### 2023 Filing Instructions CITIZENS FOR A LORING PARK COMMUNITY Tax year ending 12-31-2023

### Form filed:

Form 990 and supplemental forms and schedules

## Filing method:

The return has been e-filed, do not mail.

## Due date:

05-15-2024

## The return reflects neither a refund nor a balance due.

### Please note:

The Taxpayer First Act requires tax-exempt organizations to electronically file all information returns in the 990 series and related forms for tax years beginning after July 1, 2019. Mailing these returns is no longer allowed.

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2023

	Department of the Treasury Do not enter social security numbers on this form as it may be made public.										
	Internal Revenue Service         Go to www.irs.gov/Form990 for instructions and the latest information.           A         For the 2023 calendar year, or tax year beginning         , 2023, and ending										
_								ing		, 20	
Bc	heck if a	applicable:		ITIZENS FOR A LORIN	IG PARK CON	MUNITY	•		D Employ	ver identification number	
L A	ddress o	change	Doing business as							41-1676234	
∐ N	ame cha	ange	Number and street (or P.O. b	box if mail is not delivered to street add	Iress)		Room/su	ite	E Telepho	one number	
l Ir	itial retu	irn	1645 Hennepin	Avenue South Room	204					(612)799-1858	
L F	inal retu	rn/terminated	City or town, state or provinc	e, country, and ZIP or foreign postal co	ode				G Gross	receipts	
A	mended	l return	Minneapolis,	MN 55403					\$	243,591	
A	pplicatio	on pending	F Name and address of princip	al officer: Jana Metge				H(a) Is this a g	group return for	subordinates? Yes X No	
			Same as C abo	ve				H(b) Are all s	subordinates	included? Yes No	
I T	ax-exem	npt status: X	501(c)(3) 501(c) (	) (insert no.) 4947(a)	(1) or 527			If "No,"	attach a list.	See instructions	
JW	ebsite:	www	.loringpark.org					H(c) Group e	exemption nu	umber	
ΚF	orm of o	rganization: X	Corporation Trust As	ssociation Other	LY	ear of formati	ion: <b>19</b>	72 M S	State of legal	domicile: MN	
Par	tl	Summar	у								
	1	Briefly descr	ibe the organization's mis	sion or most significant activit	ies: The C	LPC mis	sion	is to c	ultiva	te continuing	
		-	-	verse neighborhood		more h	armon	ious, t	hrivin	q, and beautiful	
ce		communit		· · · · <b>J</b> · · · · ·						57	
nan			1.								
Activities & Governance	2	Check this b	ox  if the organization	discontinued its operations or	r disposed of mo	ore than 25	5% of its	net assets.			
Ô	3			verning body (Part VI, line 1a)					3	9	
<u>م</u>	1			ers of the governing body (Pa					4	9	
ies									5		
ivit	5		er of individuals employed	1							
Act	6		r of volunteers (estimate i	.,	••••				6	100	
	7a			n Part VIII, column (C), line 12					7a	0	
	b	Net unrelate	ed business taxable incom	e from Form 990-T, Part I, line	e11				7b	0	
								Prior Year		Current Year	
	8	Contributions	242,946								
iue	9	Program ser	rvice revenue (Part VIII, lin		0						
Revenue	10	Investment in	ncome (Part VIII, column	(A), lines 3, 4, and 7d)			166				
Re	11	Other revenue	ue (Part VIII, column (A), I	ines 5, 6d, 8c, 9c, 10c, and 11				479			
	12	Total revenu	e - add lines 8 through 11	(must equal Part VIII, column	ı (A), line 12)					243,591	
	13	Grants and s	similar amounts paid (Part	t IX, column (A), lines 1-3) .						0	
	14	Benefits paid	d to or for members (Part	IX, column (A), line 4)						0	
	15	Salaries, oth	ner compensation, employe	e benefits (Part IX, column (/	A), lines 5-10)					86,694	
ses	16a	Professional	I fundraising fees (Part IX	, column (A), line 11e)						0	
penses			ising expenses (Part IX, c			0					
Exp	17		ses (Part IX, column (A),				-			27,689	
	18	•		st equal Part IX, column (A), li						114,383	
	19	•	,	18 from line 12	,					129,208	
	15	Trevenue les			•••••		Bari	nuine of Curr	ant Vaar		
s or ncer	20	Total acceta	(Dort V line 16)				Begi	nning of Curre		End of Year	
sset Bala	20		,						),197	201,224	
et A Ind	20       Total assets (Part X, line 16)       60,197         21       Total liabilities (Part X, line 26)       10,000         22       Net assets or fund balances. Subtract line 21 from line 20       50,197									21,996	
	22				• • • • • • •			50	,197	179,228	
Par			Ire Block				- ( )		1-4 10 In		
				turn, including accompanying schedule officer) is based on all information of wh			of my kno	wiedge and bei	lier, it is		
						-					
Lee Frelich											
Sigr		Signature of office	cer						Date		
Here	e	Lee	Frelich, Preside	nt							
_		Type or print nar	me and title								
		Print/Type pre	eparer's name	Preparer's signature	C	Date		Check	if F	PTIN	

