Form **8868**

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Taxpayer identification number (TIN) Name of exempt organization, employer, or other filer, see instructions. Type or **Print** 58-1431113 NATIONAL PEACE CORPS ASSOCIATION File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 20 F ST NW, 7TH FL return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions 20001 WASHINGTON, DC Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return | Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 12 05 Form 8870 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of \overline{DANIEL} \overline{BAKER} 20 F ST NW, 7TH FL - WASHINGTON, DC 20001 Telephone No. (202) 293-7728 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN)
. If this is for the whole group, check this lifit is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15 , 20 24 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 23 or tax year beginning _____, 20 ____, and ending ___ If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

A F	or the	e 2023 calendar year, or tax year beginning	and e	ending							
B	Check if opplicable	C Name of organization			D Employer identifie	cation number					
Г	Addres										
	Name change				58-14311	13					
Initia returi		Number and street (or P.O. box if mail is not delivered to street address)									
	Final return/			TH FL	(202) 29	3-7728					
	terminated	,	G Gross receipts \$	2,564,183.							
Ļ	Ameno return Applic	WASHINGTON, DC 20001			H(a) Is this a group re						
	tion pendin	F Name and address of principal officer. DANTED DARER			for subordinates? Yes X No H(b) Are all subordinates included? Yes No						
_	F	SAME AS C ABOVE Same Sam	(=)/(1) ==								
		777 6766777666777767	(a)(1) or	r 527	•	list. See instructions					
	Nebsit	organization: X Corporation Trust Association Other		I Vear	H(c) Group exemption 1981	M State of legal domicile: NC					
	art I	Summary		L TEAT (n ioimation. ±50± N	M State of legal dominicile. INC					
		Briefly describe the organization's mission or most significant activities: TC	СН	AMPIO	N LIFELONG (COMMITMENT					
Se	'	TO PEACE CORPS IDEALS BY: HELPING THE									
Governance	2	Check this box if the organization discontinued its operations or c									
Ver	3	· · · · · · · · · · · · · · · · · · ·	-		3	23					
ၓ	4	Number of independent voting members of the governing body (Part VI, line				22					
S S	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			5	15					
Viti:	6	Total number of volunteers (estimate if necessary)			6	85					
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	157,990.					
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		<u></u>		0.					
					Prior Year	Current Year					
<u>e</u>	l	Contributions and grants (Part VIII, line 1h)			1,754,075.	1,426,160.					
en	1	Program service revenue (Part VIII, line 2g)			218,687.	223,763.					
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)			7,328. 8,614.	7,247. 25,890.					
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			1,988,704.	1,683,060.					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line Grants and similar amounts paid (Part IX, column (A), lines 1-3)			203,809.	17,816.					
	1	D 51 11 5 1 (D 11) 1 (A) 11 4)			0.	0.					
	45	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5			1,874,091.	772,280.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			54,000.	0.					
ben	b	Total fundraising expenses (Part IX, column (D), line 25)	7,34	8.	2 = 7 2 2 2 2						
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			1,252,296.	677,792.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			3,384,196.	1,467,888.					
	19	Revenue less expenses. Subtract line 18 from line 12			-1,395,492.	215,172.					
Net Assets or				Ве	ginning of Current Year	End of Year					
sets	20	Total assets (Part X, line 16)			2,077,934.	2,399,212.					
t As	21	Total liabilities (Part X, line 26)			156,954.	127,637.					
	22	Net assets or fund balances. Subtract line 21 from line 20			1,920,980.	2,271,575.					
	art II	Signature Block									
		Ities of perjury, I declare that I have examined this return, including accompanying sch			· · ·	knowledge and belief, it is					
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information	1 OT WHIC	cn preparer i	nas any knowledge.						
C:~	_	Signature of officer			I Date						
Sig Her		DANIEL BAKER, PRESIDENT & CEO			2410						
пеі	e	Type or print name and title									
		Print/Type preparer's name Preparer's signature		D	ate Check	PTIN					
Paid	ı	GLENN MILLER, CPA GLENN MILLER,	CP.	A 1	0/29/24 if self-employ	P00086726					
	arer	Firm's name WEGNER CPAS LLP				9-0974031					
	Only	Firm's address 419 N LEE ST									
_		ALEXANDRIA, VA 22314-2301			Phone no. (7	03) 519-0990					
May	the IF	RS discuss this return with the preparer shown above? See instructions				X Yes No					

