efile	e Pu	ublic Visu	ual Render	ObjectId: 2	20241131934	9303656 - Su	Ibmissic	on: 2024-	05-10	Т	IN: 26-2291955	
Form	qc	20	Re	turn of O	rganizatio	n Exempt	From	Incom	e Tax		OMB No. 1545-0047	
Form					• 4947(a)(1) of t	-				tions)	2023	
					cial security numb					,		
		f the Treasury nue Service	G	o to <u>www.irs.g</u>	<u>ov/Form990</u> fo	r instructions a	nd the la	itest inforn	nation.		Open to Public Inspection	
A Fe	or th	ne 2023 ca	alendar year, o	or tax year beg	inning 01-01-2	023 , and endi	ing 12-3:	1-2023				
		applicable:	C Name of organi VETERAN TICK	zation ETS FOUNDATION					D Employ	yer identi	fication number	
_		change							26-229	91955		
		hange eturn	Doing business	as					-			
🔾 Fina	al retu	rn/terminated							F Telenho	ne numbei	r	
		ed return ion pending		reet (or P.O. box if i LADO PARKWAY	mail is not delivered	l to street address)	Room/sui	ite		(602) 421-6769		
			City or town, st TEMPE, AZ 85		untry, and ZIP or fo	reign postal code			-			
				address of princip	nal officer:						228,709,698	
			MICHAEL FOC/	ARETO 111					nis a group re	eturn for	🗌 Yes 🔽 No	
			1255 W RIO S TEMPE, AZ 85	ALADO PARKWA` 281	Y			H(b) Are	ordinates? all subordina	ites		
I Tax	k-exei	mpt status:	✓ 501(c)(3)	501(c) () (i		947(a)(1) or	527	-	uded?	lict Soo	instructions.	
1 W	ebsi	te: W/W	W.VETTIX.ORG	<u> </u>	lisert lio.) \bigcirc 4	947(a)(1) 01	527		up exemption			
5 11	CDSI											
K Forn	K Form of organization: 🗹 Corporation 🗋 Trust 🗋 Association 🗋 Other								M State	e of legal domicile: AZ		
Pa	art I	Sum	mary									
					or most significa					-		
e					HAT HAVE SERVE RGED VETERANS		STATES OF	- AMERICA.	WE SERVE IF		NITY OF ACTIVE	
anc												
em.												
Governance		Check thi		6 .1						1		
*		 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 							•	3	9	
Activities &	4							• • •	•	4	26	
IMI	6		number of volunteers (estimate if necessary)							6	6	
Ac		a Total unrelated business revenue from Part VIII, column (C), line 12									0	
					om Form 990-T, F					7a 7b	0	
								Р	rior Year		Current Year	
	8	Contribut	ions and grants	(Part VIII, line 1	h)				160,162,	200	213,050,157	
Revenue	9	Program s	service revenue	(Part VIII, line 2	g)				11,414,	023	15,659,541	
Seve	10	Investme	nt income (Part	VIII, column (A),	, lines 3, 4, and 7	7d)					0	
	11	Other rev	enue (Part VIII,	column (A), line	s 5, 6d, 8c, 9c, 1	0c, and 11e)					0	
	12	Total reve	enue—add lines	8 through 11 (m	ust equal Part VI	ll, column (A), lir	ne 12)		171,576,	223	228,709,698	
	13				column (A), line						0	
	14				column (A), line	-					0	
365			-		benefits (Part IX,		-		2,876,	148	4,305,862	
Exp enses			-		umn (A), line 11e	e)	•				0	
EXD			5 1 1	Part IX, _{column} (D)	, line 25) <u>907,801</u> s 11a–11d, 11f–2	240)			165,351,	542	223,757,288	
					gual Part IX, colur		•		163,331,		228,063,150	
					from line 12 .				3,348,		646,548	
es es							-	Beginnin	g of Current \		End of Year	
Net Assets or Fund Balances												
Ass Ba				16)			•		6,785,		7,445,214	
und	21		. ,	,	· · · ·		• •			673	35,605	
	J			ces. Subtract line	e 21 from line 20		•		6,763,	061	7,409,609	
Pa	rt II	Signa	ature Block									

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

							2024-05-08			
Sign Here		gnature of officer CHAEL FOCARETO 1	111 CEO				Date			
	Тур	pe or print name an								
Paic	d	Print/Type prep	oarer's name	Preparer's	s signature	Date 2024-05-10	Check if self-employed	PTIN P00044258		
Prep	parer	Firm's name	CREED & ROBIN	ISON PLLC		•	Firm's EIN 86	-0933902		
Use	Only	Firm's address	3660 E FARGO S	Т			Phone no. (48	0) 833-6088		
			MESA, AZ 8520	5						
					See Instructions.			. 🗹 Yes	s 🗌 No	-
For P	aperwor	k Reduction Ac	t Notice, see	the separate inst	tructions.	Cat. I	No. 11282Y		Form 99	0 (2023)
					Page 2					
Form	990 (2023	3)								Daga
		,	Program Ser	vice Accomplis	shments					Page 2
			-	-	any line in this Part III					
1		escribe the organ								
		TO THOSE INDIV			E UNITED STATES OF AN	IERICA. WE SER	VE THE COMM	INITY OF ACT	IVE DUTY	,
_				: 6 :						
2		-		ificant program sei	rvices during the year w	which were not lis	sted on		Yes 🗸	No
		describe these ne								
3	Did the o	organization ceas	e conducting, a	or make significant	changes in how it cond	ucts, any progra	m			
		?						. (🗌 Yes 🗹	No
4		describe these cl	-							
•	Section 5		1(c)(4) organiz	zations are required	ents for each of its three d to report the amount					
4a	(Code:) (Expenses \$	226,248,358	including grants of \$) (Revenue \$	228.70	9,698)	
	•	MILLON TICKETS	, , , ,		ETIRED AND HONORABLE DI		, ,		,,	
4b	(Code:	S WERE GRANTED.) (Expenses \$	95,891	including grants of \$	C) (Revenue \$		0)	
	45 WISHE	.5 WERE GRANTED.								
4c	(Code:) (Expenses \$		including grants of \$) (Revenue \$)	
4d	Other pro (Expense	ogram services (nedule O.) including grants of	f¢) (Revenue :	¢		`	
4e		ogram service		226,344,24) (Revenue :	4)	
									Form 99	0 (2023)
					— Page 3 — —					
Form	990 (2023	3)								Da 7
		Shecklist of Re	equired Sch	edules						Page 3
				-					Yes	No
1					(a)(1) (other than a priv		? If "Yes," con	nplete 1	Yes	
2	Schedule				dule of Contributors? Se			2		No
2	is the org	yanızatıon requir	eu lo complete	Scheulle B, Sche	une of contributors? Se	e instructions.		2	_	No

the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates ublic office? <i>If "Yes," complete Schedule C, Part I</i>	3 4 5 7 8 9 10 11a 11b	Yes	No No No No No No
tion in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	5 6 7 8 9 10 11a	Yes	No No No No
And the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right rovide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete edule D</i> , <i>Part I</i>	6 7 8 9 10 11a	Yes	No No No
rovide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete</i> <i>edule D</i> ,Part I	7 8 9 10 11a	Yes	No No No
environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> <i>plete Schedule D,</i> Part III the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian imounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation ices? <i>If "Yes," complete Schedule D, Part IV</i> the organization, directly or through a related organization, hold assets in temporarily restricted endowments, nanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> e organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, , as applicable. the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete edule D,</i> Part VI. the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total ts reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total ts reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total ts reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total	8 9 10 11a	Yes	No
plete Schedule D, Part III	9 10 11a	Yes	No
incounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation ices? If "Yes," complete Schedule D, Part IV the organization, directly or through a related organization, hold assets in temporarily restricted endowments, nanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V e organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, , as applicable. the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete edule D, Part VI. the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total ts reported in Part X, line 16? If "Yes," complete Schedule D, Part VII the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total ts reported in Part X, line 13 that is 5% or more of its	10 11a	Yes	
nanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> e organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, , as applicable. the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete</i> <i>edule D,</i> Part VI. the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total ts reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total ts reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its	11a	Yes	No
, as applicable. the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete</i> <i>edule D,</i> Part VI. the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total its reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its	11a	Yes	
edule D, Part VI. 🗐		Yes	
ts reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🗐	11b		
			No
	11c		No
the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported art X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🧐	11e		No
the organization's separate or consolidated financial statements for the tax year include a footnote that addresses organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 😼	11f		No
the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete edule D, Parts XI and XII 🗐	12a	Yes	L
the organization included in consolidated, independent audited financial statements for the tax year? es," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 📽	12b		No
e organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
the organization maintain an office, employees, or agents outside of the United States?	14a		No
the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, ness, investment, and program service activities outside the United States, or aggregate foreign investments valuec 100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any ign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, mn (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions.	17		No
the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, s 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," plete Schedule G, Part III	19		No
the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
	20b		
es" to line 20a, did the organization attach a copy of its audited financial statements to this return?			No
	he organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i> <i>dule D, Parts XI and XII</i>	he organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete dule D, Parts XI and XII the organization included in consolidated, independent audited financial statements for the tax year? es," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E the organization maintain an office, employees, or agents outside of the United States? the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, ess, investment, and program service activities outside the United States, or aggregate foreign investments valued 14b he organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any go organization? If "Yes," complete Schedule F, Parts II and IV he organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to r foreign individuals? If "Yes," complete Schedule F, Parts III and IV he organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to r foreign individuals? If "Yes," complete Schedule G, Part II and IV the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to r foreign individuals? If "Yes," complete Schedule G, Part II and IV the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to r foreign individuals? If "Yes," complete Schedule G, Part II and IV the organization report more than \$15,000 of expenses for professional fundraising services on Pa	he organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Yes dule D, Parts XI and XII