11-13-2024

Abdulai Musa

Paid

P01674814

self-employed

Pa	990 (2023) CITIZENS FOR A LORING PL	ARK COMMUNITY	41-1676234 Page 2
	rt III Statement of Program Service	Accomplishments	
	Check if Schedule O contains a response	or note to any line in this Part III	<u></u>
	Briefly describe the organization's mission:		
		continuing leadership and help a	diverse neighborhood realize
	more harmonious, thriving, and be	eautiful community.	
	Did the organization undertake any significant prog	ram services during the year which were not listed o	on the
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	If "Yes," describe these new services on Schedule		
	Did the organization cease conducting, or make sig		
			Yes 🗴 No
	If "Yes," describe these changes on Schedule O.		
	Describe the organization's program service accom	mplishments for each of its three largest program ser	vices, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organization	ations are required to report the amount of grants a	nd allocations to others,
	the total expenses, and revenue, if any, for each pro	ogram service reported.	
а		93,371 including grants of \$	
		from COVID, Civil Unrest, Violenc	
		ng Park Art Festival, Twin Cities t featuring local Ukrainian and R	
		Night Out Event was hosted by the	
		s were hosted virtually. We held	—
		Loring, and Give to the Max Day.	
		Crime and Safety continues to be	
	Fountain Task Force meets monthly	y. We hosted engagement meetings	on proposed public works
	projects. We continue to work with	th the Park and Recreation staff	on the creation of 2 Picklebal
	Courts. Spots for the urban food	gardens filled quickly. CLPC's r	ole was to promote the
	opportunity to garden.		
2	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$)
,	(Code:) (Expenses \$		) (Revenue \$)
<b>.</b>	(Code: ) (Evpenses \$	including grants of \$	
;	(Code:) (Expenses \$	including grants of \$	) (Revenue \$)
	(Code:) (Expenses \$	including grants of \$	) (Revenue \$)
;	(Code:) (Expenses \$	including grants of \$	) (Revenue \$)
:	(Code:) (Expenses \$	including grants of \$	) (Revenue \$)
	(Code:) (Expenses \$	including grants of \$	) (Revenue \$)
2	(Code:) (Expenses \$	including grants of \$	) (Revenue \$)
B	(Code:) (Expenses \$	including grants of \$	) (Revenue \$)
c	(Code:) (Expenses \$	including grants of \$	) (Revenue \$)
<b>B</b>	(Code:) (Expenses \$	including grants of \$	) (Revenue \$)
C	(Code:) (Expenses \$	including grants of \$	) (Revenue \$)
			) (Revenue \$)
c	Other program services (Describe on Schedule O.)	)	
	Other program services (Describe on Schedule O.)		

Forr	1 990 (2023) CITIZENS FOR A LORING PARK COMMUNITY 41-1676	234	F	Page 3
Pa	rt IV Checklist of Required Schedules		V	N
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A	1	x	
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 L	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in 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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		
44	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
d	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes,"</i> complete Schedule D, Part VI	11a		x
٢	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more	Tia		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
c	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	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		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and JV.	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	47		
40	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	10		v
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part JI.	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		v
20	If "Yes," complete Schedule G, Part III.	19 20a		x
20a b	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a 20b		x
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
- '	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
				(2022)

Form 990 (2023)

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

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Par				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 1	-		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	x	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over				
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? .		4a		х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FB	AR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\ldots$ .		5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? $\ldots$		5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	organization solicit any contributions that were not tax deductible as charitable contributions? $\ldots$		6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or				
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	required to file Form 8282?		7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? .		7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as i	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.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а		10a			
b		10b			
11	Section 501(c)(12) organizations. Enter:	1	-		
а		11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources		1		
		11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? .		12a		
b		12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		-		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
-	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which				
-		13b			
с	- · · · F	13c	-		
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 Q		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				
	excess parachute payment(s) during the year?		15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.		13		~
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		v
10			10		x
17	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		
		• • • • • • • •	17		
	If "Yes," complete Form 6069.				

Forr	m 990 (2023) CITIZENS FOR A LORING PARK COMMUNITY 41-16762	34	P	age 6
Pa	art VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below,	and fo	ora"l	Vo″
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See ii	nstruc	ctions.
	Check if Schedule O contains a response or note to any line in this Part VI			x
See	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	•		
2	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	2		
4	supervision of officers, directors, trustees, or key employees to a management company or other person?	3 4		X
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	4 5		x
6	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		x x
0 7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
74	one or more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	74		
	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1.0		
-	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
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 Q	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		х
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	х	
13	Did the organization have a written whistleblower policy?	13	х	
14	Did the organization have a written document retention and destruction policy?	14	х	
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?	450		
a b	The organization's CEO, Executive Director, or top management official	15a 15b	х	x
U	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	130		~
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
Toa	with a 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	Tua		~
~	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		x
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Minnesota			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website I Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	Jana Metge (612)799-1858, 1645 Hennepin Avenue South Room 204, Minneapolis, MN 554	)3		

