	A church, convention of church	,		•	b)(1)(A)(	(i).	
2	A school described in <b>sectio</b>						
3	A hospital or a cooperative h	nospital service organ	nization described in <b>se</b>	ction 17	0(b)(1)(A	A)(iii).	
4	A medical research organiza	tion operated in con	junction with a hospital	describe	d in <b>sec</b>	ction 1 <b>70(b)(1)(A)(iii)</b> . E	Inter the hospital's
	name, city, and state:						
5	An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a coll emplete Part II.)	ege or university owned	or oper	ated by	a governmental unit de	escribed in
6	A federal, state, or local gov	ernment or governm	ental unit described in s	ection 1	<b>70(b)(</b> 1)	(A)(v).	
7	An organization that normally in section 170(b)(1)(A)(vi).	receives a substantial Complete Part II.)	part of its support from a	governm	ental uni	it or from the general pu	blic described
8	A community trust described	in <b>section 170(b)(1)</b>	(A)(vi). (Complete Part	1.)			
9					oniunctio	on with a land-grant colle	2ne
J	9 An agricultural research organization described in <b>section 170(b)(1)(A)(ix)</b> operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:						
10	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)						
11	An organization organized a	nd operated exclusiv	ely to test for public safe	ety. See	section	1 509(a)(4).	
12	An organization organized a or more publicly supported or lines 12a through 12d that do	rganizations describ	ed in <b>section 509(a)(1)</b> d	r <b>sectio</b>	on 509(a	)(2). See section 509(a	ut the purposes of one <b>)(3).</b> Check the box on
а	Type I. A supporting organization organization (s) the power to recomplete Part IV, Sections A	on operated, supervise	ed, or controlled by its sur	ported o	organizat	ion(s), typically by givino	g the supported on. <b>You must</b>
b	Type II. A supporting organize management of the supporting must complete Part IV, Sect	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), by the supported organization	having control or ion(s). <b>You</b>
С	Type III functionally integrated organization(s) (see instruction	. A supporting organiza	ation operated in connection	n with, a	nd function	onally integrated with, its	supported
d	Type III non-functionally integ functionally integrated. The instructions). You must com	rated. A supporting or organization generall	ganization operated in cor www.ganization operated in cor www.ganization.ganization.ganization	nnection	with its s	supported organization(s t and an attentiveness	) that is not requirement (see
е	Check this box if the organiz integrated, or Type III non-fu	ation received a writ	ten determination from	the IRS	that it is	a Type I, Type II, Typ	e III functionally
f	Enter the number of supported						
g	Provide the following informatio	n about the supporte	ed organization(s).				
(	i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat	s the tion listed poverning ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
<u>\-/</u>							
(C)							
(D)							
(E)							
Total							

## RED HOOK ART PROJECT, INC. Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support							
begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	316,790.	148,598.	307,983.	331,611.	548,386.	1,653,368.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	<b>Total.</b> Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	316,790.	148,598.	307,983.	331,611.	548,386.	1,653,368.
6	<b>Public support.</b> Subtract line 5 from line 4						1,653,368.
Sec	tion B. Total Support						_
	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total
7	Amounts from line 4	316,790.	148,598.	307,983.	331,611.	548,386.	1,653,368.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.
	Total support. Add lines 7 through 10						1,653,368.
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	0.
	<b>First 5 years.</b> If the Form 990 is organization, check this box and			third, fourth, or fi	fth tax year as a	section 501(c)(3)	
Sec	tion C. Computation of Pul Public support percentage for 20	olic Support P	ercentage				
	Public support percentage for 20 Public support percentage from 2						100.00%
	33-1/3% support test-2022. If the	ne organization di	d not check the bo	ox on line 13, and	d line 14 is 33-1/3	% or more, check	100.00 % this box
b	and stop here. The organization qualifies as a publicly supported organization.     X						
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts	meets the facts-ar	nd-circumstances	test, check this b	oox and stop here	. Explain in Part '	VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the facts-and	meets the facts-a l-circumstances te	nd-circumstances est. The organizati	test, check this begins to the test, check this begins to the test.	oox and <b>stop here</b> publicly supporte	LExplain in Part dorganization	VI how the
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	structions

Schedule A (Form 990) 2022

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

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

Sec	tion A. Public Support		picase complete i	<u> </u>			
	dar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2010	(5) 2513	(0) 2020	(a) 2321	(C) ZOZZ	(i) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
8	<b>Public support.</b> (Subtract line 7c from line 6.)						
	tion B. Total Support				1	T	
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total
	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b.  Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is organization, check this box and	stop here					
	tion C. Computation of Pul						
	Public support percentage for 20	•	.,,		•		<u> </u>
	Public support percentage from 2					16	%
	tion D. Computation of Inv						
17		•		-	* * * *		<u> </u>
	Investment income percentage f						% 
	<b>33-1/3% support tests—2022.</b> If t is not more than 33-1/3%, check	this box and <b>sto</b>	<b>p here.</b> The organ	ization qualifies a	as a publicly supp	orted organization	
	<b>33-1/3% support tests—2021.</b> If the line 18 is not more than 33-1/3% <b>Private foundation.</b> If the organization of the organiz	, check this box	and <b>stop here.</b> Th	e organization qu	ialifies as a public	cly supported organ	ization