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 Page 4

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 Page 4

 Part IV
 Checklist of Required Schedules (continued)

 Yes
 No

22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III

No

22

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	Page 5			
		F	orm 99	0 (2023)
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . 1b 0			
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			\Box
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
	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		
	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔒 🕺	29	Yes	
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		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a		No
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
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):			
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? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance (ontinu	ied)	 	
2a Enter	the number of employees reported on Form W-3, Transmittal of Wage and				

10/21/24, 4:32 PM

10/21/2	Veteran Tickets Foundation - Full Filing- Nonprofit Explorer - ProPublica			
	lax Statements, filed for the calendar year ending with or within the year covered by this return 2a 26			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Did the organization have unrelated business gross income of $1,000$ or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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)? If "Yes," enter the name of the foreign country:	4a		No
Fa	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		N.
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
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		No
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		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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 9	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		
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	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in 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 excess parachute payment(s) during the year?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No
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? If "Yes," complete Form 6069.	17		
		F	orm 99	0 (2023)

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Form	990 (2023)			Page 6				
Par	TVI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "N lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI		onse to					
Se	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 1a 9							
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent 1b 9							
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		No				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		No				
6	Did the organization have members or stockholders?	6		No				
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		No				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	Yes					
b	b Each committee with authority to act on behalf of the governing body?							
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 in Schedule O	9		No				
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)					
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		No				
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	Yes					
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	Yes					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes					
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	Yes					
13	Did the organization have a written whistleblower policy?	13	Yes					
14	Did the organization have a written document retention and destruction policy?	14	Yes					
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		No				
b	Other officers or key employees of the organization	15b		No				
	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 taxable entity during the year?	16a		No				
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						
Se	ection C. Disclosure							

17 List the states with which a copy of this Form 990 is required to be filed

AL, AR, AZ, CA

Section 6104 requires an organization to make its Form 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. 18

Own website Another's website Vpon request Other (explain in Schedule O) Describe in 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. 19

(4) CYNTHIA CREED

TREASURER/SECRETARY

.....

(5) CHRIS BLINDHEIM

(6) DWAYNE SOMERS

(7) ROGER A GRAD

(8) TRAVIS LEACH

(9) JESSICA BERRY

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

20 State the name, address, and telephone number of the person who possesses the organization's books and records: THE COMPANY 1255 W RIO SALADO PARKWAY TEMPE, AZ 85281 (480) 833-6088

Form 990 (2023) Page 7 Form 990 (2023) Page 7 Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, Part VII and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. List all of the organization's current key employees, if any. See the instructions for definition of "key employee." List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations. List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (B) (F) (A) (D) (E) (C) Position (do not check more than Average Name and title Reportable Reportable Estimated one box, unless person is both an hours per compensation compensation amount of week (list officer and a director/trustee) from the from related other any hours compensation organization organizations q Individual Former for related (W-2/1099-(W-2/1099from the ę lighest director licel Institutional MISC/1099-MISC/1099organizations organization employee below dotted Trustee: NEC) NEC) and related line) organizations compensated đ labe 40.00 (1) MICHAEL A FOCARETO 111 Х х 288,354 Х Х 0 0 CEO/CFO 40.00 (2) EDWARD RAUSCH Х Х Х Х 296,000 0 0 CHAIRMAN & COO 40.00 (3) FLOYD HOGAN 111 Х Х Х Х 296,000 0 n DIRECTOR

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

	(A) Name and title	(B) Average hours per week (list		(C) on (do not cheo unless person i and a directo	s bo	oth a	n offic		(D) Reportable compensation from the organization (W-	(E) Reportable compensatio from relate	on d	(F Estima amount c compen	ated of other sation
		any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	2/1099- MISC/1099-NEC)	organizatior (W-2/1099 MISC/1099-N	-	from organizat relat organiza	ion and ed
							ted						
						_							
						-		-					
						-		_					
						╞							
	ub-Total				<u> </u>		<u> </u>						
	otal from continuation sheet otal (add lines 1b and 1c) .	ts to Part VII, So						-	897,194		0		0
2	Total number of individuals (in of reportable compensation fro			to those listed	abo	ve)	who re	eceiv	ved more than \$100	,000			
												Yes	No
	Did the organization list any fc line 1a? <i>If "Yes," complete Sch</i>				emp •	oloye •	e, or l •	high •	est compensated er	nployee on	3		No
4	For any individual listed on line	e 1a, is the sum	of repo	ortable compens	satio	on a	nd oth	er c	ompensation from t	he			<u> </u>

	organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such	
	individual	4
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for	

Section B. Independent Contractors

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

 (A)
 (B)
 (C)

Name and business address	Description of services	Compensation

Yes

No

T

• Tatal number of index		a a natura ata ya (in al	uding hut not limite	d to these listed she			and then \$100,000 at	-
2 Total number of independent of independent of the compensation from the compensation f	e orgai	nization	uding but not limited	a to those listed and	ove) who re	eceived n	fore than \$100,000 of	
								Form 990 (2023)
				Page 9				
Form 990 (2023)								Page 9
Part VIII Statemer	nt of I	Revenue						5
Check if Sc	hedule	O contains a res	ponse or note to any	y line in this Part VII	I			🗆
				(A) Total revenue		3) ed or	(C) Unrelated	(D) Revenue
				lotal revenue	exe	mpt	business	excluded from
					func reve	tion enue	revenue	tax under sections 512 - 514
Federated campaigns		1a			•		•	
Contribution 65, 384								
and Membership dues	•	1b						
DtherAmt Similar								
Arfiolinesdraising events .	•	1c						
d Related organizations		1d						
e Government grants (cont	ribution	s) 1e						
 f All other contributions, gi and similar amounts not i above 								
212,983,773 g Noncash contributions inc	cluded ir	n						
lines 1a - 1f:\$		1g						
210,675,503 h Total. Add lines 1a-1f								
			• 213,050,157 Business Code		1		1	
2a DELIVERY OF TICKET	S			15,659,541			0	0
			000001					
enue,								
Program Service Re								
ervi								
s -								
gran								
Pro								
f All other program	service	e revenue.						
9 Total. Add lines 2	2a-2f.		15,659,541					
3 Investment income	(inclue	ding dividends, in	terest, and other					
similar amounts) .								
4 Income from invest		-	nd proceeds					
5 Royalties	·		(") Demonst					
6a Gross rents	6a	(i) Real	(ii) Personal					
b Less: rental	6b							
expenses								
c Rental income or (loss)	6c							
d Net rental income	e or (lo	ss)	· · ·					
		(i) Securities	(ii) Other					
7a Gross amount from sales of assets other than	7a							