Form 990 (2023) CITIZENS FOR A LORING PARK COMMUNITY	41-1676234	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Col	mpensated Employee	s, 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 En	nployees	
1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with o	or within the	
organization's tax year.		
• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardles	ss of amount of	

compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

				(	C)					
(A)	(B)	Position (do not check more than one				(D)	(E)	(F)		
Name and title	Average	box, unless person is both an				both ar		Reportable	Reportable	Estimated amount
	hours per week	officer and a director/trustee)						compensation from the	compensation from related	of other compensation
	(list any		_			<b>T</b> 0 <b>T</b>		organization (W-2/	organizations (W-2/	from the
	hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	inplo	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
	related	dual	Ition	۳	mplo	st co	er	1000 1120)	1000 1120)	Totated organizations
	organizations below	trust	al tru		oyee	ompe				
	dotted line)	e	stee			Highest compensated employee				
(1)Jana Metge	40.00									
Executive Director				х				80,582	0	0
(2)Norman Kulba	2.50									
Board Member		х						0	0	0
(3)Phyllis Roden	1.25									
Board Member		х						0	0	0
(4)John Van Heel	2.50									
Board Member		х						0	0	0
(5)Alex_Heller	2.50									
Board Member		х						0	0	0
(6)Ryo Hamasaki	5.00									
Board Member		х						0	0	0
(7)Diane Connor	2.50									
Vice President		х		х				0	0	0
(8) Terri Ashmore	2.50									
Treasurer		х		х				0	0	0
(9)Lee Frelich	2.50									
President		х		х				0	0	0
(10)Brian Thurn	5.00									
Secretary		х		х				0	0	0
<u>(11)</u>										
(12)										
(13)										
<u>(14)</u>										
										<b>E 222</b> (2222)

	90 (2023) CITIZENS FOR A 1										L-1676			age <b>8</b>
Part	VII Section A. Officers, Directors,	Trustees,	Key	Emj			es, ar	nd I	Highest Comp	ensated	Emplo	oyees	(cont	inued
	(A) Name and title	<b>(B)</b> Average hours per week	box	, unle	Po neck n ss pe	rson i	han one s both a r/trustee	n	(D) Reportable compensation from the	(E) Reporta compensa from rela	able ation ated	COI	(F) ated am of other mpensati	
		(list any hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Hignest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organization 1099-MI 1099-NE	sc/	orga	rom the nization d organiz	
(15)			-											
(16)			-											
(17)			-											
(18)			-											
(19)			-											
(20)			-											
(21)			-											
(22)			-											
(23)			-											
(24)			-											
(25)			-											
1b	Subtotal	••••		•••	•••	•••	• • •	•						
С	Total from continuation sheets to Part VII, Se		•••					•						
d	Total (add lines 1b and 1c)									<b>.</b>	0			0
2	Total number of individuals (including but reportable compensation from the organized		to thos	e lis	sted	abo	ove) v	vho	received more th	nan \$100,	000 of			c
	repertable compensation from the organi												Yes	No
3	Did the organization list any former officer, dir		-		-		-							
	employee on line 1a? If "Yes," complete Schee											3		х
4	For any individual listed on line 1a, is the sum of organization and related organizations greater	than \$150,00	0? If "\	Yes,"	' con	nple	te Sch	nedu	lle J for such					
5	individual										• • • •	4		х
5	for services rendered to the organization? If "Y			-			-					5		x
Secti	on B. Independent Contractors		20.100			540								
1	Complete this table for your five highest of compensation from the organization. Rep		-										tax v	ear.
	(A)							1	(B)			(C)		
	Name and business add	ress							Description of servic	es		Compens	ation	
								_						
2	Total number of independent contractors	(including b	ut not	limit	ed t	to th	iose li	iste	d above) who					

Form 9	90 (20	23) CITIZ	ENS	FOR A L	ORI	NG PARK COMMU	JNITY		41-16762	34 Page 9
Part	VIII	Statement of Rev	enu	ie						
		Check if Schedule O	) cor	ntains a res	pons	e or note to any l	(A)	(B)	(C)	(D)
							Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .			1a					
ŝ	b	Membership dues	••		1b					
Contributions, Gifts, Grants and Other Similar Amounts	c	<b>3</b>		1c						
s, G Amo	d	<b>J</b>		1d						
Gift Iar ∕	e Government grants (contributions) 1e					105,322				
ons, Simi	f		-							
her		and similar amounts not in Noncash contributions inc			1f	137,624				
	g	lines 1a-1f			1g	\$				
	h	Total. Add lines 1a-1f					242,946			
			••			Business Code	2127510			
	2a									
rice	b									
Serv	c									
Program Service Revenue	d									
Reg	е									
Ţ.		All other program service i								
	g	Total. Add lines 2a-2f .	••							
	3	Investment income (includi								
		other similar amounts) . Income from investment of					166			166
	4	Royalties			•					
				(i) Real		(ii) Personal				
	6a	Gross rents	6a	(1) 1(04)						
		Less: rental expenses								
		Rental income or (loss)	6c							
	d	Net rental income or (loss)								
	7a	Gross amount from		(i) Securitie	es	(ii) Other				
		sales of assets								
		other than inventory	7a							
	b	Less: cost or other basis								
nue		and sales expenses								
evel		Gain or (loss)								
Other Revenue		Net gain or (loss) Gross income from fundrai			•••					
Othe	Jua	events (not including \$	-							
0		of contributions reported o								
		1c). See Part IV, line 18			8a					
	b	Less: direct expenses .			8b					
	c	Net income or (loss) from f	fundr	aising event	s					
	9a	Gross income from gaming	g							
		activities. See Part IV, line			9a					
		Less: direct expenses .			9b					
		Net income or (loss) from (	-	ng activities	••					
	10a	Gross sales of inventory, le returns and allowances .			10-					
	h				10a 10b					
		Less: cost of goods sold Net income or (loss) from s				1				
			50103		••	Business Code				
S	11a	Other Revenue				900099	479			479
Miscellanous Revenue	b									
ella ven	c									
Re	d	All other revenue								
2	е	Total. Add lines 11a-11d					479			
	12	Total revenue. See instru	iction	IS			243,591	0	0	645

