** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

ΑF	or the	$pprox$ 2023 calendar year, or tax year beginning $$ J U \pm $$ 1 $$ $$ 2 U $$ 2 $$ 3 $$ $$ and e $$	ending U	UN 30, 2024				
B c	heck if pplicabl	C Name of organization		D Employer identifi	cation number			
	Addre:	COLLEGE VISIONS						
	Name chang	Doing business as		27-23447	23			
]Initial return]Final return/		Room/suite	E Telephone number (401) 490-3996				
	termin ated			G Gross receipts \$	1,192,574.			
	Ameno			H(a) Is this a group re				
	Application	F name and address of principal officer: HAMON 1 GORDON		for subordinates				
	pendir	9 180 WESTMINSTER ST., SUITE 203, PROVIDE	NCE,	H(b) Are all subordinates included? Yes No				
ΙT	ax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or		1 ` ′	list. See instructions			
	Vebsit			H(c) Group exemptio				
K F	orm of	organization: X Corporation Trust Association Other	∟ Year		■ State of legal domicile: RI			
	rt I	Summary	•					
Ð	1	Briefly describe the organization's mission or most significant activities: ${ t TO}$ ${ t EM}$	IPOWER	LOW-INCOME	AND			
& Governance		FIRST-GENERATION COLLEGE-BOUND STUDE $\overline{ ext{NTS}}$ T	O REA	LIZE THE PR	OMISE OF A			
rn:	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net as				
OVE	3	Number of voting members of the governing body (Part VI, line 1a)		3	18			
8 G	4	Number of independent voting members of the governing body (Part VI, line 1b) \dots			18			
es	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)		5	13			
viti		Total number of volunteers (estimate if necessary)			80			
Activities	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.			
Revenue				Prior Year	Current Year			
		Contributions and grants (Part VIII, line 1h)		995,247.				
		Program service revenue (Part VIII, line 2g)		95,929.				
Rev		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,641.				
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7,800.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,100,617.				
		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)		0.	0.			
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 209,29		700,826.	697,926.			
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	0.	0.			
Exp	b	Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>	248,672.	255 206			
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		949,498.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		151,119.				
_ S		Revenue less expenses. Subtract line 18 from line 12	Re	ginning of Current Year	End of Year			
Net Assets or Fund Balances	20	Total accests (Dout V. line 16)		899,651.	1,246,188.			
Asse Bala	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		48,011.	255,106.			
Vet / und	21 22	Net assets or fund balances. Subtract line 21 from line 20		851,640.	991,082.			
	rt II	Signature Block		002,0200	332,0020			
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of m	v knowledge and belief, it is			
	•	t, and complete. Declaration of preparer (other than officer) is based on all information of whice		•	,,			
		, , , , , , , , , , , , , , , , , , , ,	· ·					
Sigr	1	Signature of officer		Date				
Her		LAMONT GORDON, EXECUTIVE DIRECTOR						
		Type or print name and title						
		Print/Type preparer's name Preparer's signature	I .	Date Check	PTIN			
Paid		PATRICIA M. CERILLI PATRICIA M. CERI	<u>:LLI</u> 1	1/06/24 if self-employ	P01598123			
Prep	arer	Firm's name MULLEN, SCORPIO & CERILLI		Firm's EIN 0	5-0392605			
Use	Only	Firm's address 67 CEDAR STREET						
		PROVIDENCE, RI 02903		Phone no. (4	01)751-3860			
May	the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No			

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: TO EMPOWER LOW-INCOME AND FIRST-GENERATION COLLEGE-BOUND STUDENTS TO
	REALIZE THE PROMISE OF HIGHER EDUCATION BY PROVIDING ADVISING AND
	RESOURCES TO PROMOTE COLLEGE ENROLLMENT, PERSISTENCE, AND GRADUATION.
	COLLEGE VISIONS ADVANCES EQUAL ACCESS TO EDUCATIONAL OPPORTUNITIES IN
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.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 636,663 • including grants of \$) (Revenue \$ 149,959 •)
	TO HELP LOW-INCOME AND FIRST-GENERATION COLLEGE BOUND STUDENTS TO
	REALIZE THE PROMISE OF A HIGHER EDUCATION.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$
۸۵	Other program convices (Describe on Schodule O.)
40	Other program services (Describe on Schedule O.)
4-	(Expenses \$ including grants of \$) (Revenue \$) Total program convice expenses