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inventory						
b Less: cost or other basis and sales expenses	7Ь					
	7c					
d Net gain or (loss)						
(not including \$ contributions reported See Part IV, line 18 b Less: direct expen	of d on line 1c). ses 8b	,				
See Part IV, line 19 b Less: direct expen	9a Ises 9b	,				
returns and allowa	ances 10a	_	-			
c Net income or (los	s) from sales of inver	itory				
11a		Business Code				
b						
er f evenueMiscAmt						
d All other revenue						
e Total. Add lines 1	1a-11d					
12 Total revenue. S	ee instructions		228,709,698	15,659,541	0	0
	inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) a Gross income from fu- (not including \$ contributions reporter See Part IV, line 18 b Less: direct expen- c Net income or (loss) a Gross sales of inve- returns and alloward b Less: cost of good c Net income or (loss) 11a b erfevenueMiscAmt d All other revenue e Total. Add lines 1	inventory b Less: cost or other basis and sales expenses c Gain or (loss) 7c d Net gain or (loss) 7c a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 6 b Less: direct expenses 7 b Less: cost of goods sold 7 c Net income or (loss) from sales of inventor 11a b	inventory 7b b Less: cost or other basis and sales expenses 7c c Gain or (loss) 7c d Net gain or (loss) 7c a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 9a b Less: direct expenses 8b c Net income or (loss) from fundraising events 9a b Less: direct expenses 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities 9a b Less: cost of goods sold 10a b Less: cost of goods sold 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory 8usiness Code 11a Business Code b	inventory b Less: cost or other basis and sales expenses c Gain or (loss) 7c d Net gain or (loss) a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	inventory 7b b Less: cost or other basis and sales expenses 7c c Gain or (loss) 7c d Net gain or (loss) 7c d Net gain or (loss) 7c a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a b Less: direct expenses 8b c Net income or (loss) from fundraising events 9a c Net income or (loss) from fundraising events 9a c Net income or (loss) from gaming activities. See Part IV, line 19 9a s Gross income from gaming activities. See Part IV, line 19 9a c Net income or (loss) from gaming activities 9a c Net income or (loss) from gaming activities . a Gross sales of inventory, less returns and allowances . t lob . . b Less: cost of goods sold . . b Less: cost of goo	inventory b Less: cost or office a Response c Gain or (loss) 7c d Net gain or (loss) 7c a Gross income from fundraising events (not including \$ contributions reported on line 10). See Part IV, line 18 Ba Ba <

Form **990** (2023)

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Form 990 (2023) Part IX Sta

Page **10**

Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must c	complete all columns.	All other organization	ons must complete co	olumn (A).
Check if Schedule O contains a response or note to ar	ny line in this Part IX			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
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	880,354	428,400	451,355	599
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	2,608,944	2,608,944	0	0
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	816,564	703,364	113,061	139
9 Other employee benefits				
10 Payroll taxes				

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Veteran Tickets Foundation - Full Filing- Nonprofit Explorer - ProPublica

11 Fees for services (non-employees):				
a Management	246,546	246,546	0	0
b Legal				
c Accounting				
d Lobbying				
e 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)				
12 Advertising and promotion				
13 Office expenses	122,962	61,481	61,481	0
14 Information technology				
15 Royalties				
16 Occupancy	264,008	198,006	66,002	0
17 Travel				
 Payments of travel or entertainment expenses for any federal, state, or local public officials 				
19 Conferences, conventions, and meetings	188,076	185,676	2,400	0
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	56,295	0	56,295	0
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
a TICKETS	221,562,255	221,562,255	0	0
b OFFICE EXPENSE	142,034	142,034	0	0
c PROMOTIONS	907,063	0	0	907,063
d SOFTWARE	117,855	117,855	0	0
e All other expenses	150,194	89,688	60,506	0
25 Total functional expenses. Add lines 1 through 24e	228,063,150	226,344,249	811,100	907,801
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				
\Box if following SOP 98-2 (ASC 958-720).				

Form 990 (2023)

Page 11

Form 990 (2023) Page **11** Part X **Balance Sheet** \square Check if Schedule O contains a response or note to any line in this Part IX $\$. (B) End of year (A) Beginning of year 6,661,149 7,376,924 1 Cash-non-interest-bearing . 1 . . 2 2 Savings and temporary cash investments . . . 3 Pledges and grants receivable, net . 3 . Accounts receivable, net 4 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under 6 section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . 6 7 7 Notes and loans receivable, net . Assets 8 Inventories for sale or use . 8 . 65 65 9 Prepaid expenses and deferred charges . 9 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 590,010 10a

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	b	Less: accumulated depreciation	10b	531,785	114,520	10c	58,225
	11	Investments—publicly traded securities .				11	
	12	Investments-other securities. See Part IV, li	ne 11			12	
	13	Investments—program-related. See Part IV,	line 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			10,000	15	10,000
	16	Total assets. Add lines 1 through 15 (must	equal line 33) .		6,785,734	16	7,445,214
	17	Accounts payable and accrued expenses .			22,673	17	35,605
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
s	21	Escrow or custodial account liability. Complet	e Part IV of Scheo	lule D		21	
Liabilities	22	Loans and other payables to any current or f employee, creator or founder, substantial cor or family member of any of these persons	ntributor, or 35% (controlled entity		22	
1	23	Secured mortgages and notes payable to un	related third partie	es		23	
	24	Unsecured notes and loans payable to unrela	ted third parties			24	
	25	Other liabilities (including federal income tax and other liabilities not included on lines 17 - Complete Part X of Schedule D		ed third parties,		25	
	26	Total liabilities. Add lines 17 through 25 .			22,673	26	35,605
Assets or Fund Balances	27	Organizations that follow FASB ASC 958 lines 27, 28, 32, and 33. Net assets without donor restrictions	, check here	and complete	6,763,061	27	7,409,609
d Ba	28	Net assets with donor restrictions				28	
Fund		Organizations that do not follow FASB A complete lines 29 through 33.	SC 958, check h	ere 🕨 🗌 and			
10	29	Capital stock or trust principal, or current fur	nds	•		29	
ets	30	Paid-in or capital surplus, or land, building or	r equipment fund			30	
SS	31	Retained earnings, endowment, accumulated	l income, or other	funds		31	
	32	Total net assets or fund balances		[6,763,061	32	7,409,609
Net	33	Total liabilities and net assets/fund balances			6,785,734	33	7,445,214
							Form 990 (2023)

Form **990** (2023)

------ Page 12 ----

Form	990 (2023)				Page 12
Pa	Reconcilliation 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		228	,709,698
2	Total expenses (must equal Part IX, column (A), line 25)	2		228	,063,150
3	Revenue less expenses. Subtract line 2 from line 1	3			646,548
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) .	4		6	,763,061
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10		7	,409,609
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		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed of separate basis, consolidated basis, or both:	on a			

10/21/2	1/24, 4:32 PM Veteran Tickets Foundation	- Full Filing- Nonprofit Explorer - ProPublica		
	□ Separate basis □ Consolidated basis □ Both consolid	dated and separate basis		
b	b Were the organization's financial statements audited by an independent acc	countant? 2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the consolidated basis, or both:	he year were audited on a separate basis,		
	□ Separate basis □ Consolidated basis □ Both consolid	dated and separate basis		
с	c If "Yes," to line 2a or 2b, does the organization have a committee that assu of the audit, review, or compilation of its financial statements and selection		Yes	
	If the organization changed either its oversight process or selection process	during the tax year, explain in Schedule O.		
3a	Ba As a result of a federal award, was the organization required to undergo an Guidance, 2 C.F.R. Part 200, Subpart F?	audit or audits as set forth in the Uniform 3a		No
b	b If "Yes," did the organization undergo the required audit or audits? If the or audit or audits, explain why in Schedule O and describe any steps taken to	5 5 1		
			Form 990) (2023)

Form 990 (2023)

Additional Data

Return to Form

Software ID: 23017509 Software Version:

Form 990, Special Condition Description:

Special Condition Description

HEDULEA migration Public Charity Status and Public Support 2023 predict of the transming Complete if the organization is a section 501(c)(3) organization or a section 3947(a)(1) nonecompt charitable trust. 2023 prediction Employer information 2023 prediction A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A church, convention of churches, or association of churches described in section 170(b)(1)(A)(iii). A school described in section 170(b)(1)(A)(iii). Enter the hospital's mame, cdv, and state. A norganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iii). Complete Part II.) A dedraf, state, or local government or governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A norganization that normally resives a substation 11 for b)(1)(A)(iv). (Complete Part II.) A norganization operated in section 170(b)(1)(A)(iv). (Complete Part II.) A norganization operated activations. First the name, ctr, and state of the college or university: A norganization operated activatively to the handit of its support form contributions, membartship fees, and grass resigns from activatio	efil	e Pul	blic Visual	Render	ObjectId: 2	20241131934930	3656 - Submi	ssion: 2024-	05-10	TIN: 26-2291955 OMB No. 1545-0047	
<form> Market Diversion 1</form>	_	CHEDULE A Public Charity Status and Public Support						OMB NO: 1343-0047			
Newsers Store ▶ Go to <i>unwelles gau/Fermanded</i> for instructions and the latest information. Open to Public Response of the organization of the roganization of the organization smust complete this part.) See instructions. Image: Store of the Public Charity Status (All organizations must complete this part.) See instructions. Image: Store of the Store of Store			4947(a)(1) nonexempt charitable trust.					a section	2023		
e of the organization Employer identification number 26-2391955 rt1 Reason for Public Charity Status (All organizations must complete this part.) See 26-2391955 rt1 Reason for Public Charity Status (All organizations must complete this part.) See 26-2391955 rt1 Reason for Public Charity Status (All organizations must complete this part.) See 26-2391955 rt1 Reason for Public Charity Status (All organizations described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). A school described in section 170(b)(1)(A)(iii). A school described in section 170(b)(1)(A)(iii). A medical reaserth organization described in section 170(b)(1)(A)(iii). A medical reaserth organization operated in conjunction with a hospital described in section 170(b)(1)(A)(V). A fielded late: 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)(V). A fielded late: An organization the formally receives a substantial part of its support from a governmental unit of from the general public described in section 170(b)(1)(A)(V). An arguinzation that normally receives a substantial part of its support from a governmental unit organization described in section 170(b)(1)(A)(V). An arguinzation described in section 170(b)(1)(A)(V). (Complete Part II.) An arguinzation described in section 170(b)(1)(A)(V). (Complete Part II.) An organization receives a substantial described for the support for on collibulics. Same scelpts investment mome and urreleted business kaable income (tess section 509(a)(2). C see section 509(a)(2). C motion for many versive (2) more than 32.0x ⁶ by eastporting organization afcoribution. more public supported organization described in section 509(a)(2). See section 50				►	Go to <u>www.irs</u>				ormation.		
	Name of the organization Employer identification number										
rgenization is not a private foundation because it is: (for lines 1 through 12, check only one box.)											
A church, convention of churches, or association of churches described in section 170(b)(1)(A)(I). A school described in section 170(b)(1)(A)(III). (Attach Schedule E (from 990).) A neglical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(III). Enter the hospital's image, GYL and state: A neglical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(III). Enter the hospital's image, GYL and state: A neglical research organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(V). A neglical research organization described in section 170(b)(1)(A)(V). A neglicalization that normally receives: a substantial pat of its support from a governmental unit of for the general public described in section 170(b)(1)(A)(V). (Complete Part II.) A neglicalization section 170(b)(1)(A)(V). (Complete Part II.) A neglication that normally receives: a substate interme (less section 5112 soft) the support from grass investigner increase and processible increase (less section 512 soft) form businesses activated by the support form grass investigner increase and processible increase (less section 512 soft) form businesses activated by the support for grass investigner increase and poperated exclusively for the beseff of to perform the functions of us to corry out the gurposes of one or on intermediate section 12 soft) for the section 12 soft) for the support organization organization and operated exclusively for the beseff of to perform the functions of using the support organization organization and operated exclusively for the beseff of to perform the functions of us			Reason ation is not	for Public a private four	Charity Stat ndation because	us (All organization e it is: (For lines 1 thro	s must comple ough 12, check of	<u>te this part.) S</u> nlv one box.)	See instructions.		
A hospital or a cooperative hospital service arganization described in section 170(b)(1)(A)(iii). Enter the hospital same, dxy, and state: Am encloal research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital section 170(b)(1)(A)(iii). Camplete Part II.) An arganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). An arganization that normally receives a substantial part of its support from a governmental unit described in section 170(b)(1)(A)(v). An arganization 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)(v). Complete Part II.) A community trust described in section 170(b)(1)(A)(vi): portential in conjunction with a land-grant college or university or a non-hand grant college of agriculture. See instructions. Enter the name, city, and state of the college or university or a non-hand grant college of agriculture. See instructions - subject to certain exceptions, and (2) no more than 33: y/M of fis support from grass sequeined by the organization described in section 509(a)(3). An organization organized and operated exclusively to the benefit of to perform the functions of, or to carry on the purposes of one or more publicly supported organization described in section 509(a)(3). Cleack the base organization agriculture betweet or supporting organization advected be activatively to the supported organization dynamization section and the proceed as amploty of the directors or truttees or the supporting organization. Supporting organization wested in the same persons that control or manage the support of organization (2). For which a support of organization section advected exclusively to act on operated in connection with its supported organization(s). For a management of the supporting organization section advected exclusively to act onero th	1			•			-		(A)(i).		
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name, city, and state:	3		A hospital	or a cooperat	ive hospital ser	vice organization desc	ribed in section	170(b)(1)(A)(iii).		
In 20(6)(1)(A)(i): (Complete Part II.) A deteral, state, or local government a governmental unit described in section 170(b)(1)(A)(v). A norganization 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)(v). (Complete Part II.) A norganization that normally receives: (1) more than 33/3% 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 /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 /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 /3% of its support from contributions, membership fees, and gross receipts 30(3). 1575: the section 509(a)(2), (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(2). Section 509(a)(2), (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(2). See section 509(a)(2). Section 509(a)(2), (Complete Part III) An organization organized and operated exclusively to test for public supports organization file the supports organization described in section 509(a)(1) or section 509(a)(2). See secti	4				anization operat	ed in conjunction with	a hospital descri	ibed in section :	L70(b)(1)(A)(iii).	Enter the hospital's	
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Paperwork Reduction Act Notice, see the Instructions for n 990 or 990-EZ. Cat. No. 11285F Schedule A (Form 990) 2023 Page 2 Page 2 Page 2 dule A (Form 990) 2023 Page 2 Page 2 Int II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.) ection A. Public Support Image 2					1					<u> </u>	
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Page 2 dule A (Form 990) 2023 Page 2 Page 2 Page 2 Int II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.) ection A. Public Support	or F	Paper		tion Act No	tice, see the I	nstructions for	Cat. No. 11285	5F	Schedul	e A (Form 990) 2023	
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10/21		ven	eran Tickets Founda	ion runring ru	onprofit Explorer - P	loi ublica	
(01	r 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 grant.").	122,256,089	19,761,175	64,741,122	160,162,200	213,050,157	579,970,743
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to						0
4	the organization without charge Total. Add lines 1 through 3	122,256,089	19,761,175	64,741,122	160,162,200	213,050,157	579,970,743
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)						0
_	Public support. Subtract line 5 from line 4.						579,970,743
	ection B. Total Support						
	lendar year r fiscal year beginning in) 🕨	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4.	122,256,089	19,761,175	64,741,122	160,162,200	213,050,157	579,970,743
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0
11	Total support. Add lines 7 through 10						579,970,743
12						12	
13	First 5 years. If the Form 990 is for	-			-		ization, check
	this box and stop here					▶∪	
14	Public support percentage for 2023 (-	column (f))		14	100.000 %
14	Public support percentage for 2022 S					15	100.000 %
	33 1/3% support test—2023. If the					-	
b	and stop here. The organization qua 33 1/3% support test—2022. If th						
17a	box and stop here . The organizatio 10%-facts-and-circumstances tee and if the organization meets the "fac	st-2023. If the or	rganization did not	check a box on li	ne 13, 16a, or 16b	, and line 14 is 10	% or more,
b	meets the "facts-and-circumstances" 10%-facts-and-circumstances te	est—2022. If the o	organization did no	ot check a box on	line 13, 16a, 16b,	or 17a, and line 15	is 10% or
	more, and if the organization meets meets the "facts-and-circumstances						he organization
18	Deliverte ferrer detiene If the energy inst						► 🗆
	Private foundation. If the organizations	tion did not check	a box on line 13, 1	.6a, 16b, 17a, or 1	17b, check this bo	<pre>< and see</pre>	► 🗆
		tion did not check	a box on line 13, 1	.6a, 16b, 17a, or : 	17b, check this bo	<pre>< and see</pre>	
		tion did not check	a box on line 13, 1	.6a, 16b, 17a, or : 	17b, check this bo	<pre>< and see</pre>	► 🗆
Sch		tion did not check	a box on line 13, 1	.6a, 16b, 17a, or : 	17b, check this bo	<pre>< and see</pre>	► 🗆
	instructions	tion did not check	a box on line 13, 1	.6a, 16b, 17a, or :	17b, check this bo:	<pre>< and see</pre>	▶□ Form 990) 2023
1	edule A (Form 990) 2023 Part III Support Schedule (Complete only if you the organization fails	tion did not check	a box on line 13, 1 Page 3 Page 3 ons Described ox on line 10 of	in Section 509 Part I or if the o	17b, check this bo: 	A and see Schedule A (I d to qualify und	▶ □ Form 990) 2023 Page 3
S	edule A (Form 990) 2023 Part III Support Schedule (Complete only if you the organization fails Election A. Public Support	tion did not check	a box on line 13, 1 Page 3 Page 3 ons Described ox on line 10 of	in Section 509 Part I or if the o	17b, check this bo: 	A and see Schedule A (I d to qualify und	▶ □ Form 990) 2023 Page 3
S	edule A (Form 990) 2023 Part III Support Schedule → (Complete only if you the organization fails Section A. Public Support lendar year r fiscal year beginning in) ►	tion did not check	a box on line 13, 1 Page 3 Page 3 ons Described ox on line 10 of	in Section 509 Part I or if the o	17b, check this bo: 	A and see Schedule A (I d to qualify und	▶ □ Form 990) 2023 Page 3
S	edule A (Form 990) 2023 Part III Support Schedule (Complete only if you the organization fails Section A. Public Support lendar year r fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received. (Do not	tion did not check . 	a box on line 13, 1 Page 3 Page 3 Pors Described ox on line 10 of r the tests listed	in Section 509 Part I or if the o	17b, check this bo: 	<pre>c and see <u> </u></pre>	► □ Form 990) 2023 Page 3 er Part II. If
S Ca (or	edule A (Form 990) 2023 Part III Support Schedule (Complete only if you the organization fails Section A. Public Support lendar year r fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants."). Gross receipts from admissions, merchandise sold or services	tion did not check . 	a box on line 13, 1 Page 3 Page 3 Pors Described ox on line 10 of r the tests listed	in Section 509 Part I or if the o	17b, check this bo: 	<pre>c and see <u> </u></pre>	► □ Form 990) 2023 Page 3 er Part II. If
S Ca (or 1	edule A (Form 990) 2023 Part III Support Schedule and (Complete only if you the organization fails Section A. Public Support lendar year r fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants."). Gross receipts from admissions,	for Organizatic u checked the bo to qualify unde	a box on line 13, 1 Page 3 Page 3 Pors Described ox on line 10 of r the tests listed	in Section 509 Part I or if the o	17b, check this bo: 	<pre>c and see <u> </u></pre>	► □ Form 990) 2023 Page 3 er Part II. If