## 3) CITIZENS FOR A LORING PARK COMMUNITY

Sec	tion 501(c)(3) and 501(c)(4) organizations must comple			nust complete colum	n (A).				
	Check if Schedule O contains a response or note to any line in this Part IX								
Do n	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising				
8b, 9	b, and 10b of Part VIII.	i otal oxponoco	expenses	general expenses	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	80,582	68,495	12,087					
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								
8	Pension plan accruals and contributions (include								
5	section 401(k) and 403(b) employer contributions)								
9	Other employee benefits								
9 10		6 110	5,195	917					
	-	6,112	5,195	917					
11	Fees for services (nonemployees):								
a L	Management								
b		50		50					
C		2,663		2,663					
d									
е	Professional fundraising services. See Part IV, line 17.								
f	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25, column								
	(A), amount, list line 11g expenses on Schedule O.)	10,772	10,521	251					
12	Advertising and promotion	250	250						
13	Office expenses	6,074	4,948	1,126					
14	Information technology								
15	Royalties								
16	Occupancy	3,237	2,751	486					
17	Travel								
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	500	500						
20									
21	Payments to affiliates								
22	Depreciation, depletion, and amortization								
23		1,003	424	579					
24	Other expenses. Itemize expenses not covered								
	above (List miscellaneous expenses on line 24e. If								
	line 24e amount exceeds 10% of line 25, column								
	(A), amount, list line 24e expenses on Schedule O.)								
а	Program Expenses	212	212						
b	Permits, Fees, Licenses	75	75						
c		, 5	, , , , , , , , , , , , , , , , , , , ,						
d									
e	All other expenses	2,853		2,853					
25	Total functional expenses. Add lines 1 through 24e	114,383	93,371	2,853	0				
25 26	Joint costs. Complete this line only if the	114,303	33,3/1	21,012	0				
20	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)								

Form	990 (20	23) CITIZENS FOR A LORING PARK COMMUNITY	43	L-167623	4 Page 11
Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
	1		Beginning of year		End of year
	1	Cash - non-interest-bearing	22,958	1	65,825
	2	Savings and temporary cash investments	16,601	2	101,529
	3	Pledges and grants receivable, net	20,638	3	33,870
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) $\ldots$		6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a	-		
	b	Less: accumulated depreciation		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	60,197	16	201,224
	17	Accounts payable and accrued expenses		17	1,996
	18	Grants payable		18	
	19	Deferred revenue	10,000	19	20,000
	20	Tax-exempt bond liabilities		20	-
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liat		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X		05	
			10.000	25	
	26	Total liabilities. Add lines 17 through 25       Image: Comparison of the second	10,000	26	21,996
		Organizations that follow FASB ASC 958, check here			
es	27	and complete lines 27, 28, 32, and 33.	46.608	07	64 216
anc	27	Net assets without donor restrictions	46,607	27	64,316
Bal	28	Net assets with donor restrictions	3,590	28	114,912
pu		Organizations that do not follow FASB ASC 958, check here			
Net Assets or Fund Balances	20	and complete lines 29 through 33.		29	
s ol	29 20	Capital stock or trust principal, or current funds		29 30	
set	30 21			30	
t As	31 32	Retained earnings, endowment, accumulated income, or other funds          Total net assets or fund balances	E0 107	31	170 000
Net	32	Total liabilities and net assets/fund balances	50,197	32	179,228
	55		60,197	55	201,224

EEA

Form **990** (2023)

Form	990 (2023) CITIZENS FOR A LORING PARK COMMUNITY	41-167623	4	P	age <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		243	,591
2	Total expenses (must equal Part IX, column (A), line 25)	2		114	,383
3	Revenue less expenses. Subtract line 2 from line 1	3		129	,208
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		50,	,197
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		(	(177)
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		179,	,228
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: 🗌 Cash 🛛 🕱 Accrual 🗌 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		x
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u>.</u>	3b		
EEA			Form	n <b>990</b>	(2023)

SCHE	DULE	Α
(Form	990)	