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: TO CHAMPION LIFELONG COMMITMENT TO PEACE CORPS IDEALS BY: HELPING THE
	PEACE CORPS BE THE BEST IT CAN BE; EMPOWERING MEMBERS AND AFFILIATE
	GROUPS TO THRIVE; AND AMPLIFYING THE PEACE CORPS COMMUNITY'S GLOBAL
	SOCIAL IMPACT.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$ 526,335. including grants of \$ 17,816.) (Revenue \$ 7,050.)
4a	(Code:) (Expenses \$526,335. including grants of \$17,816.) (Revenue \$7,050.) (Revenue \$7,050.) (Revenue \$7,050.)
	ISSUES IMPORTANT TO SERVING AND RETURNED PEACE CORPS VOLUNTEERS. NPCA
	FACILITATES AND SUPPORTS BOTH NATIONAL AND LOCAL EFFORTS WITH
	VOLUNTEERS FOR NATIONAL DAYS OF ACTION ON CAPITOL HILL IN WASHINGTON,
	D.C., AND IN LOCAL COMMUNITIES ACROSS THE COUNTRY. PEACE CORPS CONNECT
	IS THE PEACE CORPS COMMUNITY'S ANNUAL CONFERENCE HOSTED BY NPCA AND ITS
	AFFILIATE GROUPS TO CONNECT, ENGAGE AND INSPIRE ITS COMMUNITY. THE
	CONFERENCE HIGHLIGHTS WORK BEING DONE BY COMMUNITY MEMBERS AND PARTNER
	ORGANIZATIONS, AND EXPLORES HOW NPCA CAN CONTINUE TO CHAMPION PEACE
	CORPS IDEALS.
4b	(Code:) (Expenses \$ 385,592. including grants of \$ 0.) (Revenue \$ 48,673.)
	PUBLICATIONS: PUBLICATIONS INCLUDE PRINT, DIGITAL AND SOCIAL MEDIA.
	WORLDVIEW MAGAZINE HAS BEEN PUBLISHED QUARTERLY FOR OVER 34 YEARS IN
	PRINT AND NOW ALSO DIGITAL, PROVIDING NEWS AND COMMENTARY ABOUT GLOBAL ISSUES FROM A PEACE CORPS PERSPECTIVE. EACH ISSUE FEATURES ARTICLES BY
	AND ABOUT PEACE CORPS VOLUNTEERS, RETURNED PEACE CORPS VOLUNTEERS AND
	OTHERS WHO SHARE THE GLOBAL VALUES OF THE PEACE CORPS EXPERIENCE.
	OTHERS WHO DIMEN THE CHOPME VINCED OF THE TENCH COMP ENTERCHACE.
4c	(Code:) (Expenses \$ $147,339.$ including grants of \$) (Revenue \$ $10,050.$)
	MEMBERSHIP: NPCA FOSTERS A UNITED AND VIBRANT PEACE CORPS COMMUNITY BY
	PROVIDING VITAL RESOURCES AND OPPORTUNITIES TO INDIVIDUAL MEMBERS WHILE
	SUPPORTING ITS 180+ AFFILIATE GROUPS IN ACHIEVING THEIR OBJECTIVES.
	NPCA MEMBERSHIP IS FREE TO ANYONE WHO SHARES PEACE CORPS VALUES,
	PROMOTING A BROADER AND MORE INCLUSIVE AND DIVERSE COMMUNITY. NPCA'S
	GLOBAL REENTRY PROGRAM HELPS RETURNED VOLUNTEERS WITH READJUSTMENT AT
	HOME AFTER SERVICE, PROVIDING RESOURCES TO OVERCOME CHALLENGES AND TAKE
	THE NEXT STEPS TOWARD HEALTHY LIVES AND SUCCESSFUL CAREERS. PEACE CORPS
	COMMUNITY CONNECT WORKS WITH MEMBERS AND AFFILIATE GROUPS TO EXPAND REACH AND ENGAGE IN DIVERSE PROJECTS AND INITIATIVES THAT INCREASE
	COMMUNITY IMPACT.
	COMMONATI IMINOI (
4d	Other program services (Describe on Schedule O.)
ru	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 1,059,266.
	Form 990 (2023)

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		x
0	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	-		1
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			T -
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	"		
13	·	19		x
20-	complete Schedule G, Part III	20a		X
20a	• •	20a 20b		 ^
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		\vdash
21				x
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		Λ

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

332004 12-21-23

Form **990** (2023)

(gambling) winnings to prize winners?