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	not an unrelated trade or business under section 513		1	1	1				
4	Tax revenues levied for the		1	1	1				
•	organization's benefit and either paid								
F	to or expended on its behalf The value of services or facilities								
5	furnished by a governmental unit to								
	the organization without charge		ļ						
6	Total. Add lines 1 through 5								
7a	Amounts included on lines 1, 2, and 3 received from disgualified 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								0
50	from line 6.) ection B. Total Support								
-	endar year				1				
	fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) 1	Total	
9	Amounts from line 6								
10a	Gross income from interest,								
	dividends, payments received on securities loans, rents, royalties and								
	income from similar sources.								
b	Unrelated business taxable income								
	(less section 511 taxes) from								
	businesses acquired after June 30, 1975.								
с	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.) .								
13	Total support. (Add lines 9, 10c,								
	11, and 12.).								
14	First 5 years. If the Form 990 is for t	-			-				_
	this box and stop here								► L J
	ection C. Computation of Public	Support Perce	entage						
15	ection C. Computation of Public Public support percentage for 2023 (lin	Support Perce ne 8, column (f) d	entage livided by line 13,	column (f))		15			0 %
15 16	ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 S	Support Perce ne 8, column (f) d Schedule A, Part I	Ivided by line 13 , II, line 15	column (f))					
15 16 Se	ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 section D. Computation of Invest	Support Perce ne 8, column (f) d Schedule A, Part I ment Income	ivided by line 13, II, line 15 Percentage	column (f))		15 16			0 %
15 16 Se	ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 S ection D. Computation of Invest Investment income percentage for 20	Support Perce ne 8, column (f) d Schedule A, Part I ment Income 23 (line 10c, colu	ivided by line 13, II, line 15 Percentage mn (f) divided by	column (f))	 	15 16 17			
15 16 <u>Se</u> 17 18	ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 S ection D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2	Support Percenne 8, column (f) d Schedule A, Part I Iment Income 23 (line 10c, colu 22 Schedule A,	ivided by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17 .	column (f))	f))	15 16 17 18			0 %
15 16 <u>Se</u> 17 18	ection C. Computation of PublicPublic support percentage for 2023 (linPublic support percentage from 2022 Section D. Computation of InvestInvestment income percentage for 20Investment income percentage from 233 1/3% support tests-2023. If the	Support Percenter ne 8, column (f) d Schedule A, Part I ment Income 23 (line 10c, colu 22 Schedule A, organization did r	entage livided by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box	column (f))	f))	15 16 17 18 an 33 1/3%, and lin	ne 17 is	s not	0 %
15 16 56 17 18 19a	 Ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 Section D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests-2023. If the more than 33 1/3%, check this box and 	Support Percent ne 8, column (f) d Schedule A, Part I Comment Income 23 (line 10c, colu 2022 Schedule A, organization did r d stop here. The	entage livided by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box organization qual	column (f))	f))	15 16 17 18 an 33 1/3%, and lin ization	ne 17 is	s not	0 %
15 16 56 17 18 19a	ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 S ection D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests-2023. If the more than 33 1/3%, check this box and 33 1/3% support tests-2022. If the	Support Percent ne 8, column (f) d Schedule A, Part I ment Income 23 (line 10c, colu 2022 Schedule A, organization did r d stop here. The e organization did	Invided by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box organization qual not check a box	column (f)) 	f))	15 16 17 18 an 33 1/3%, and lin ization is more than 33 1/	ne 17 is 	s not	0 %
15 16 Se 17 18 19a b	ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 S ection D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests-2023. If the more than 33 1/3%, check this box and 33 1/3% support tests-2022. If the not more than 33 1/3%, check this box	Support Percent ne 8, column (f) d Schedule A, Part I ment Income 23 (line 10c, colu 2022 Schedule A, organization did r d stop here. The e organization did a and stop here.	Ivided by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box organization qual not check a box The organization	column (f))	f))	15 16 17 18 an 33 1/3%, and lin ization is more than 33 1/ rganization	ne 17 is 3% and	s not	0 %
15 16 56 17 18 19a	ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 S ection D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests-2023. If the more than 33 1/3%, check this box and 33 1/3% support tests-2022. If the	Support Percent ne 8, column (f) d Schedule A, Part I ment Income 23 (line 10c, colu 2022 Schedule A, organization did r d stop here. The e organization did a and stop here.	Ivided by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box organization qual not check a box The organization	column (f))	f))	15 16 17 18 an 33 1/3%, and lin iization is more than 33 1/ rganization ee instructions	ne 17 is 	s not C d line 1 C	0 %
15 16 Se 17 18 19a b	ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 S ection D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests-2023. If the more than 33 1/3%, check this box and 33 1/3% support tests-2022. If the not more than 33 1/3%, check this box	Support Percent ne 8, column (f) d Schedule A, Part I ment Income 23 (line 10c, colu 2022 Schedule A, organization did r d stop here. The e organization did a and stop here.	Ivided by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box organization qual not check a box The organization	column (f))	f))	15 16 17 18 an 33 1/3%, and lin ization is more than 33 1/ rganization	ne 17 is 	s not C d line 1 C	0 %
15 16 Se 17 18 19a b	ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 S ection D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests-2023. If the more than 33 1/3%, check this box and 33 1/3% support tests-2022. If the not more than 33 1/3%, check this box	Support Percent ne 8, column (f) d Schedule A, Part I ment Income 23 (line 10c, colu 2022 Schedule A, organization did r d stop here. The e organization did a and stop here.	Ivided by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box organization qual not check a box The organization	column (f))	f))	15 16 17 18 an 33 1/3%, and lin iization is more than 33 1/ rganization ee instructions	ne 17 is 	s not C d line 1 C	0 %
15 16 Se 17 18 19a b	ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 S ection D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests-2023. If the more than 33 1/3%, check this box and 33 1/3% support tests-2022. If the not more than 33 1/3%, check this box	Support Percent ne 8, column (f) d Schedule A, Part I ment Income 23 (line 10c, colu 2022 Schedule A, organization did r d stop here. The e organization did a and stop here.	Ivided by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box organization qual not check a box The organization	column (f))	f))	15 16 17 18 an 33 1/3%, and lin iization is more than 33 1/ rganization ee instructions	ne 17 is 	s not C d line 1 C	0 %
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15 16 5 17 18 19a b 20	ection C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 S ection D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests-2023. If the more than 33 1/3%, check this box and 33 1/3% support tests—2022. If the not more than 33 1/3%, check this box Private foundation. If the organizati	Support Percent ne 8, column (f) d Schedule A, Part I ment Income 23 (line 10c, colu 2022 Schedule A, organization did r d stop here. The e organization did a and stop here.	entage livided by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box organization qual not check a box The organization a box on line 14,	column (f))	f))	15 16 17 18 an 33 1/3%, and lin iization is more than 33 1/ rganization ee instructions	ne 17 is 	s not d line 1 990) 2	0 % 0 %
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15 16 5 17 18 19a b 20	ction C. Computation of Public Public support percentage for 2023 (lin Public support percentage from 2022 S ction D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests-2023. If the more than 33 1/3%, check this box and 33 1/3% support tests-2022. If the not more than 33 1/3%, check this box Private foundation. If the organizati	Support Percent ne 8, column (f) d Schedule A, Part I ment Income 23 (line 10c, colu 23 (line 10c, colu 23 Schedule A, organization did r d stop here. The e organization did a and stop here. The on did not check a son did not check a	entage livided by line 13, II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box organization qual not check a box The organization a box on line 14, Page 4 of Part I. If you ch	column (f))	f))	15 16 17 18 an 33 1/3%, and lin nization is more than 33 1/ rganization e instructions Schedule A (ne 17 is 	s not d line 1 990) 2 Pa	0 % 0 %
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the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the

	determination.				
		3b			
с	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.				
b	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.	4b			
с	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2)? If "Yes," explain in 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.	4c			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in 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).	5a			
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?	5b			
с	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c			
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>				
		6			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section $4958(c)(3)(C)$), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7			
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes,"	/			
0	complete Part I of Schedule L (Form 990).	8			
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .				
	Did and an entry life damage (as defined as line 0-) hold a controlline interest in some stille in which the sum at inc	9a			
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b			
с	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets				
	in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c			
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.	-			
		10a			
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to det					
	the organization had excess business holdings).				