# Part IV Supporting Organizations

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

# **Section A. All Supporting Organizations**

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	<b>4</b> a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI.</b>	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9с		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Par	: IV	Supporting Organizations (continued)			
11	Hac	the organization accepted a gift or contribution from any of the following persons?		Yes	No
		rson who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,			
	the o	governing body of a supported organization?	11a		
b	A fa	mily member of a person described on line 11a above?	11b		
		% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .	11c		
Sect	ion	B. Type I Supporting Organizations			
	D:4 :			Yes	No
1	or moffic orga than were	the governing body, members of the governing body, officers acting in their official capacity, or membership of one hore supported organizations have the power to regularly appoint or elect at least a majority of the organization's ers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported anization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more to one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers and the tax year.	1		
2	Did that bene	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such efit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
Sect	ion	C. Type II Supporting Organizations			
				Yes	No
1	Were	e a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees			
	of ea	ach of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the porting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect		D. All Type III Supporting Organizations	l		
<i>-</i>	.1011	D. All Type III Supporting Organizations		Yes	No
1	orga year	the organization provide to each of its supported organizations, by the last day of the fifth month of the inization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the inization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	orga	inization's governing documents in effect on the date of notification, to the extent not previously provided.			
2	2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization? If "No." explain in Part VI how				
	the	inization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice all ti	eason of the relationship described on line 2, above, did the organization's supported organizations have a significant e in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played his regard.	3		
Sect		E. Type III Functionally Integrated Supporting Organizations			
'	$\overline{}$	ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	$\equiv$	The organization satisfied the Activities Test. Complete line 2 below.			
b	Щ.	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	Ш.	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see	instru	uctions	s).
2	Activ	vities Test. Answer lines 2a and 2b below.		Yes	No
а	supp <b>org</b> a	substantially all of the organization's activities during the tax year directly further the exempt purposes of the ported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported</b> **anizations and explain how these activities directly furthered their exempt purposes, how the organization was ponsive to those supported organizations, and how the organization determined that these activities constituted			
		stantially all of its activities.	2a		
b	more	the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or e of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the sons for the organization's position that its supported organization(s) would have engaged in these activities			
		for the organization's involvement.	2b		
3	Pare	ent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did <sup>1</sup> each	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? If "Yes" or "No," provide details in <b>Part VI.</b>	3a		
b		the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its ported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Sch	edule A (Form 990) 2022 RED HOOK ART PROJECT, INC.		26-66	58925 Page
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anizat	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain in st complete Sections A	Part VI). <b>See</b> through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
t	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
•	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). BAA Schedule A (Form 990) 2022 10 Line 8 amount divided by line 9 amount

Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Sec	tion D - Distributions		Current Year			
1	Amounts paid to supported organizations to accomplish exempt purposes	1				
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2				
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3				
4	Amounts paid to acquire exempt-use assets	4				
5	Qualified set-aside amounts (prior IRS approval required – provide details in Part VI)	5				
6	Other distributions (describe in Part VI). See instructions.	6				
7	Total annual distributions. Add lines 1 through 6.	7				
8	Distributions to attentive supported organizations to which the organization is responsive (provide details					
	in <b>Part VI</b> ). See instructions.	8				
9	Distributable amount for 2022 from Section C, line 6	9				

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
<b>a</b> From 2017			
<b>b</b> From 2018			
<b>c</b> From 2019			
<b>d</b> From 2020			
<b>e</b> From 2021			
f Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7:			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
<b>b</b> Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

BAA Schedule A (Form 990) 2022 Part VI

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

# SCHEDULE D (Form 990)

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.

Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

REI	D HOOK ART PROJECT, INC.	26-6658925
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Fund	ls or Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor are the organization's property, subject to the organization's exclusive legal control?	advised funds
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds ca for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purp impermissible private benefit?	an be used only cose conferring Yes No
Pa	rt II Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		f a historically important land area
		f a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of last day of the tax year.	a conservation easement on the
	last day of the tax year.	Held at the End of the Tax Year
;	a Total number of conservation easements	2a
	<b>b</b> Total acreage restricted by conservation easements	2b
	c Number of conservation easements on a certified historic structure included in (a)	2c
	<b>d</b> Number of conservation easements included in (c) acquired after July 25, 2006 and not on a	
	historic structure listed in the National Register	2 d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the or tax year	ganization during the
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handlin	
•	and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conserv	vation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation	n easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section and section 170(h)(4)(B)(ii)?	170(h)(4)(B)(i) 
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expinclude, if applicable, the text of the footnote to the organization's financial statements that describes conservation easements.	pense statement and balance sheet, and ibes the organization's accounting for
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	Other Similar Assets.
1:	a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statem historical treasures, or other similar assets held for public exhibition, education, or research in fur Part XIII the text of the footnote to its financial statements that describes these items.	nent and balance sheet works of art, rtherance of public service, provide in
١	b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement historical treasures, or other similar assets held for public exhibition, education, or research in furtheranc following amounts relating to these items:	e of public service, provide the
	<ul><li>(i) Revenue included on Form 990, Part VIII, line 1.</li><li>(ii) Assets included in Form 990, Part X.</li></ul>	\$
	(ii) Assets included in Form 990, Part X	\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial amounts required to be reported under FASB ASC 958 relating to these items:	gain, provide the following
	a Revenue included on Form 990, Part VIII, line 1.b Assets included in Form 990, Part X.	\$
	<b>b</b> Assets included in Form 990, Part X	\$

Part III   Organizations Maintaining Co	ollections of Art, His	storicai i reasures, o	r Otner Similar As	ssets	(contir	пиеа)
3 Using the organization's acquisition, accession, a items (check all that apply):	<u> </u>	,	ke significant use of its	collectio	n	
a Public exhibition	<b>d</b> Loan	or exchange program				
<b>b</b> Scholarly research	e Other					
c Preservation for future generations						
4 Provide a description of the organization's collect Part XIII.	·	•				
5 During the year, did the organization solicit o to be sold to raise funds rather than to be ma				Yes		No
Part IV Escrow and Custodial Arrang reported an amount on Form 990, Part	<b>ements.</b> Complete if th X, line 21.	ne organization answered '	'Yes" on Form 990, Par	t IV, line	e 9, or	
1 a Is the organization an agent, trustee, custodi on Form 990, Part X?	an or other intermediary	for contributions or other	assets not included	Yes	Г	No
<b>b</b> If "Yes," explain the arrangement in Part XIII and					L	
3	,			Amoun	t	
c Beginning balance			. 1c			
<b>d</b> Additions during the year			. 1 d			
e Distributions during the year						
<b>f</b> Ending balance						
2 a Did the organization include an amount on Fo			, L	Yes		No
<b>b</b> If "Yes," explain the arrangement in Part XIII	. Check here if the expla	nation has been provided	d on Part XIII		L	
D. 11/ Endoument Funda Complete if	the examination enginers	d "Voo" on Form 000 Dort	IV line 10			
Part V Endowment Funds. Complete if			<del> '</del>	(0)	Four voor	- hook
1 a Beginning of year balance (a) Currer	t year (b) Prior yea	r (c) Two years back	(d) Three years back	(e) I	Four years	s Dack
<b>b</b> Contributions				+		
				+		
<b>c</b> Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses				+		
<b>q</b> End of year balance				+		
2 Provide the estimated percentage of the curre	ent year end balance (lir	ne 1g, column (a)) held a	 S:			
<b>a</b> Board designated or quasi-endowment	%					
<b>b</b> Permanent endowment	5					
c Term endowment %						
The percentages on lines 2a, 2b, and 2c should	equal 100%.					
3 a Are there endowment funds not in the possessio	n of the organization that a	are held and administered f	or the			
organization by:					Yes	No
(i) Unrelated organizations				3a(i)		<u></u>
(ii) Related organizations				3a(ii)		
<b>b</b> If "Yes" on line 3a(ii), are the related organiz	•			. 3b		
4 Describe in Part XIII the intended uses of the	_	ent funds.				
Part VI Land, Buildings, and Equipm		IV 1: 11- O F 000	Doub V. Bar 10			
Complete if the organization answered	1		J, Part X, line 10.			
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	<b>(d)</b> [	Book va	ılue
<b>1 a</b> Land	(mvesument)	basis (Ottiet)	acpreciation			
<b>b</b> Buildings.				-		
c Leasehold improvements		32,300.	1,615.		30	,685.
<b>d</b> Equipment		32,300.	1,013.			
<b>e</b> Other						
Total. Add lines 1a through 1e. (Column (d) must e		column (B), line 10c.)			30.	685.