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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		х
_	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
5	similar amounts as defined in Rev. Proc. 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? If "Yes," complete Schedule D, Part II.	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	· •		
	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		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		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.			
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		x
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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	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)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	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		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	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			37
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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		Х
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	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 od	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
	domestic government on Fart IX, column (A), line 1: ii 103, complete ochedule i, i atts i and ii	41		

332003 12-21-23

Part IV Checklist of Required Schedules (continued)

22 I Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. Counter (Few) Complete Schedule / Part I and III 23 Did the organization answer "Yes" to Part IVI, Section A, line 3, 4, or 5, about compensation of the organization's current and former offices, directors, rustures, key employees, and highest compensation amount of more than \$100,000 as of the state of the part IVI in the second of the suse with an outstanding principal amount of more than \$100,000 as of the state day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule X, If "No." go to line 25a X b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?				Yes	No
23 Did the organization answer "Yes" to Part WI, Section A, Ins 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule V, 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24s through 24d and complete Schedule K. If "No." yo to line 25s. 24a Did the organization marks any proceeds of tax-exempt bonds beyond a temporary period exception? 25b Did the organization marks an excover account other than a refunding secrow at any time during the year to defease any tax exempt bonds? 26c Use the organization and a single of the programizations of the organization and the program of the organization and the transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25b Is the organization aware that If orgaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25c Is a Section SO1(SQ), SO1(CA), and SO1(C)(SQ) Organizations prior forms 990 or 990 EZPI If "Yes," complete Schedule L, Part II 25c Is a Section SO1(CA), and SO1(CA), and SO1(CA) or any of the organization spirit forms 990 or 990 EZPI If "Yes," complete Schedule L, Part II 25d Did the organization export any amount on Part X, line 5 or 22, for receivables from of payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 39% controlled entity of raminy member of any of these persons? If "Yes," complete Schedule L, Part III 25d Did the organization export or or main year. The program organization spirit or the assistance to any current or founder, substantial contributor? If "Yes," complete Schedule L, Part I	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directors, fusitees, key employees, and highest compensated employees? If "Yes," complete Schedule Is all day of 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 sissued after December 31, 2002? If "Yes," answer lines 24th through 24d and complete Schedule K. If "No," go to line 25a. b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization mirest any executor of the than a refunding scorow at any time during the year to defease any tax-exempt bonds? d Did the organization are as an "on behaf of" issuer for bonds outstanding at any time during the year? 24d			22		X
Schedule / Part I was issued after December 31, 2002? If "Yes," anover lines 24b through 24d and complete static day of the year, that was issued after December 31, 2002? If "Yes," anover lines 24b through 24d and complete Schedule K. If "No.", 70 to fine 25a	23				
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 "Pos", arrawer lines 24b through 24d and complete Schedule K. If "No.," go to fine 22a by 24d 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d of Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d 25a Section 501(c)(3), 301(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 I., Part I 25a Section 501(c)(3), 301(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 I., 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 organizations prior Forms 990 or 998 E2? If "Yes," complete Schedule I., Part I 25b 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 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I., Part II 26b Z Y 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 35% controlled entity for lamp member of any individual described members of a propletical file of these persons? If "Yes," complete Schedule I., Part IV 27c X Was the organization aparty to a business transaction with one of the following parties? (See the Schedule I., Part IV 28d A C A 35% controlled entity of one or more individuals and/or organizations described in line 28a or					, .
as to day of the year, that was issued after December \$1,20021 ft "Yes," answer lines 24b through 24d and complete Schedule L. If "No." yo to the 25a 24b	04	Schedule J	23		
Schedule K. If "No." go to line 25a b Did the organization miser any proceeds of tax exampt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d	248				
b Did the organization minetal any proceeds of tax exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25S section 501(x)3, 501(x)4, and 501(x)207 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 15 Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? 25 Is Section 501(x)3, 501(x)4, and 501(x)207 organizations. Did the organization engage 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-E27 if "Yes," complete Schedule L, Part II 25a X 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from 6 payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or 39% controlled entity of ramily member of any of these persons? if "Yes," complete Schedule L, Part II 26 X 27 Did the organization aparty 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 of former officer, director, trustee, key employee, creator or founder, or substantial contributor or any individual described in line 28a? if 'Yes,' complete Schedule L, Part IV 28b X b A family member of any individual described in line 28a? if 'Yes,' complete Schedule L, Part IV 28b X 27 Did the organization receive more than \$25,000 in noneash contributions? if 'Yes,' complete Schedule L, Part IV 28c X 38 Did the organization receive more than \$25,000 in noneash contributions? if 'Yes,' complete Schedule N, Part			242		x
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 22a 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		Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	\vdash		
d Did the organization as an 'on behalf of' issuer for bonds outstanding at any time during the year? 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					
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(3), 501(4), 4n ad 5			24c		
b Is the organization with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 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	(d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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-E2? If "Yes," complete Schedule L, Part I	25	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule I., Part I 25 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 I., Part II 26 Z 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 55% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule I., Part III 27 X X as the organization aparty to a business transaction with one of the following parties? (See the Schedule L., Part IIV 28 Was the organization aparty to a business transaction with one of the following parties? (See the Schedule L., Part IV 28 D A family member of any individual described in line 28a* If "Yes," complete Schedule I., Part IV 28 D A family member of any individual described in line 28a* If "Yes," complete Schedule I., Part IV 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 30 Did the organization receive wome than \$25,000 in noncash contributions? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.77012 and 301.77013? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 32 Did the organization have a controlled entity disregarded as separate from the organization under Regulations and that is treated as a partnership for feder		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Schedule L, Part I 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 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization aparty 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? If "Yes," complete Schedule L, Part IV 28 X b A family member of any individual described in line 28a7 If "Yes," complete Schedule L, Part IV 28a X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b7! "Yes," complete Schedule M. 29 X 30 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M. 29 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization injudate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.77	ı				
Did the organization report any amount on Part X, line 5 or 22, for receivables from \hat{o} 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 "Ves," complete Schedule L, Part II 26 X X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Ves," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part III 27 X 28 28					
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 28			25b		X
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 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. 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV. 29 Ly Assistance or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28 Ly A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule N, Part IV. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part	26				
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 25% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. 27			26		v
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023) COLLEGE VISIONS Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No			
2 a	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						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х			
	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			٠,,			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X			
b	If "Yes," enter the name of the foreign country						
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		v			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b					
_	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	6-		х			
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		-22			
D	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).	OD					
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		х			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required						
	to file Form 8282?	7c		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	Х				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	Х				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the						
	sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
a Did the sponsoring organization make any taxable distributions under section 4966?							
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?							
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities						
11	Section 501(c)(12) organizations. Enter:						
a	Gross income from members or shareholders 11a						
D	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)						
19a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	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.						
	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						
С	Enter the amount of reserves on hand						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			Х			
excess parachute payment(s) during the year?							
If "Yes," see the instructions and file Form 4720, Schedule N.							
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					
	If "Yes," complete Form 6069.						