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Sche	dule A (Form 990) 2023		F	age 5
Pai	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?			
b	A family member of a person described on 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part VI .	11c		
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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? <i>If "Yes," explain in Part VI how providing such benefit</i>			
	carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		

			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).	1		

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?					
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? <i>If "No," explain in Part VI how the</i>					
	organization maintained a close and continuous working relationship with the supported organization(s).					
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.					

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

			res	NO
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	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? <i>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</i>			
	organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No", provide details in Part VI .	3а		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its			
	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.			
		1.5		2022

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Vee Ne

Ра	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		

-	· · · · · · · · · · · · · · · · · · ·	<u> </u>	-	
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 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 organization's first as a non-functionally-i instructions) 	integrat	ed Type III supporting or	ganization (see

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F	Part V Type III Non-Functionally Integrated	I 509(a)(3) Supporting	Organizations (con	ntinued	.)
S	ection D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish	1			
2	Amounts paid to perform activity that directly furthers e excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt pur	poses of supported organization	ons	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval require	d - provide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructio	ns		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	 Distributions to attentive supported organizations to wh details in Part VI). See instructions 	ich the organization is respon	sive (<i>provide</i>	8	
9	Distributable amount for 2023 from Section C, line 6			9	
1	0 Line 8 amount divided by Line 9 amount			10	
			(ii)		(iii)
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributio Pre-2023	ns	Distributable Amount for 2023
1			Underdistributio	ns	Distributable
	(see instructions)		Underdistributio	ns	Distributable
2	(see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>explain in Part VI</i>). See instructions. Excess distributions carryover, if any, to 2023:		Underdistributio	ns	Distributable
2	(see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>explain in Part VI</i>). See instructions. Excess distributions carryover, if any, to 2023: From 2018.		Underdistributio	ns	Distributable
2 3 i	(see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>explain in Part VI</i>). See instructions. Excess distributions carryover, if any, to 2023: From 2018. From 2019.		Underdistributio	ns	Distributable
2 3 1	(see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>explain in Part VI</i>). See instructions. Excess distributions carryover, if any, to 2023: From 2018. From 2019. From 2019. From 2020.		Underdistributio	ns	Distributable
2 3 1 0	(see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>explain in Part VI</i>). See instructions. Excess distributions carryover, if any, to 2023: a From 2018 b From 2019 c From 2020 d From 2021		Underdistributio	ns	Distributable
2	(see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>explain in Part VI</i>). See instructions. Excess distributions carryover, if any, to 2023: a From 2018 b From 2019 c From 2020 a From 2021 b From 2022		Underdistributio	ns	Distributable
2 3 3 0 0 0 1	(see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>explain in Part VI</i>). See instructions. Excess distributions carryover, if any, to 2023: a From 2018 b From 2019 c From 2020 d From 2021 f Total of lines 3a through e		Underdistributio	ns	Distributable
2 3 3 0 0 0 1	(see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>explain in Part VI</i>). See instructions. Excess distributions carryover, if any, to 2023: a From 2018 b From 2019 c From 2020 d From 2021 f Total of lines 3a through e g Applied to underdistributions of prior years		Underdistributio	ns	Distributable
2 3 3 0 0 1	(see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>explain in Part VI</i>). See instructions. Excess distributions carryover, if any, to 2023: a From 2018		Underdistributio	ns	Distributable
2 3 3 0 0 1	(see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>explain in Part VI</i>). See instructions. Excess distributions carryover, if any, to 2023: a From 2018 b From 2019 c From 2020 d From 2021 f Total of lines 3a through e g Applied to underdistributions of prior years		Underdistributio	ns	Distributable
2 3 3 1 0 0 1 1 1 1 1 1	(see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>explain in Part VI</i>). See instructions. Excess distributions carryover, if any, to 2023: a From 2018 b From 2019 c From 2020 d From 2021 e From 2022 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2023 distributable amount Carryover from 2018 not applied (see		Underdistributio	ns	Distributable

Р		
a Applied to underdistributions of prior years		
b Applied to 2023 distributable amount		
c 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. If the amount is greater than zero, <i>explain in Part VI</i>. See instructions. 		
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.		
7 Excess distributions carryover to 2024. Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2019		
b Excess from 2020		
c Excess from 2021		
d Excess from 2022		
e Excess from 2023		
	Sch	nedule A (Form 990) (2023)

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

Facts And Circumstances Test

Explanation

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Additional Data

Return to Form

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Complete if the org				ntal Financial Stateme	1115		2022
				ganization answered "Yes," on Fe	ZUZZ		
Denar	tment of the Treasury			10, 11a, 11b, 11c, 11d, 11e, 11f, Attach to Form 990.	Open to Public		
	al Revenue Service	► G		1990 for instructions and the late	st informa	tion.	Inspection
	me of the organ TERAN TICKETS FOUN				E	mployer iden	ification number
VEI	ERAN TICKETS FOUN	NDATION			26	5-2291955	
Pa	rt I Organi	zations Mai	ntaining Donor Advi	sed Funds or Other Similar F	unds or A	ccounts.	
	Complet	te if the orga	anization answered "Ye	s" on Form 990, Part IV, line 6.			
				(a) Donor advised funds		(b) Funds a	nd other accounts
1							
2			ns to (during year)				
3	Aggregate value	-					
4			•••••				
5				rs in writing that the assets held in d clusive legal control?		ed funds are th	
-			-	-			🗌 Yes 🗌 No
6				onor advisors in writing that grant fur or donor advisor, or for any other pu			ssible
	private benefit?				•••		🗆 Yes 🗆 No
Ра		vation Ease					
				s" on Form 990, Part IV, line 7.			
1	Purpose(s) of co	onservation ea	sements held by the orga	nization (check all that apply).			
	Preservation	on of land for	public use (e.g., recreation	n or education) 🛛 🗌 Preservatio	on of an hist	torically import	ant land area
	Protection	of natural hab	itat		on of a certi	fied historic str	ucture
	Preservation	on of open spa	ce				
2				qualified conservation contribution ir	n the form o	of a conservation	n
	easement on the	e last day of tl	ne tax year.			Held at t	he End of the Year
а					2a	1	
b	-	-					
С				c structure included in (a)			
d			nents included in (c) acqu National Register	ired after July 25, 2006, and not on a	a 2d		
3			-	ed, released, extinguished, or termina	ated by the	organization d	uring the
	tax year 🕨						
4	Number of state	s where prope	erty subject to conservation	on easement is located >			
5				he periodic monitoring, inspection, ha	andling of vi	iolations,	
	and enforcemen	t of the conse	rvation easements it hold	s?		C	🗌 Yes 🗌 No
6	Staff and volunt	eer hours dev	oted to monitoring, inspec	cting, handling of violations, and enfo	orcing conse	rvation easem	ents during the year
	▶ <u> </u>						
7		nses incurred	in monitoring, inspecting,	handling of violations, and enforcing	conservatio	on easements	during the year
	▶\$		_				
8				above satisfy the requirements of se		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
9				ervation easements in its revenue ar			Yes No
9	balance sheet, a	and include, if	applicable, the text of the	footnote to the organization's financ			
	5	5	for conservation easemen				
Par				of Art, Historical Treasures, es" on Form 990, Part IV, line 8.	or Other S	Similar Asse	ets.
1a	If the organizati	on elected, as	permitted under FASB AS	SC 958, not to report in its revenue st			
	Part XIII, the te	xt of the footn	ote to its financial statem	lic exhibition, education, or research ents that describes these items.			
b	historical treasu following amoun	res, or other s its relating to	imilar assets held for pub these items:	SC 958, to report in its revenue state lic exhibition, education, or research	in furtherar	nce of public se	rvice, provide the
((i) Revenue includ	ed on Form 99	90, Part VIII, line 1			. ▶\$	
(i	ii)Assets included	in Form 990,	Part X			►\$	
2				cal treasures, or other similar assets ASC 958 relating to these items:	for financia	l gain, provide	the
а	Revenue include	ed on Form 99	0, Part VIII, line 1			►\$	
b						·	
For				ns for Form 990. (