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2023

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service				Attach to Form 990 or Form 990-EZ. www.irs.gov/Form990 for instructions and the latest information.					Open to Public
		he organization	Go to	www.irs.gov/For	m990 for instructions a	and the lat	est inform	Employer identification	Inspection
		-	ODING DADY OF						
Par			ORING PARK CO		I organizations mus	t comple	te this r	41-167623	
					nes 1 through 12, check of				
1			•	· · ·	hurches described in se	,	,		
2		-			h Schedule E (Form 990	•		•	
3	П				ion described in section		(A)(iii)		
4	П			•				b)(1)(A)(iii). Enter the	9
	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:								
5	$\square$	•		enefit of a college o	r university owned or op	erated by a	aovernme	ental unit described in	
-		•	)(1)(A)(iv). (Comple	•	·		9		
6	П	•		,	I unit described in section	on 170(b)( <sup>,</sup>	1)(A)(v).		
7	Π		-	-	art of its support from a g			rom the general public	;
		•	ection 170(b)(1)(A)	•				0 1	
8		A community t	rust described in se	ction 170(b)(1)(A)	(vi). (Complete Part II.)				
9		An agricultural	research organizati	on described in <b>se</b>	ction 170(b)(1)(A)(ix) o	perated in	conjunctio	n with a land-grant co	ollege
		or university or	a non-land-grant co	llege of agriculture	(see instructions). Enter	the name,	city, and st	ate of the college or	
		university:							
10	X	receipts from a support from g	ctivities related to its ross investment inco	s exempt functions, ome and unrelated l	33 1/3% of its support fro subject to certain excep pusiness taxable income e section 509(a)(2). (Co	tions; and ( (less secti	(2) no mor on 511 tax	e than 33 1/3% of its	SS
11		An organizatio	n organized and op	erated exclusively t	to test for public safety.	See <b>sectio</b>	n 509(a)(4	l).	
12		An organizatio	n organized and ope	erated exclusively for	or the benefit of, to perform	m the funct	tions of, or	to carry out the purpo	ses of
		one or more p	ublicly supported or	ganizations describ	ed in section 509(a)(1)	or <b>section</b>	509(a)(2)	. See <b>section 509(a)</b>	(3). Check
		the box on line	s 12a through 12d th	nat describes the typ	pe of supporting organization	ation and c	omplete lir	nes 12e, 12f, and 12g.	
а		<b>Type I.</b> A s	supporting organization	tion operated, supe	ervised, or controlled by i	ts supporte	ed organiz	ation(s), typically by g	giving
		the suppor	ted organization(s) t	he power to regula	rly appoint or elect a ma	jority of the	directors	or trustees of the	
		supporting	organization. You	must complete Pa	rt IV, Sections A and B	i.			
b				•	controlled in connection				•
			•		tion vested in the same	persons that	at control o	r manage the support	ed
			on(s). You must co	•					
С					rganization operated in c				d with,
					ou must complete Par				
d			-		ing organization operate				
				-	n generally must satisfy a			ent and an attentivene	ess
		_ ·	,	-	ete Part IV, Sections A				
е			0		en determination from the			і, туре ії, туре ії	
4	-		r of supported organ	-	integrated supporting o	ganization			
f	_		ving information abo		$\cdots$		• • • • •		•••
g			ě.			(iv) is the o	rappization	(v) Amount of monotony	(vi) Amount of
	(i) Name of supported organization       (ii) EIN       (iii) Type of organization       (iv) Is the organization       (v) Amount of monetary       (vi) Amount of         (described on lines 1-10       above (see instructions))       listed in your governing       support (see       other support (see							other support (see	
						Yes	No		
(A)									
(B)									
(C)									
(D)									
(E)									

Total

Schedu	e A (Form 990) 2023 CITIZENS FO	OR A LORING	PARK COMM	UNITY		41-167623	4 Page <b>2</b>
Part	II Support Schedule for Organiza	ations Desc	ribed in Sect	tions 170(b)(	1)(A)(iv) and	170(b)(1)(A)	(vi)
	(Complete only if you checked th	ne box on line	e 5, 7, or 8 of	Part I or if the	e organizatior	n failed to qua	lify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, pl	lease complet	te Part III.)	
Secti	on A. Public Support						
	dar 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.")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
-	furnished by a governmental unit to the						
	organization without charge						
4	<b>Total.</b> Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	(4) 2010	(6) 2020	(0) 2021	(0) 2022	(0) 2020	(i) i otai
8	Gross income from interest, dividends,						
0	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources						
9	Net income from unrelated business						
9							
	activities, whether or not the business						
10	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10					40	
12	Gross receipts from related activities, etc.						.) (0)
13	First 5 years. If the Form 990 is for the o						
0	organization, check this box and <b>stop he</b>	<u>ne</u>	• • • • • • • • •				•••••
	on C. Computation of Public Support			4.4 1 (0)			
14	Public support percentage for 2023 (line 6					14	%
15	Public support percentage from 2022 Sch					15	%
16a	33 1/3% support test - 2023. If the organ						
	box and <b>stop here.</b> The organization qua						
b	33 1/3% support test - 2022. If the organ						
	this box and <b>stop here.</b> The organization						
17a	10%-facts-and-circumstances test - 20						
	10% or more, and if the organization mee						
	Part VI how the organization meets the fa			-	-		_
	organization						
b	10%-facts-and-circumstances test - 20	-					
	15 is 10% or more, and if the organization					-	
	in Part VI how the organization meets the			-	-		
	organization						
18	Private foundation. If the organization di	d not check a	box on line 13,	, 16a, 16b, 17a	a, or 17b, check	this box and s	ee
	instructions						<u></u>