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

	Check if Schedule O contains a response or note to any line in this Part VI			
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 18			
	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 1b 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b				
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c		X
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	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.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			77
	taxable entity during the year?	16a		X
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 organization's			
	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			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only) availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	LAMONT GORDON - (401) 490-3996 180 WESTMINSTER ST., SUITE 203, PROVIDENCE, RI 02903			
	TOO MEDITITIOIDE DI 0, DOTID 200, LICOVIDINCE, ICE 02703			

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

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

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

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

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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)	(C) Position					iout	(D) Reportable	(E) Reportable	(F) Estimated
Name and title	Average hours per week	box	, unle	ss pe	rson	than is bot or/trus	h an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) LAMONT GORDON	40.00				4			112 540	0	750
EXECUTIVE DIRECTOR	1 00	Х				\square		113,549.	0.	750.
(2) EBONY BRIDWELL-MITCHELL MEMBER	1.00	x						0.	0.	0.
(3) BRIAN VELASQUEZ	2.00									
TREASURER		Х		X				0.	0.	0.
(4) IVETTE LUNA	2.00							_	_	_
CHAIR		Х		Х				0.	0.	0.
(5) GRANT PORTER	1.00									
MEMBER	1 00	Х						0.	0.	0.
(6) SHAMIKA CAMERON	1.00	,,							0	0
MEMBER	2 00	Х						0.	0.	0.
(7) JARETTA KONNEH	2.00	X		x				0.	0.	0.
CO-CHAIR (8) KIRTLEY FISHER	2.00	^		Δ				0.	0.	0.
CO-CHAIR	2.00	X		Х				0.	0.	0.
(9) BRIAN CLARK	2.00							· ·	<u> </u>	
SECRETARY	<u> </u>	x		х				0.	0.	0.
(10) BRIDGET MULLANEY	1.00							•	•	•
MEMBER		Х						0.	0.	0.
(11) OSVALDO JOSE MARTI	1.00									
MEMBER		Х						0.	0.	0.
(12) JULIO REYES	1.00									
MEMBER		Х						0.	0.	0.
(13) CASSANDRA RICHTER	1.00							_	_	_
MEMBER		Х						0.	0.	0.
(14) CARLOS THEN	1.00									
MEMBER	1 00	Х						0.	0.	0.
(15) CICILY SHAW	1.00	١								•
MEMBER	1 00	Х						0.	0.	0.
(16) CHACE BAPTISTA	1.00	.							_	_
MEMBER	1.00	Х						0.	0.	0.
(17) MOBOLAJI OMISORE	1.00	X						0.	0.	0.
MEMBER	<u> </u>	$\Gamma \nabla$					L	<u> </u>	U •	- 000