023) NATIONAL PEACE CORPS ASSOCIATION

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

		_		Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	15							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2 b	Х					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За	Х					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b	Х					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	а							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X				
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBA								
5a	J , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	Г	5b		X				
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	ı			٦,				
_	any contributions that were not tax deductible as charitable contributions?		6a		X				
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).	to the never	7-		Х				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided	Г	7a						
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		7-		x				
	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d		7c						
d	• • • • • • • • • • • • • • • • • • • •		7e		Х				
e f			7 e 7f		X				
	g If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form		7g 7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	11 1000 0.	711						
	sponsoring organization have excess business holdings at any time during the year?		8						
9									
a Did the sponsoring organization make any taxable distributions under section 4966?									
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b						
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter:								
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.)								
	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						
	Note: See the instructions for additional information the organization must report on Schedule O.								
D	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 They the amount of receives an hand								
	Enter the amount of reserves on hand Did the eventing convice drying the toward.		110		Х				
14a	0 0 ,		14a						
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b						
	excess parachute payment(s) during the year?		15		Х				
	If "Yes," see the instructions and file Form 4720, Schedule N.		13						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		Х				
	If "Yes," complete Form 4720, Schedule O.		.5						
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities								
••	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17						
	If "Yes," complete Form 6069.								

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

	Check if Schedule O contains a response or note to any line in this Part VI			X			
Sec	tion A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 23						
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent						
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		Х			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision						
•		3		х			
4	of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
		6	Х	- 21			
6	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	-	- 22				
7a		7-	Х				
	more members of the governing body?	7a					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			Х			
•	persons other than the governing body?	7b					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		37				
a	The governing body?	8a	X				
b	Each committee with authority to act on behalf of the governing body?	8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the						
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)						
			Yes	No			
	Did the organization have local chapters, branches, or affiliates?	10a	X				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		37				
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	X				
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?						
b	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	_X_				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
	on Schedule O how this was done	12c	X				
13	Did the organization have a written whistleblower policy?	13	X				
14	Did the organization have a written document retention and destruction policy?	14	X				
15	Did the process for determining compensation of the following persons include a review and approval by independent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a	X				
b	Other officers or key employees of the organization	15b		X			
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a						
	taxable entity during the year?	16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's						
	exempt status with respect to such arrangements?	16b					
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availat	ole			
	for public inspection. Indicate how you made these available. Check all that apply						
	X Own website X Another's website X Upon request Other (explain on Schedule O)						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial				
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's books and records						
	DANIEL BAKER - (202) 293-7728						
	20 F ST NW, 7TH FL, WASHINGTON, DC 20001						

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

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

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

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

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	(do box		Pos heck i	ition more	l than o	one n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) DANIEL BAKER ACTING PRESIDENT & CEO	40.00	х		Х				140 725	0.	7 000
(2) JONATHAN PEARSON	40.00	^	\vdash	^				149,735.	0.	7,998.
DIRECTOR OF COMMUNITY RELATIONS	40.00	1				x		100,973.	0.	14,353.
(3) JOHN LEE EVANS	2.00							100,575.	•	14,333.
CHAIR	2.00	х		x				0.	0.	0.
(4) BRIDGET DAVIS	2.00	T-								
VICE CHAIR		Х		х				0.	0.	0.
(5) JAMES BALDWIN	5.00									
TREASURER		Х		Х				0.	0.	0.
(6) CARLA BROWN-NDIAYE	2.00									
SECRETARY		Х		Х				0.	0.	0.
(7) JIM DIEGEL	1.00									
DIRECTOR		Х						0.	0.	0.
(8) GEORGE ECONOMIDIS	1.00									
DIRECTOR		Х						0.	0.	0.
(9) KEVIN ELLIOTT	1.00									
DIRECTOR		Х						0.	0.	0.
(10) SUE FORSTER-COX	1.00									
DIRECTOR		Х						0.	0.	0.
(11) TRACY HAUGEN	1.00								_	_
DIRECTOR		Х						0.	0.	0.
(12) JEFFREY JANIS	5.00									
DIRECTOR	1 00	Х						0.	0.	0.
(13) MALORIE JONES	1.00	ļ							•	•
DIRECTOR	1 00	Х	_					0.	0.	0.
(14) LISA CONVERY-LOPEZ	1.00	.,							0	0
DIRECTOR	1 00	Х				_		0.	0.	0.
(15) DAN MCALLISTER	1.00	. ,							0	0
DIRECTOR (16) MDIGETIMA OMBING	F 00	Х						0.	0.	0.
(16) KRISTINA OWENS DIRECTOR	5.00	Х						0.	0.	0
(17) HELEN PETROZOLLA	1.00	^	\vdash		\vdash	\vdash	\vdash	0.	U •	0.
DIRECTOR	1.00	Х						0.	0.	0.
332007 12-21-23	1	77		l	<u> </u>		L	1 0.	0.	Form 990 (2023)