0/21/2	,						11011 - 1		e	1	1			
					— Pa	age 2								
Sche	dule D	(Form 990) 2022												Page 2
Parl	III	Organizations Ma												
3		the organization's acq (check all that apply):		i, and other	records,		any of	the fo	ollowing	that are a	a significan	t use of its	collection	ı
а		Public exhibition				d		Loan	or exch	ange pro	grams			
b		Scholarly research				e		Othe	er					
с		Preservation for future	e generations											
4	Provid Part >	de a description of the KIII.	organization's coll	ections and	explain h	now the	y furth	ner th	e organi	zation's e	xempt pur	pose in		
5		g the year, did the orga s to be sold to raise fur										🗌 Ye		No
Par	t IV	Escrow and Cust Complete if the org line 21.			' on Forr	n 990,	, Part	IV, li	ne 9, o	r reporte	ed an amo			
1a	Is the	e organization an agent	. trustee, custodia	an or other i	intermedi	arv for	contril	oution	ns or oth	er assets	not			
14		led on Form 990, Part)										🗌 Ye	5	No
b	If "Ye	es," explain the arrange	ment in Part XIII	and comple	te the fol	lowina	table:					Amount		
c		ining balance		•		-				1c				
d	-	ions during the year .								1d				
е		butions during the year								1e				
f		ig balance								1f				
2-		-									- h : :h . O	\cap v		
2a		ne organization include										_	s 🗌	NO
b		s," explain the arrange		Check here	e if the ex	planatio	on has	been	provide	ed in Part	xIII	. U		
Pa	rt V	Endowment Fund Complete if the ord		ered "Yes"	' on Forr	n 990	Part	TV li	ne 10					
			guinzation anow	(a) Curren			rior yea			years back	(d) Three	years back	(e) Four y	ears back
1a	Beginn	ing of year balance .												
b	Contrib	outions												
с	Net inv	vestment earnings, gair	ns, and losses											
d	Grants	or scholarships												
		expenditures for facilition	es											
f	Admini	strative expenses .												
g	End of	year balance												
2	Provid	de the estimated perce	ntage of the curre	nt vear end	balance	(line 1c	ı. colur	nn (a)) held	as:				
- a		de the estimated percent d designated or quasi-e	-	ine year ena	bulance	(1110 19	, colui)) neia	451				
b	Perm	anent endowment 🕨												
		endowment 🕨												
с		percentages on lines 2a	2b and 2c shoul	ld equal 100)%									
3a		here endowment funds		•		on that	are he	eld ar	ıd admir	nistered fo	or the			
		nization by:	·		5								Yes	No
	(i) Ur	nrelated organizations					•					3a	(i)	
	• •	elated organizations						•				3a	(ii)	
		s" on 3a(ii), are the rel	-		•			?.	• •	• •		. 3	b	
4		ribe in Part XIII the inte		-	n's endow	ment f	unds.							
Par	t VI	Land, Buildings,				- 000	Deut	T) / 1:	11-			na what Valland	10	
	Descri	Complete if the org	(a) Cost or oth		(b) Cost of						depreciation) Book va	ue
		,	(investme				(0	,						
1a	Land			0								-		0
		qs		-								1		
		old improvements					25	7,282			249,67	9		7,603
		nent						32,728			249,07	_		50,622
		· · · · · ·						-,. 20			202,10	-		55,022
	Juici		1											

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022

Part VII	Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, F	Part IV.	line 11b.See Fo	rm 990. Part X	, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of va t or end-of-year	aluation:
	al derivatives				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII	Investments - Program Related.				
	Complete if the organization answered 'Yes' on Form 990, F (a) Description of investment	Part IV,	line 11c. See Fo (b) Book value		, line 13. nod of valuation:
(1)				Cost or end-	of-year market value
(2)					
(3)					
(4)					
(5)					_
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col.(B) line 13.)	•			
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, I	ine 11d. See Fo	rm 990, Part X,	
(1)	(a) Description				(b) Book value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					ļ
(9)					
Total. (Colu Part X	Imn (b) must equal Form 990, Part X, col.(B) line 15.)				<u> </u>

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.

(a) Description of liability

(b) Book value

(1) Endoral income taxes

1.

Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	•

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

— Page 4 —

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022		Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue p Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	er Return.	
1 Total revenue, gains, and other support per audited financial statements	1	228,709,698
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2a		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	228,709,698
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	228,709,698
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	228,063,150
 Amounts included on line 1 but not on Form 990, Part IX, line 25: 	-	228,005,150
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	228,063,150
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	5	228,005,150
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	228,063,150
Part XIII Supplemental Information	5	228,003,130
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b	Dart V line 4. D	ut V line 2, Dart VI
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	, rait v, iiie 4; Pa	
Return Reference Explanat	on	
	Schedule	D (Form 990) 2022

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Return to Form

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efile Public Visua	al Render ObjectId: 202411319349303656 - Submission: 2024-05-10	TIN: 26	2291	955
Schedule J Compensation Information				0047
orm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest			
	Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	20	23	5
partment of the Treasury	Attach to Form 990. For instructions and the latest information.	Open	o Pul	olic
ernal Revenue Service Name of the organiz			ectio	n
/ETERAN TICKETS FOU	NDATION	incation in	iniber	
Part I Questi	ons Regarding Compensation 26-2291955			
Faiti Questi			Yes	No
	opiate box(es) if the organization provided any of the following to or for a person listed on Form ection A, line 1a. Complete Part III to provide any relevant information regarding these items.			
First-clas	s or charter travel Device allowance or residence for personal use			
	companions Dayments for business use of personal residence			
	nification and gross-up payments U Health or social club dues or initiation fees			
	hary spending account U Personal services (e.g., maid, chauffeur, chef)			
b If any of the bo reimbursement	xes on Line 1a are checked, did the organization follow a written policy regarding payment or or provision of all of the expenses described above? If "No," complete Part III to explain	· 1b		
Did the organiz	ation require substantiation prior to reimbursing or allowing expenses incurred by all ees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2		
directors, truste		•		
organization's (if any, of the following the filing organization used to establish the compensation of the EO/Executive Director. Check all that apply. Do not check any boxes for methods			
used by a relate	ed organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
Compens	ation committee 🛛 🗍 Written employment contract			
Independ	lent compensation consultant			
Form 990	of other organizations			
During the year related organization	; did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization ation:	or a		
a Receive a sever	ance payment or change-of-control payment?	4a		No
b Participate in, o	r receive payment from, a supplemental nonqualified retirement plan?	4b		No
	r receive payment from, an equity-based compensation arrangement?	4c		No
If "Yes" to any o	of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3	;), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
For persons list	ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any ontingent on the revenues of:			
a The organizatio	n?	5a		No
	anization?	5b		No
	ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any on internation on the net earnings of:			
a The organizatio	n?	6a		No
b Any related org	anization?	6b		No
If "Yes," on line	6a or 6b, describe in Part III.			
	ed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed escribed in lines 5 and 6? If "Yes," describe in Part III .	7		No
Were any amou subject to the in in Part III .	nts reported on Form 990, Part VII, paid or accured pursuant to a contract that was nitial contract exception described in Regulations section $53.4958-4(a)(3)$? If "Yes," describe			
		8		No
If "Yes" on line 53.4958-6(c)?	8, did the organization also follow the rebuttable presumption procedure described in Regulations section	on g		
		ule J (Form		

— Page 2 —

Schedule J (Form 990) 2023 Page **2** Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual. (B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC (F) Compensation in (A) Name and Title (C) Retirement (D) Nontaxable (E) Total of and other , benefits columns (B)(i)-(D) deferred column (B) (i) Base (ii) (iii) Other compensation reported as Bonus & incentive reportable compensation compensation deferred on prior Form 990 compensation 1 MICHAEL A FOCARETO 111 288,354 (i) 0 0 40,000 0 328,354 0 ----- - - -- - -- - - -0 (ii) ----- - - -- - - -- - - - -- - - - - -- - - -0 0 0 0 0 296,000 2 EDWARD RAUSCH (i) 40,000 336,000 0 0 0 0 - - ----------------------0 (ii) ----3 FLOYD HOGAN 111 296,000 336,000 (i) 0 0 40,000 0 0 U ---------U ------ - - - ------0 (ii) 0 0 0 0 0 0

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							+	
			1					
							Schedule J (F	orm 990) 2023
			Page 3					
chedule J (Form 990) 2023								Page 3
Part III Supplemental Information								
rovide the information, explanation, or description	s required for Part I, lines 1a,	, 1b, 3, 4a, 4b, 4c,	5a, 5b, 6a, 6b, 7,	and 8, and for Par	t II. Also complete	e this part for any	y additional info	rmation.
Return Reference			E	xplanation				
							Schedule J (Fe	orm 990) 2023