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Form	990 (2023) COLLEGE V	VISIONS								27-23	344	723	Р	age 8
Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ghe	st C	Compensated Employe	es (continued)				
(A) Name and title Average hours per week			(do not check more than box, unless person is bo			than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimate amount other			
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization: (W-2/1099-MIS 1099-NEC)		fro orga and	oensa om th anizat d relat nizati	e ion ed
	CHARISE WILSON	1.00	,,								0			^
MEME	EK		X						0.		0.			0.
			-)					
	Subtotal								113,549.		0.		7	50. 0.
c d	Total from continuation sheets to Part VI Total (add lines 1b and 1c)								113,549.		0.	750		
2	Total number of individuals (including but n compensation from the organization	_	$\overline{}$						<u> </u>	0,000 of reportable	le			1
	compensation from the organization												Yes	No
3	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s											3		X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	ım of reportab	le co	omp	ensa	tior	n and	d ot	ther compensation from			4		X
5	Did any person listed on line 1a receive or a	=				-			-					v
Sec	rendered to the organization? If "Yes," com tion B. Independent Contractors	plete Schedul	e J f	or s	uch p	oers	son .					5		Х
1	Complete this table for your five highest co										npens	ation f	rom	
	the organization. Report compensation for (A) Name and business			ONI		/1111	OI W	111111	(B) Description of s		C	(Comper		n
	Total number of independent contractors (i	ncludina but n	ot li	mite	d to	tho	se li	ster	d above) who received m	nore than				
	\$100,000 of compensation from the organi						0		•			Form \$	990 (2023)

га		7 111	Check if Schedule O contains a response	or note to any lir	ne in this Part VIII			
			Officer in Goriedatic G contains a response	or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f Total. Add lines 1a-1f	35,250. .002,493. 12,000.	1,037,743.			
				Business Code				
e	2	а	FEE FOR SERVICE	900099	149,959.	149,959.		
Program Service Revenue		b c d						
P		f	All other program service revenue					
		g	Total. Add lines 2a-2f		149,959.			
	4		Investment income (including dividends, inter other similar amounts) Income from investment of tax-exempt bond	proceeds	3,608.			3,608.
	5	1	Royalties(i) Real	(ii) Personal				
	6	b	Gross rents 6a Less: rental expenses 6b	(ii) i eisonai				
			Rental income or (loss) 6c					
	7		Net rental income or (loss) Gross amount from sales of assets other than inventory (i) Securities	(ii) Other				
er Revenue		С	Less: cost or other basis and sales expenses 7b Gain or (loss) 7c					
r R			Net gain or (loss)					
Othe	8	а	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a					
			Less: direct expenses 85					
	_		Net income or (loss) from fundraising events					
	9		Gross income from gaming activities. See Part IV, line 19 Less: direct expenses 9a					
			Net income or (loss) from gaming activities	'				
	10	а	Gross sales of inventory, less returns and allowances					
			Less: cost of goods sold10	이				
		С	Net income or (loss) from sales of inventory .	Business Code				
Miscellaneous Revenue	11	a b	OTHER	900099	1,264.	1,264.		
evel		c						
Aisc R			All other revenue					
_			Total. Add lines 11a-11d		1,264.			
	12		Total revenue. See instructions		1,192,574.	151,223.	0.	3,608.