Part	III Support Schedule for Organiza	ations Descr	ibed in Sect	ion 509(a)(2)			
	(Complete only if you checked th					to qualify un	der Part II.
	If the organization fails to qualify	under the tes	sts listed belo	w, please co	mplete Part II	.)	
Secti	on A. Public Support			· •	•		
-	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	124,292	84,803	119,800	140,759	242,946	712,600
2	Gross receipts from admissions, merchandise sold or services performed, or facilities fumished in any activity that is related to the		,				
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	124,292	84,803	119,800	140,759	242,946	712,600
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
0							<b>510 600</b>
Cooti	line 6.)						712,600
-	on B. Total Support	(-) 2010	(1-) 0000	(-) 0004	(4) 0000	(-) 0000	
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	124,292	84,803	119,800	140,759	242,946	712,600
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
-	royalties, and income from similar sources .	6	3	4	16	166	195
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	6	3	4	16	166	195
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.)					479	479
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	124,298	84,806	119,804	140,775	243,591	713,274
14	First 5 years. If the Form 990 is for the or						
	organization, check this box and <b>stop her</b>	•			•		
Secti	on C. Computation of Public Suppor						····
15	Public support percentage for 2023 (line 8			3 column (f))		15	99.91 %
16	Public support percentage from 2022 Sch		•			16	
				<u></u>	<u></u>		100.00 %
	on D. Computation of Investment Inc			ulino 10!	mn (f))	47	• • • • • •
17	Investment income percentage for 2023 (I					17	0.00 %
18	Investment income percentage from 2022					18	0.00 %
19a	33 1/3% support tests - 2023. If the orga						
-	17 is not more than 33 1/3%, check this be		-	-		••••	
b	33 1/3% support tests - 2022. If the organizati						
	line 18 is not more than 33 1/3%, check this bo	-	-			-	
20	Private foundation. If the organization die	d not check a b	oox on line 14,	19a, or 19b, c	heck this box a	ind see instruc	tions 🗌

 Schedule A (Form 990) 2023
 CITIZENS
 FOR
 A
 LORING
 PARK
 COMMUNITY

Page 3

41-1676234

Page 4

No

Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

#### CITIZENS FOR A LORING PARK COMMUNITY 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). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a lines 3b and 3c below. b Did the organization confirm that each supported organization gualified 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. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) С purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes," and if you checked 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. Did the organization support any foreign supported organization that does not have an IRS determination С 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). Type I or Type II only. Was any added or substituted supported organization part of a class already b designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control? С 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 disgualified 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. Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which b the supporting organization had an interest? If "Yes," provide detail in Part VI. С Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedu	le A (F	orm 99	0) 2023

Schedu	Ile A (Form 990) 2023 CITIZENS FOR A LORING PARK COMMUNITY 41-167623	4	P	age
Part	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 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in <b>Part VI.</b>	11c		
ect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-				

or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

## Section D. All Type III Supporting Organizations

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

## Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- The organization satisfied the Activities Test. *Complete line 2 below.* а
- b The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). Yes
- 2 Activities Test. Answer lines 2a and 2b below.
- а Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. *Answer lines 3a and 3b below.*
- а Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990) 2023

2a

2b

3a

3b

No

1

	e A (Form 990) 2023 CITIZENS FOR A LORING PARK COMMUNITY		41-167	6234 Page
Part		-		
1	Check here if the organization satisfied the Integral Part Test as a qualifying			,
	instructions. All other Type III non-functionally integrated supporting organ	izatio	ns must complete Secti	
Secti	on A - Adjusted Net Income	_	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
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		
Secti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the argenization's first one near functions		e evente el True el III, er venere	

CITIZENS FOR A LORING PARK COMMUNITY

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

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

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Schedu	e A (Form 990) 2023 CITIZENS FOR A LORING PAR	RK COMMUNITY	41-1	67623	34 Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	<ol><li>Supporting Organi</li></ol>	zations (continue	d)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organi	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023		(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023				
	(reasonable 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				
е	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)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from				
	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	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 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2019				
b	Excess from 2020				
С	Excess from 2021				
d	Excess from 2022				
e	Excess from 2023				
EEA				Sch	nedule A (Form 990) 2023

	Page 8
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 (Form 990)

Department of the Treasury

## Schedule of Contributors

OMB No. 1545-0047

2023

## Attach to Form 990, 990-EZ, or Form 990-PF.

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

Internal Revenue Service Name of the organization Employer identification number 41-1676234

## CITIZENS FOR A LORING PARK COMMUNITY

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

#### Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

### **General Rule**

X 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.

Part I	<b>Contributors</b> (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_	City Of Minneapolis 105 5th Avenue South	\$105,322	Person x Payroll Noncash				
	Minneapolis MN 55401		(Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
_2_	Joseph Whitney		Person 🗵 Payroll 🗌				
	1645 Hennepin Ave So Suite 204 Minneapolis MN 55403	\$5,000	Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Nancy Anderson 1201 Yale Place Minneapolis MN 55403	\$	PersonxPayrollNoncash(Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	PersonPayrollNoncash(Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	PersonPayrollNoncash(Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	PersonPayrollNoncash(Complete Part II for noncash contributions.)				

