## SCHEDULE L (Form 990)

**Transactions With Interested Persons** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047

Employer identification number

Department of the Treasury
Internal Revenue Service

Name of the organization

(10)

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

Open to Public Inspection

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only) Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ. Part V, line 40b. (a) Name of disqualified person (b) Relationship between disqualified person and (c) Description of transaction (d) Corrected? 1 organization Yes No (1) (2)(3)(4) (5) (6)2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (b) Relationship (d) Loan to or (g) In default? (h) Approved (a) Name of interested person (c) Purpose of (e) Original (f) Balance due (i) Written with organization loan from the principal amount by board or agreement? organization? committee? То Yes Yes No From Nο Nο Yes (1) (2)(3)(4)(5)(6)(7) (8)(9) (10)Total Part III **Grants or Assistance Benefiting Interested Persons** Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Type of assistance (e) Purpose of assistance person and the organization assistance (1) (2)(3)(4)(5)(6)(7) (8) (9)

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Part IV	Business Transactions Involving Interested Persons Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.					
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
(4)					Yes	No
(1)						-
(2)						-
(4)						
(5)						
(6)						
(7)						
(8)						-
(9) (10)						
Part V	Supplemental Information Provide additional information	for responses to questions	on Schedule L. See	instructions.		
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