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Part IX | Statement of Functional Expenses

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

Dο	Check if Schedule O contains a responsion tinclude amounts reported on lines 6b,	(A) I	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees	114,299.	68,579.	22,860.	22,860
6	Compensation not included above to disqualified	,	,		·
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	495,387.	297,233.	99,077.	99,077
8	Pension plan accruals and contributions (include	,			,
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	36,540.	21,924.	7,308.	7.308
0	Payroll taxes	51,700.	31,020.	10,340.	7,308 10,340
1	Fees for services (nonemployees):	0=7.000			
	Management				
b					
	Accounting				
e	Lobbying Professional fundraising services. See Part IV, line 17		•		
_	Investment management fees				
f	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch 0.)	39,133.	24,461.	7,336.	7,336
40		35,133.	24,401.	7,330.	7,330
12	Advertising and promotion	6,443.	3,867.	1,288.	1,288
13	Office expenses	0,443.	3,007.	1,200.	1,200
14	Information technology				
15	Royalties	36,011.	21,607.	7,202.	7,202
16	Occupancy	2,516.	2,086.	215.	215
17	Travel	2,510.	2,000.	213.	213
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	8,057.	4,835.	1,611.	1,611
22	Depreciation, depletion, and amortization	7,085.	4,251.	1,417.	1,417
23	Insurance Other expanses Itamize expanses not sourced	7,005.	7,231.	1,11,	1,11
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 0.) STUDENT PROGRAMS & SUPP	107,467.	105,310.	1,423.	734
a	ALUMNI EVENTS AND DEVEL	75,866.	0.	37,461.	38,405
b	MISCELLANEOUS	13,694.	8,216.	2,739.	2,739
C	PROGRAM EVENTS	12,453.	10,585.	2,739.	1,868
d		46,481.	32,689.	6,896.	6,896
. е		1,053,132.	636,663.	207,173.	209,296
25	Total functional expenses. Add lines 1 through 24e	1,000,104.	030,003.	401,113.	403,430
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)				Earm 990 (202

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or r	ote to a	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	438,086.	1	366,609.		
	2	Savings and temporary cash investments	385,551.	2	639,105.		
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net			60,000.	4	70,819.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sul					
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons describ	oed in se	ection 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			4,790.	9	6,906
	10a	Land, buildings, and equipment: cost or other	·				
		basis. Complete Part VI of Schedule D	10a	101,183.			
	b	Less: accumulated depreciation			11,224.	10c	22,731
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, lin		12			
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			0.	15	140,018
	16	Total assets. Add lines 1 through 15 (must ed			899,651.	16	1,246,188
	17	Accounts payable and accrued expenses			48,011.	17	49,090
	18	Grants payable		18			
	19	Deferred revenue	0.	19	70,500		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet				21	
ies	22	Loans and other payables to any current or fo		~			
ij		trustee, key employee, creator or founder, sul					
Liabilities		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unr				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,	•				
		parties, and other liabilities not included on lin	ies 17-24	1). Complete Part X	0.		125 516
		of Schedule D			48,011.		135,516. 255,106.
	26	Total liabilities. Add lines 17 through 25			40,011.	26	233,100
es		Organizations that follow FASB ASC 958, c	песк пе	re 🔼			
S S	07	and complete lines 27, 28, 32, and 33.			561,720.	27	866,082.
3al	27 28	Net assets with departmentations			289,920.	28	125,000
Ja B	20	Net assets with donor restrictions Organizations that do not follow FASB ASC			205,520.	20	123,000
Ξ		and complete lines 29 through 33.	, 936, Ci	leck fiele			
٥	20	Capital stock or trust principal, or current fund	10			29	
ets	30	Paid-in or capital surplus, or land, building, or				30	
Ass	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances		851,640.	32	991,082.	
2	33	Total liabilities and net assets/fund balances	899,651.	33	1,246,188.		
	J	TOTAL HADIILIES AND HEL ASSELS/TUND DAIANCES			000,001.	აა	T, Z = 0 , 100 ;