332007 12-21-23

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B)	(C)						(D)	(E)		(F)	
Name and title	Average	(do	Position (do not check more than one					Reportable	Reportable		Estima	ted
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation		amoun	t of
	week	officer and a dire		irecto	r/trus	tee)	from	from related		othe		
	(list any	rector						the	organizations			
	hours for related	or di	9.0			ated		organization	(W-2/1099-MISC/	1		
	organizations	ustee	trust		92	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related		
	below	ual tr	tional		ploye	t con	L	1		- 1	rganiza	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			"	gariiza	
(18) RYAN PLESH	1.00	_	_		<u>×</u>	1 0	_			\top		
DIRECTOR		Х						0.	0	.		0.
(19) MICHAEL ROMAN	1.00											
DIRECTOR		Х						0.	0	.		0.
(20) JOE SHAFFNER	1.00											
DIRECTOR		Х						0.	0	•		0.
(21) JJ SINGH	1.00	1							_			
DIRECTOR	1 00	Х						0.	0	•—		0.
(22) NELL TODD	1.00	ļ										•
DIRECTOR	1 00	Х	_					0.	0	•		0.
(23) GRETCHEN UPHOLT DIRECTOR	1.00	х						0.	0			0.
(24) FAITH VAN GILDER	1.00	^	\vdash					0.	0	+		0.
DIRECTOR	1.00	x						0.	0			0.
									•	+		
		1										
										\top		
1b Subtotal								250,708.	0		22,3	351.
c Total from continuation sheets to Part VII	l, Section A							0.	0			0.
d Total (add lines 1b and 1c)								250,708.	0	<u>. </u>	22,3	<u> 351.</u>
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable			•
compensation from the organization											1.7	2
											Yes	No
3 Did the organization list any former officer,			сеу е	empl	oye	e, or	hig	hest compensated emp	loyee on			v
line 1a? If "Yes," complete Schedule J for st										3		X
4 For any individual listed on line 1a, is the su											Х	
and related organizations greater than \$150Did any person listed on line 1a receive or a										4	A	
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes." com										5		Х
Section B. Independent Contractors	piete Scrieduit	- J 1	OF SL	<u>ICIT Ļ</u>	Jers	OII .						
Complete this table for your five highest cor	mpensated inc	depe	nder	nt cc	ontra	acto	rs th	nat received more than \$	3100,000 of compens	ation	from	
the organization. Report compensation for t												
(A)								(B)			(C)	
Name and business	address	N	ONE	3				Description of s	ervices	Com	oensati	on

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Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Form 990 (2023) NATIONA
Part VIII Statement of Revenue