Additional Data

Return to Form

Software ID: Software Version:

(Form 390) NOnCaSA CONTINUIONS 2023 • Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. * Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. * Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. Name of the organization Employer learning Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. Part to Public Interaction answered "Yes" on Form 990, Part VII, line Name of the organization Employer learning Control of the organization answered "Yes" on Form 990, Part VIII, line Control of the organization answered "Yes" on Form 990, Part VIII, line 1 Art—Honks of art 19 (d) Moncash controlution answered "Yes" on Form 990, Part VIII, line Control of determining moncash controlution answered "Yes" 90, Part VIII, line 2 Art—Honks of art 19 (d) Moncash controlution answered "Yes" 90, Part VIII, line (d) 3 Control of the organization answered "Yes" 90, Part VIII, line Scontribution Control of the organization answered "Yes" 90, Part VIII, line (d) 4 Books and publications	(Form 990) Noncash contributions Complete if the organizations answered "tes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Complete if the organizations answered "tes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Complete if the organizations Remove the organization Remove the organizat	efile	Public Visua	al Render Ob	jectId: 20	02411319349303656 -	Submission: 2024-0	5-10	TIN: 26-	2291955
Complete if the organizations answered "tes" on form 990, Part IV, lines 29 or 30. Person and the organization service of test of form 990, Part IV, lines 29 or 30. Person and the organization service of test of the latest information. Person and the organization service of test of the latest information. Person and the organization service of test of the latest information. Person and the organization service of the latest information. Person and the organization service of the latest information. Person and the organization service of the latest information. Person and the organization service of the latest information. Person and the organization service of the latest information of the organization service of the latest information of the organization service of the latest information of the latest information of the organization service of the latest information of the latest information of the latest information of the organization service of the latest information of the latest information of the latest information of the organization service of the latest information of the latest information of the latest information of the organization service of the latest information of the latest information of the latest information of the organization service of the organization service of the latest information of the organization service of the organization device of the latest information of the organization device of the organization device of the organization device of the latest information of the organization device of the organization device of the latest information of the organization device of the latest information of the organizatin device of the organization device of the organization device of	Complete if the organizations answered "tes" on Form 990, Part IV, lines 29 or 30. Perture Reverse Neural Network (<i>Ins. aceu/, Term</i> 990, Part IV, lines 29 or 30. Perture Reverse Neural Neura	SCHEDULE M Noncash Contributions							OMB No. 1	545-0047
Attach to Form 990. Open to Public Inspection Impair Name of the organization experiments Employer identification number VertexM TREES FOUNDATION Employer identification number Part I Types of Property Co. Impair Number Name Imployer identification number 26-2291955 Part I Types of Property (a) applicable Noncash contribution and contribution and property in the instance of the insthe instance of the instance of the insthe instance of th	Particular by Pol. Open to Yul Open to Yul Open to Yul Name of the organization Employer identification number 24-229195 Part I Types of Property Go applicable Noncesh contribution and the organization and and the organization and the organization and and the i	(Forn	n 990)		I.		buttons		20	ງງ
Department of the Teamson 0 to to transmitter of the latest information. Open to Public Impaction International intervents Employer identification number 2e-22915 Part 1 Types of Property International intervents (a) Intervents (b) Intervents (b) Intervents (c) Intervents <th>Open to Puture Open to</th> <th></th> <th></th> <th></th> <th></th> <th>ions answered "Yes" on F</th> <th>orm 990, Part IV, lines</th> <th>29 or 30.</th> <th></th> <th>ZJ</th>	Open to Puture Open to					ions answered "Yes" on F	orm 990, Part IV, lines	29 or 30.		Z J
Name of the organization Employer identification number Part I Types of Property (a) (b) Check (f) Number of contributions or Rems contributed Noncash contribution amounts reported on Form 590, Part VII, line (b) 1 Art—Works of art (b) (c) Method of determining noncash contribution amounts reported on Form 590, Part VII, line 3 Art—Fractional interests (c) (c) Method of determining noncash contribution amounts 5 Cothing and household goods (c) (c) (c) (c) 6 Cars and other vehicles (c) (c) (c) (c) 6 Cars and other vehicles (c) (c) (c) (c) 7 Books and pines (c) (c) (c) (c) (c) 10 Securites-Closely held stock . (c) (c) (c) (c) (c) (c) 13 Securites-Closely held stock . (c)	Name of the organization VERRAW INCREST FORMATION Employer identification numbe 26:2291955 Part I Types of Property (a) Check if Applicable (b) (c) Number of contribution amounts reported on Form 90, Part VIII, line (d) Method of determining noncash contribution amounts reported on Form 90, Part VIII, line 1 Art-Hotofical trassures (b) (c) (d) 2 Art-Hitofical trassures (c) (c) (d) 3 Art-Fractula Interests (c) (c) (c) (c) 4 Check if Art-Fractula Interests (c)					990 for the latest informa	tion.		-	
Part I Types of Property (a) (b) (c) (c) (c) (c) (c) (c) (c	26-2291955 Part I Types of Property Check of Number of contributions or applicable Noncash contribution amounts reported on form 990, Part VIII, line 1 Art—Fractional Interests	Name	of the organizat					Employer ider		
Part I Types of Property (b) applicable (b) items contribution and rem scontribution and form 990, Part VIII, line 1g Method of determining noncash contribution amounts reported in Art—Vorks of art	Part I Types of Property Check if applicable Number of contribution items contributed Noncash contribution form 990, Part VIII, line Method of distancing noncash contribution and part VIII, line 1 Art—Historical treasures 19 10 3 Art—Fractional interests 10 10 5 Colting and household goods 10 10 9 Securities—Pathership, LLC, go ratus interests 10 10 10 Securities—Closely held stock 10 10 11 Securities—Closely held stock 10 10 13 Quilfied conservation contribution—Historic structures 10 10 10 13 Quilfied conservation contribution—Historic structures 10 10 10 10 15 Real estate—Commercial 10 10 10 10 10 16 Real estate—Commercial 10 10 10 10 10 10 16 Real estate—Commercial 10 10 10 10 10 10 16 Real estate—Commercial 10 10 10 10 10<	VETER	AN TICKETS FOUND	DATION				26-2291955		
(a) (b) Noncath Cartholution or papilicable Noncath Cartholution amounts reported on Form 990, Part VIII, Import of Carbon and of determining noncash cartholution amounts 1 Art—Hatorical treasures 10 2 Art—Hatorical treasures 10 3 Art—Hatorical treasures 10 4 Art—Hatorical treasures 10 5 Clething and household 10 9 Scourities-Publicly traded 10 10 Securities-Publicly traded 10 11 Securities-Residential 10 12 Scourities-Publicly traded 10 13 Qualified conservation contribution-Other 10 14 10 10 15 10 10 16 10 10 17 10 10 18 10 10 19 10 10 10 10 10 <td< td=""><td>(c) (c) (c)<td>Par</td><td>tI Types</td><td>of Property</td><td></td><td></td><td></td><td>20 2291999</td><td></td><td></td></td></td<>	(c) (c) <td>Par</td> <td>tI Types</td> <td>of Property</td> <td></td> <td></td> <td></td> <td>20 2291999</td> <td></td> <td></td>	Par	tI Types	of Property				20 2291999		
2 Art-Fictorial interests	2 Art—Historical treasures				Check if	Number of contributions or	Noncash contribution amounts reported on Form 990, Part VIII, line	noncash o	d of determin	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a No b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.	32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.	2 / 3 / 4 5 (7 8] 9 / 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30a	Art—Historical tr Art—Fractional ir Books and public Clothing and hou goods Cars and other v Boats and planes Intellectual prop Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Publi Securities—Cors Qualified conser contribution—O Real estate—Cor Real estate—Cor Real estate—Cor Real estate—Cor Real estate—Cor Real estate—Cor Real estate—Cor Collectibles . Food inventory Drugs and medic Taxidermy . Historical artifac Scientific specime Archeological arti Other ▶ (easures . interests isations isehold . ehicles erty cly traded . ely held stock . ership, LLC, is ellaneous . vation istoric . istoric . sidential . mercial . mercial . ist	l Form 828: n receive by e date of th od?	ation during the tax year for 3, Part IV, Donee Acknowled 7 contribution any property r 1e initial contribution, and wi	contributions gement eported in Part I, lines 1 tl nich isn't required to be us	29	t must	
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Pt VI, Line 19	THE FINANCIAL	STATEMENTS ARE AVAILABLE ON G	JIDESTAR		
Pt VI, Line 8b	YES FOUR TIME	ES A YEAR			
Pt VI, Line N 12c	MEETING FOUF	TIMES A YEAR			
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