Pa	rt XI Reconciliation of Net Assets				.gc
	Check if Schedule O contains a response or note to any line in this Part XI				
	Officer if Correctate O contains a response of flote to any line in this fart At				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1.1	92,5	574.
2	Total expenses (must equal Part IX, column (A), line 25)	2		53,1	
3	Revenue less expenses. Subtract line 2 from line 1	3		39,4	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		51,6	
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		9			0.
10	Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	-			
10		10	9	91,0	182.
Pa	column (B)) rt XIII Financial Statements and Reporting	10		<u> </u>	, , ,
					X
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	_
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			1.00	1
•	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	20	_		
22	Were the organization's financial statements compiled or reviewed by an independent accountant?		2:		x
Zu	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed			1	
	separate basis, consolidated basis, or both:	Jona			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		21	X	
b	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat			,	
	consolidated basis, or both:	e basis,			
	X Separate basis Consolidated basis Both consolidated and separate basis				
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit			
٠	review, or compilation of its financial statements and selection of an independent accountant?		20	X	1
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl			, <u></u>	
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	ioddic C			
Ja	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3		X
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required			1	+
J	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
	or additio, explain with on odificulte of and describe any steps taken to undergo such addits		J	,	

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

Name of the organization

COLLEGE VISIONS

Employer identification number

27-2344723 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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.) 8 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 university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. 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 I, 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). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Pa	Support Schedule for (Complete only if you checke	_					•
	fails to qualify under the tests			~	n ran c u to quanty t	ander Mart III. II (Ne	o gariizatiON
Se	ction A. Public Support	, [1	·			
	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(-,	(-,	(-,	(-,	(-)	(-)
	membership fees received. (Do not						
	include any "unusual grants.")	618,053.	786,867.	806,749.	995,247.	1037743.	4244659.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	618,053.	786,867.	806,749.	995,247.	1037743.	4244659.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						4044650
	Public support. Subtract line 5 from line 4.						4244659.
	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2019 618, 053.	(b) 2020 786,867.	(c) 2021 806, 749.	(d) 2022 995, 247.	(e) 2023 1037743.	(f) Total 4244659.
	Amounts from line 4	010,033.	700,007	000,749.	333,241.	103//43.	4244039.
8	Gross income from interest,						
	dividends, payments received on			· ·			
	securities loans, rents, royalties, and income from similar sources	3,528.	1,115.	335.	1,641.	3,608.	10,227.
۵	Net income from unrelated business	3,320.	1,113.	333.	1,011.	3,000.	10,227.
9	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	91.	373.	1,031.	7,800.	1,264.	10,559.
11	Total support. Add lines 7 through 10				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_,	4265445.
	Gross receipts from related activities,	etc. (see instructi	ons)			12	
	First 5 years. If the Form 990 is for the						
	organization, check this box and stor						
Se	ction C. Computation of Publ						
14	Public support percentage for 2023 (line 6, column (f), c	livided by line 11,	column (f))		14	99.51 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	99.41 %
16a	33 1/3% support test - 2023. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies						
k	b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact					VI how the organiz	ation
	meets the facts-and-circumstances to						
k	o 10% -facts-and-circumstances tes	-					10% or
	more, and if the organization meets the						
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						

Schedule A (Form 990) 2023

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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.)

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						
	include any "unusual grants.")	<u> </u>					
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	<u> </u>					
4	Tax revenues levied for the organ-						
	ization'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	1					
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(: Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	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						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)					1	
	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First 5 years. If the Form 990 is for the	e organization's f	first, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	tion,
_	check this box and stop here						<u></u>
	ction C. Computation of Publ					 	
	Public support percentage for 2023 (I					15	%
	Public support percentage from 2022					16	%
	ction D. Computation of Inves					14-1	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	% 17 is uset
198	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box at						
k	33 1/3% support tests - 2022. If the	•			•	•	
	line 18 is not more than 33 1/3%, che						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
-ra		
41-		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
00		
9a		
9b		
9с		
10a		
10b		
 A /Ears	~ 000	0000

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion 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			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
Seci	non C. Type it Supporting Organizations		V	- NI -
	Ways a majority of the avantization's divertors by twisters duving the tay year also a majority of the divertors		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).	1		
	tion D. All Type III Supporting Organizations			
	полититура по опрременя оправлением		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
	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			
	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		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction	ıs).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instructio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	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			
	these activities but for the organization's involvement.	2b		
	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	0-		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI .	3a		
IJ	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Sche	dule A (Form 990) 2023 COLLEGE VISIONS			27-2344723 Page 6
Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Org	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust c	on Nov. 20, 1970 (explain ir	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must of	omple	ete Sections A through E.	
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion 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		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2023