Schedule B (Form 990) (2023)

Name of organization CITIZENS FOR A LORING PARK COMMUNITY

41-1676234

Employer identification number

SCHEDULE D	
(Form 990)	

## **Supplemental Financial Statements**

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

Attach to Form 990

OMB No. 1545-0047 2023

**Open to Public** 

Inspection

	Attach to Form 550.	
Go to v	www.irs.gov/Form990 for instructions and the latest information.	

Internal Revenue Service Name

Department of the Treasury

Name o	the organization			Employer Identification number
CITIZ	ENS FOR A LORING PARK COMMUNITY			41-1676234
Pa	t I Organizations Maintaining Donor Advised	Funds or Other S	imilar Funds or Acc	counts
	Complete if the organization answered "Yes"	on Form 990, Part	IV, line 6.	
	· · · · ·	(a) Donor	advised funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value of grants norm (during year)			
		writing that the acce	ha hald in denor advised	
5	Did the organization inform all donors and donor advisors in			
-	funds are the organization's property, subject to the organiz	•		
6	Did the organization inform all grantees, donors, and donor	-	-	
	only for charitable purposes and not for the benefit of the de		• • •	
	conferring impermissible private benefit?	• • • • • • • • • • •		Yes 📋 No
Par				
	Complete if the organization answered "Yes"	on Form 990, Part	IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	ation (check all that ap	oply).	
	Preservation of land for public use (for example, recreat	ion or education)	Preservation of a l	historically important land area
	Protection of natural habitat		Preservation of a	certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qua	lified conservation cor	ntribution in the form of a	a conservation
	easement on the last day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			
b	Total acreage restricted by conservation easements			
	Number of conservation easements on a certified historic s			
с с				
d	Number of conservation easements included on line 2c, ac			
	on a historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, i	released, extinguisned	i, or terminated by the o	rganization during the
	tax year			
4	Number of states where property subject to conservation e	_		
5	Does the organization have a written policy regarding the p	-		
	violations, and enforcement of the conservation easements	it holds?		Yes 🗌 No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations	, and enforcing conserva	ation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, har	dling of violations, and	d enforcing conservatior	n easements during the year
8	Does each conservation easement reported on line 2d abo	ve satisfy the requirer	nents of section 170(h)(4	4)(B)(i)
	and section 170(h)(4)(B)(ii)?			Yes 🗌 No
9	In Part XIII, describe how the organization reports conserva-	ation easements in its	revenue and expense s	tatement and balance
	sheet, and include, if applicable, the text of the footnote to the		•	
	organization's accounting for conservation easements	<u>.</u>		
Par		s of Art. Historic	al Treasures, or C	ther Similar Assets
	Complete if the organization answered "Yes"			
1a	If the organization elected, as permitted under FASB ASC			halance sheet works
iu	of art, historical treasures, or other similar assets held for p	•		
	•			
	service, provide in Part XIII the text of the footnote to its fin			
b	If the organization elected, as permitted under FASB ASC			
	art, historical treasures, or other similar assets held for pub	lic exhibition, educatio	n, or research in furthera	ance 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 t	reasures, or other sim	lar assets for financial g	ain, provide the
	following amounts required to be reported under FASB AS	C 958 relating to thes	e items:	
а	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X	<u></u>		\$

EEA

Schedu	le D (Form 990) 2023 CITIZENS FOR A	LORING PARK	COMMUNI	TY			41-1676	234		Page 2
Par	t III Organizations Maintaining	Collections of	of Art, His	torical T	reasures	, or Ot	her Similar As	sets (c	ontir	nued)
3	Using the organization's acquisition, accessi	on, and other reco	ords, check a	ny of the fo	ollowing that r	nake sig	gnificant use of its			
	collection items (check all that apply):									
а	Public exhibition		d	🗌 Loan o	r exchange p	rogram				
b	Scholarly research		е	Other						
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and exp	plain how they	/ further the	e organizatio	n's exen	npt purpose in Part			
	XIII.									
5	During the year, did the organization solicit of	r receive donation	ns of art, histo	orical treas	ures, or othei	similar				
	assets to be sold to raise funds rather than t							Ye	s	No
Par	t IV Escrow and Custodial Arra									_
	Complete if the organization	-	es" on Forr	n 990, P	art IV, line	9, or 1	reported an am	ount on	For	m
	990, Part X, line 21.			,	,	,	•			
1a	Is the organization an agent, trustee, custodi	an or other interm	ediarv for cor	tributions	or other asse	ts not				
	included on Form 990, Part X?		-					. 🗌 Ye	s	No
b	If "Yes," explain the arrangement in Part XII									
-			, iono innigitat				Am	ount		
с	Beginning balance					. 10				
d	Additions during the year									
e	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on F								e [	No
b	If "Yes," explain the arrangement in Part XII								-	
Par			e explanation	Tido Deen			• • • • • • • • •	••••	• _	
1 01	Complete if the organization	answered "Ve	e" on Forr	n 000 P	art IV line	10				
								(2) 5-11		h a sh
10	Paginning of year balance	(a) Current year	(0) Pri	or year	(c) Two years	5 Dack	(d) Three years back	(e) Fou	r years	раск
1a ⊾	Beginning of year balance							-		
b	Contributions									
С	Net investment earnings, gains, and									
								_		
d	Grants or scholarships							-		
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	ent year end bala	ance (line 1g,	column (a)	)) held as:					
а	Board designated or quasi-endowment	%								
b	Permanent endowment%									
C	Term endowment%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3a	Are there endowment funds not in the posse	ession of the orga	nization that a	are held ar	nd administere	ed for th	e			
	organization by:								Yes	No
	(i) Unrelated organizations?							. 3a(i)		
	(ii) Related organizations?							. 3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiz	ations listed as re	equired on Sc	hedule R?	••••			. 3b		
4	Describe in Part XIII the intended uses of th	e organization's e	endowment fu	nds.						
Par	t VI Land, Buildings, and Equip	oment								
_	Complete if the organization	answered "Ye	<u>es" o</u> n Forr	<u>n 9</u> 90, P	art IV, line	11a. S	<u>See F</u> orm 990,	Part X,	line	10.
	Description of property	(a) Cost or	other basis	(b) Cost o	r other basis	(c)	Accumulated	(d) Boo	ok value	9
		(inves	stment)	(	other)	d	lepreciation			
1a	Land									
b	Buildings									
c	Leasehold improvements									
d										
e	Other									
	Add lines 1a through 1e. (Column (d) must e	I	Part X line 1	)c. column	(B).					
EEA							I	edule D (F	orm 9	90) 2023