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Schedule D (Form 990) 2022

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Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)  (b) Book value  (c) Method of valuation: Cost or end-of-year ma  (l) Financial derivatives	rket value
(1) Financial derivatives. (2) Closely held equity interests. (3) Other (A) (B) (C) (D) (E) (F) (G) (H) (I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12).  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
(2) Closely held equity interests.  (3) Other (A) (B) (C) (D) (E) (F) (G) (H) (I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12)  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
(A) (B) (C) (D) (E) (F) (G) (H) (I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)    Part VIII   Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
(A) (B) (C) (D) (E) (F) (G) (H) (I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
(F) (G) (H) (I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
(F) (G) (H) (I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
(F) (G) (H) (I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
(F) (G) (H) (I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
(F) (G) (H) (I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
(G) (H) (I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
(H) (I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)  Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
Part VIII Investments — Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	
to the organization answered 165 on 16th 350; rate it, fine 16. Oct 16th 350; rate it, fine 16.	
(a) Description of investment I (b) Book value I (c) Method of valuation: Cost or end-of-year	market value
(1)	
(2)	-
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	_
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)	
Part IX Other Assets.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.	
(a) Description (b)	Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7) (8)	
(9)	
(10)	_
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).	
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities.	
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.	3ook value
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Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) E (1) Federal income taxes	3ook value
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) 8	3ook value
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) E  (1) Federal income taxes (2) (3) (4)	3ook value
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) E  (2) (3) (4) (5)	3ook value
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) E  (2) (3) (4) (5) (6)	3ook value
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) E  (2) (3) (4) (5) (6) (7)	3ook value
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) E  (2) (3) (4) (5) (6) (7) (8)	3ook value
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) E  (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	3ook value
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) 8  (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)	3ook value
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X  Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) E  (2) (3) (4) (5) (6) (7) (8) (9) (10) (10) (11)	3ook value
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) 8  (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)	

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn. N/A
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d.	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b.	4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return. N/A
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities	
b Prior year adjustments	
c Other losses	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d.	2 e
3 Subtract line 2e from line 1.	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	
c Add lines <b>4a</b> and <b>4b</b> .	4 c
<b>5</b> Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal form 990, Part 1, line 18.)	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5

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

BAA Schedule D (Form 990) 2022

### **SCHEDULE M** (Form 990)

## **Noncash Contributions**

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

Employer identification number

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

applicable contributions or items contributed on Form 990, Part VIII, line 1g noncash  1 Art — Works of art	ED HOOK ART PROJECT, INC. [26-6658925			
applicable contributions or items contributed on Form 990, Part VIII, line 1g noncash  1 Art — Works of art				
2 Art — Historical treasures	<b>(d)</b> nod of determini contribution am	ng nounts		
3 Art – Fractional interests. 4 Books and publications. 5 Clothing and household goods. 6 Cars and other vehicles. 7 Boats and planes. 8 Intellectual property. 9 Securities – Publicly traded. 10 Securities – Closely held stock. 11 Securities – Partnership, LLC, or trust interests. 12 Securities – Miscellaneous.				
4 Books and publications.  5 Clothing and household goods.  6 Cars and other vehicles.  7 Boats and planes.  8 Intellectual property.  9 Securities — Publicly traded.  10 Securities — Closely held stock.  11 Securities — Partnership, LLC, or trust interests.  12 Securities — Miscellaneous.				
5 Clothing and household goods. 6 Cars and other vehicles. 7 Boats and planes. 8 Intellectual property. 9 Securities — Publicly traded. 10 Securities — Closely held stock. 11 Securities — Partnership, LLC, or trust interests. 12 Securities — Miscellaneous.				
6 Cars and other vehicles. 7 Boats and planes. 8 Intellectual property. 9 Securities — Publicly traded. 10 Securities — Closely held stock. 11 Securities — Partnership, LLC, or trust interests. 12 Securities — Miscellaneous.				
7 Boats and planes				
8 Intellectual property. 9 Securities — Publicly traded				
9 Securities — Publicly traded				
10 Securities - Closely held stock.       11 Securities - Partnership, LLC, or trust interests.       12 Securities - Miscellaneous.				
11 Securities – Partnership, LLC, or trust interests .  12 Securities – Miscellaneous				
12 Securities – Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate – Residential				
16 Real estate – Commercial				
17 Real estate – Other.				
18 Collectibles.				
19 Food inventory.				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ( )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the				
organization completed Form 8283, Part V, Donee Acknowledgement				
	Yes	No		
20. During the year did the expenization receive by contribution any preparty reported in Dort L lines 1 through 20, that				
<b>30a</b> During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used				
for exempt purposes for the entire holding period?	30 a	Χ		
<b>b</b> If "Yes," describe the arrangement in Part II.				
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	Χ		
<b>32a</b> Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash				
contributions?	32 a	Χ		
<b>b</b> If "Yes," describe in Part II.				
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.				

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

BAA TEEA4602L 07/12/22 Schedule M (Form 990) 2022

### **SCHEDULE O** (Form 990)

# 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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

RED HOOK ART PROJECT, INC

Employer identification number

26-6658925

#### Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.