6

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Par	rt V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Org	anizations _{(continue}	ed)	
Secti	ion D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish ex		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 purpo	ns	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	e		
	(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	
	This of arrival arriva	(i)	(ii)		(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2023	S	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
С	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.				
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	Excess distributions carryover to 2024. Add lines 3				
-	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
_ <u>u</u>	Excess from 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 B

Schedule of Contributors

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

COLLEGE VISIONS 27-2344723 Organization type (check one): Filers of: Section: X = 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization 501(c)(3) exempt private foundation 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), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support 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, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year _______\$ _ 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-PF, Part I, line 2, to certify 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)

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$	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
2		\$55,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$10,000 .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$	Person X Payroll

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$10,000 .	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
8		\$7,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$12,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Nume, address, and Zir + 4	\$\$	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		\$\$	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		\$	Person X Payroll

Name of organization

COLLEGE VISIONS

Employer identification number

27-2344723

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l spa	ce is needed.	
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
13		\$_	10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
14		\$_	5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
15		\$_	75,000.	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
16		\$_	70,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
17		\$_	6,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
18		\$_	20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$55,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20		\$7,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21		\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23		\$35,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24		\$50,000.	Person X Payroll

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$10,000 .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30		\$10,000.	Person X Payroll

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
32		\$7,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33		\$5,000.	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
34		\$9,250.	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
35		\$6,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
36		\$30,000.	Person X Payroll

Name of organization

COLLEGE VISIONS

Employer identification number

27-2344723

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		
		\$			
(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	(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	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			

Schedule B (Form 990) (2023) Name of organization **Employer identification number** 27-2344723 COLLEGE VISIONS 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 Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (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 Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (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

Name of the organization

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

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

OMB No. 1545-0047

Inspection

Employer identification number

27-2344723 COLLEGE VISIONS Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

	organization answered "Yes" on Form 990, Part IV, lin	e 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 v	writing that the assets held in done	or advised fur	nds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor o			
	impermissible private benefit?			Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Forr	n 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).		
	Preservation of land for public use (for example, recrea		ation of a hist	orically important land area
	Protection of natural habitat			ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in th	ne form of a co	onservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	- · · · · · · · · · · · · · · · · · · ·			2b
С	Number of conservation easements on a certified historic stru			2c
d				
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rel			nization during the tax
	year		,	•
4	Number of states where property subject to conservation eas	sement is located		
5	Does the organization have a written policy regarding the per		lling of	
	violations, and enforcement of the conservation easements it			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing co	onservation ea	asements during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section	on 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and e	xpense state	ment and
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial	statements tl	nat describes the
	organization's accounting for conservation easements.			
Pa	rt III Organizations Maintaining Collections of		, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue state	ement and ba	lance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or resear	rch in furthera	ince of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes the	ese items.	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue stateme	nt and baland	ce sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research	in furtherand	e of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(ii) Assets included in Form 990, Part X			\$
2	If the organization received or held works of art, historical treatment			
	the following amounts required to be reported under FASB A	SC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			