Schedule D (Form 990) 2023

Schedule D (For	,	ORING PARK	COMMUNITY		41-3	1676234	Page <b>3</b>
Part VII	Investments - Other Securities						
	Complete if the organization answered	I "Yes" on For	m 990, Part	t IV, line 1	1b. See Form	<u>990, Part X, I</u>	line 12.
	(a) Description of security or category		(b) Book va	alue	• •	hod of valuation:	
(1) Financial	(including name of security)				Cost or end-	-of-year market value	
(1) Financial (	derivatives						
(2) Closely-Ind (3) Other		• • • • • • •					
(A)							
(B)							
(C)							
(D)							
(E)							
(F)							
(G)							
(H)							
	n (b) must equal Form 990, Part X, line 12, col.(B)	)					
Part VIII	Investments - Program Related	, 	•				
	Complete if the organization answered	l "Yes" on For	m 990, Parl	t IV, line 1 <sup>-</sup>	1c. See Form	990, Part X, I	ine 13.
	(a) Description of investment		(b) Book va			hod of valuation:	
				aue	• •	-of-year market value	
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
	n (b) must equal Form 990, Part X, line 13, col. (B	))					
Part IX	Other Assets						
	Complete if the organization answered	I "Yes" on For	m 990, Parl	t IV, line 1	1d. See Form	990, Part X, I	line 15.
	(a) De	escription				(b) Book v	/alue
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9) Tatal (Calum	n (h) much a much Farma 000. Dant V, line 45 and (D)	1					
Part X	n (b) must equal Form 990, Part X, line 15 col. (B) Other Liabilities	)		• • • • • •	••••		
Fait A	Complete if the organization answered	l "Ves" on For		t IV/ line 1	10 or 11f Soo	Form 000 P	art X
	line 25.		in 550, i an	riv, inte i		10111 330, 1	an A,
1.		(b) Pooks	volue				
	(a) Description of liability ncome taxes	(b) Book	value	-			
(2)	ncome taxes			-			
(3)				-			
(4) (5)				-			
(6)							
(7)				-			
(7) (8)				-			
(9)				-			
	(b) must oqual Form 000, Part X, line 25 cal (P))						
	(b) must equal Form 990, Part X, line 25 col. (B)) uncertain tax positions. In Part XIII, provide the tex	t of the footnote t	o the organizat	ion's financia	l statements that	eports the	
-	liability for uncertain tax positions under FASB ASC		-				
	maxing for uncertain tax positions under FASE ASC		ש זו נווס נפגנ טו נ		as been provided	Schedule D (For	
EEA						Schedule D (FOI	330) 2023

Schedu	le D (Form 990) 2023 CITIZENS FOR A LORING PARK COMMUNITY	41-1676234	Page 4
Part			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	1.	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
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.)		
C	Add lines <b>4a</b> and <b>4b</b>		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		
Part			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities         2a		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines <b>2a</b> through <b>2d</b>		
3	Subtract line <b>2e</b> from line <b>1</b>	3	
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 4a		
b	Other (Describe in Part XIII.)		
C	Add lines <b>4a</b> and <b>4b</b>		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
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.

## SCHEDULE O (Form 990)

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. 2023 Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

### CITIZENS FOR A LORING PARK COMMUNITY

Employer identification number 41–1676234

## 01. Form 990 governing body review (Part VI, line 11)

The Executive Director and President review the form 990.

## 02. Conflict of interest policy compliance (Part VI, line 12c)

The board members are asked annually whether they have a conflict of interest and

Executive Committee monitors any conflicts and brings up conflicts if necessary.

## 03. CEO, executive director, top management comp (Part VI, line 15a)

Compensation was recommended by the Executive Committee and approved by the Board of

Directors

### 04. Governing documents, etc, available to public (Part VI, line 19)

The Organization makes its governing documents, conflict of interest policy, and financial

statements available to the public upon request.