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

Pa	t III Organizations Maintaining Co	ollections of A	rt, Histo	orical Tr	easures, or	Other	Simila	r Asse	ts (continu	ied)
3	Using the organization's acquisition, accession	n, and other record	ls, check	any of the	following that	make sig	nificant u	use of its		
	collection items (check all that apply).									
а	Public exhibition	d		oan or exc	hange progran	n				
b	Scholarly research	е	\Box c	ther						
С	Preservation for future generations									
4	Provide a description of the organization's col	lections and explain	n how the	ey further t	he organization	n's exemp	t purpo	se in Par	t XIII.	
5	During the year, did the organization solicit or	receive donations	of art, his	torical trea	sures, or other	similar a	ssets			
	to be sold to raise funds rather than to be mai	ntained as part of t	he organ	ization's co	ollection?			🗀	Yes	No_
Pa	t IV Escrow and Custodial Arrang	jements Complet	te if the o	rganizatior	n answered "Ye	es" on Fo	rm 990,	Part IV, I	ine 9, or	
	reported an amount on Form 990, Part	X, line 21.								
1a	Is the organization an agent, trustee, custodia	ın, or other interme	diary for d	contributio	ns or other ass	ets not ir	cluded		_	
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a									
									Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
	Distributions during the year						1e			
	Ending balance						1f			
	Did the organization include an amount on Fo						?		Yes	No No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation	n has been	provided in Pa	art XIII				
Pa	TY Endowment Funds Complete if t	he organization ans	wered "\	es" on Fo	rm 990, Part IV	[/] , line 10.				
	·	(a) Current year	(b) Pr	ior year	(c) Two years	back (d)	Three ye	ars back	(e) Four y	ears back
1a	Beginning of year balance									
	Contributions									
	Net investment earnings, gains, and losses			77						
	Grants or scholarships									
	Other expenditures for facilities									
	and programs									
f	Administrative expenses			7						
g	End of year balance									
2	Provide the estimated percentage of the curre	ent vear end balanc	e (line 1a	. column (a	a)) held as:					
а	Board designated or quasi-endowment		%	,	,,					
b	Permanent endowment	%	7							
С	Term endowment %	5								
	The percentages on lines 2a, 2b, and 2c shou	ld equal 100%.								
За	Are there endowment funds not in the posses	sion of the organiza	ation that	are held a	and administere	ed for the				
	organization by:	-								res No
	(i) Unrelated organizations?								3a(i)	
	(ii) Related organizations?									
b	If "Yes" on line 3a(ii), are the related organizat									
4	Describe in Part XIII the intended uses of the									
Pa	t VI Land, Buildings, and Equipme									
	Complete if the organization answered	"Yes" on Form 990), Part IV,	line 11a. S	See Form 990,	Part X, lir	ie 10.			
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Acc	umulated	t l	(d) Book	value
		basis (investn	nent)	basis	(other)	depre	ciation			
1a	Land	.								
	Buildings									
	Leasehold improvements									
	Equipment			9	1,553.	7	0,85	9.	20	,694.
	Other				9,630.		7,59			,037.
	Add lines 1a through 1a (Column (d) must ea		V line 10						2.2	

	(Form 990) 2023	COLLEGE VISIONS	27-2344723	Page 🤄
Part VII	Investments -	Other Securities		

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.				
(a) Description of security or category (including name of security	(b) Book value	(c) Method of valuation: Cost or end-of-year market value		
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				

Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

(a) Description	(b) Book value
(1) OPERATING RIGHT OF USE ASSET	140,018.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	140,018.

Part X **Other Liabilities**

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	OPERATING LEASE LIABILITY, CURRENT	
(3)	PORTION	26,450.
(4)	OPERATING LEASE LIABILITY,	
(5)	NONCURRENT PORTION	109,066.
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	135,516.

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... X

	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	1,192,574
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
		2d		
е	Add lines 2a through 2d		2e	0 .
3	Subtract line 2e from line 1		3	1,192,574
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	0 .
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	1,192,574

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

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

1	Total expenses and losses per audited financial statements	1	1,053,132.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments 2b		
	Other losses 2c		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	1,053,132.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		_
С	Add lines 4a and 4b	4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,053,132.
	w VIII O was law and all lufa was at an		

| Part XIII | Supplemental Information

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

PART X, LINE 2:

COLLEGE VISIONS IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501-C-3
OF THE INTERNAL REVENUE CODE AND APPLICABLE STATE LAW. THE ACCOUNTING
STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ADDRESSES THE
DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON
A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS UNDER THIS
GUIDANCE, COLLEGE VISIONS MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN
TAX POSITION ONLY IF IT IS MORE LIEKLY THAN NOT THE TAX POSITION

SCHEDULE 0 (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. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

COLLEGE VISIONS

Employer identification number 27-2344723

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
HIGHER EDUCATION BY PROVIDING ADVISING AND RESOURCES TO PROMOTE COLLEGE
ENROLLMENT, PERSISTENCE AND GRADUATION. COLLEGE VISIONS ADVANCES EQUAL
ACCESS TO EDUCATIONAL OPPORTUNITIES IN HISTORICALLY UNDER-SERVED
COMMUNITIES.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
HISTORICALLY UNDER-SERVED COMMUNITIES.
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 IS PROVIDED TO THE BOARD FINANCE COMMITTEE MEMBERS FOR REVIEW
PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 15A:
THE BOARD OF DIRECTORS DETERMINES THE EXECUTIVE DIRECTOR'S SALARY AND
COMPENSATION PACKAGE WHICH IS DOCUMENTED IN BOARD MEETING MINUTES.
FORM 990, PART VI, SECTION C, LINE 19:
THE FORM 990 IS AVAILABLE ON GUIDESTAR OR UPON REQUEST. THE ORGANIZATION'S
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
ARE AVAILABLE UPON REQUEST.
FORM 990, PART XII, LINE 2C:
THIS PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

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