			Check if Schedule O contains a response	or note to anv lin	e in this Part VIII			
			_	,	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
						function revenue	business revenue	sections 512 - 514
SS	1	a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
ية ق			Fundraising events 1c					
ffs,			Related organizations 1d					
ية إق				10,363.				
ons,			, 	10,303.				
utic		T	All other contributions, gifts, grants, and	115 707				
ë				415,797.				
o d		_	Noncash contributions included in lines 1a-1f		1,426,160.			
Oa		n	Total. Add lines 1a-1f	Business Code	1,420,100.			
	_		ADVERTISING	541800	157,990.		157,990.	
ice				900099	48,673.	48,673.	137,330.	
erv ue			SUBSCRIPTIONS CDM DIAMECORM FEELS	900099	10,050.	10,050.		
n S			CRM PLATFORM FEES	900099	10,030.	10,030.		
gra Be		d						
Program Service Revenue		e	-	900099	7 050	7 050		
_			All other program service revenue		7,050.	7,050.		
_		g	Total. Add lines 2a-2f		223,763.			
	3		Investment income (including dividends, intere		20 240			20 240
			other similar amounts)		28,349.			28,349.
	4		Income from investment of tax-exempt bond p					
	5		Royalties	(2) Danie and				
			(i) Real	(ii) Personal				
			Gross rents 6a					
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 852,624.					
		b	Less: cost or other basis					
ne			and sales expenses 76 873,726.					
her Revenue			Gain or (loss) 7c -21,102.		01 100			01 100
~			Net gain or (loss)		-21,102.			-21,102.
the!	8	а	Gross income from fundraising events (not					
Ò			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18					
			Less: direct expenses 8b					
			Net income or (loss) from fundraising events					
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9a					
			Less: direct expenses 9b					
			Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns	22 000				
				33,287.				
			Less: cost of goods sold 10b		05 000			05 000
		С	Net income or (loss) from sales of inventory		25,890.			25,890.
<u>s</u>				Business Code				
eon Ie	11							
lan		b						
Miscellaneous Revenue		С						
Mis			All other revenue					
		е	Total. Add lines 11a-11d		1 602 662	CE 553	155 000	22 425
	12		Total revenue. See instructions	<u></u>	1,683,060.	65,773.	157,990.	33,137.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).											
Check if Schedule O contains a response or note to any line in this Part IX											
	not include amounts reported on lines 6b, 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		o.cponiooo	general expenses	одреневе						
-	and domestic governments. See Part IV, line 21	12,816.	12,816.								
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	5,000.	5,000.								
4	Benefits paid to or for members										
5	Compensation of current officers, directors,										
	trustees, and key employees	157,733.	115,012.	17,284.	25,437.						
6	Compensation not included above to disqualified										
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)										
7	Other salaries and wages	525,101.	382,880.	57,540.	84,681.						
8	Pension plan accruals and contributions (include										
	section 401(k) and 403(b) employer contributions)	2,245. 29,992.	1,637. 21,869.	246.	362.						
9	Other employee benefits			3,286.	4,837. 9,226.						
10	Payroll taxes	57,209.	41,714.	6,269.	9,226.						
11	Fees for services (nonemployees):										
	Management	556		556							
	Legal	556.		556.							
	Accounting	67,242.		67,242.							
	Lobbying										
	Professional fundraising services. See Part IV, line 17	15 004		15 004							
f	Investment management fees	15,004.		15,004.							
g	Other. (If line 11g amount exceeds 10% of line 25,	284,620.	247,800.	11,845.	24 075						
40	column (A), amount, list line 11g expenses on Sch 0.)	204,020.	247,000.	11,043.	24,975.						
12 13	Advertising and promotion	128,491.	100,288.	8,099.	20,104.						
14	Office expenses Information technology	87,497.	72,057.	6,732.	8,708.						
15	Royalties	01,1310	7270371	0 7 7 3 2 4	077001						
16	Occupancy	46,850.	33,398.	7,139.	6,313.						
17	Travel	8,073.	2,731.	3,944.	1,398.						
18	Payments of travel or entertainment expenses	7,0101		7,7,2,2,1							
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings										
20	Interest										
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	472.		472.							
23	Insurance	8,260.	5,888.	1,259.	1,113.						
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)										
а	DUES AND SUBSCRIPTIONS	15,590.	8,337.	3,377.	3,876.						
b		,	,	,	•						
С											
d											
е	All other expenses	15,137.	7,839.	980.	6,318.						
25	Total functional expenses. Add lines 1 through 24e	1,467,888.	1,059,266.	211,274.	197,348.						
26	Joint costs. Complete this line only if the organization										
	reported in column (B) joint costs from a combined										
	educational campaign and fundraising solicitation.										
	Check here if following SOP 98-2 (ASC 958-720)										

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rar	τx	Balance Sneet					
		Check if Schedule O contains a response or not	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			241,355.	1	649,547
	2	Savings and temporary cash investments			281,282.	2	13,889
	3	Pledges and grants receivable, net	147,097.	3	47,992		
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disquali	rsons (as defined				
		under section 4958(f)(1)), and persons described	d in sec	tion 4958(c)(3)(B)		6	
ပ္သ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
¥	9				20,122.	9	17,287
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	81,724.			
	b	Less: accumulated depreciation			0.		1,651
	11	Investments - publicly traded securities			1,343,276.	11	1,651 1,467,778
	12	Investments - other securities. See Part IV, line	11		11,686.	12	167,952
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			33,116.	15	33,116
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	33)	2,077,934.	16	2,399,212
	17	Accounts payable and accrued expenses			121,542.	17	123,146
	18	Grants payable		18			
	19	Deferred revenue		35,412.	19	4,491	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
Se	22	Loans and other payables to any current or form					
≝		trustee, key employee, creator or founder, subs					
Liabilities		controlled entity or family member of any of the				22	
-	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	s 17-24)	. Complete Part X			
		of Schedule D		······	156 054	25	107 (27
	26	<u> </u>	<u></u>		156,954.	26	127,637
ړ		Organizations that follow FASB ASC 958, che	eck her	e X			
၌		and complete lines 27, 28, 32, and 33.			000 216		405 024
alar 	27			·····	-829,316.	27	405,034
ĕ	28	Net assets with donor restrictions			2,750,296.	28	1,866,541
Ĭ		Organizations that do not follow FASB ASC 9	58, che	eck here			
<u> </u>		and complete lines 29 through 33.					
ts	29	Capital stock or trust principal, or current funds				29	
SSe	30	Paid-in or capital surplus, or land, building, or ed				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in			1 000 000	31	0 071 575
≥	32	Total net assets or fund balances			1,920,980.	32	2,271,575
	33	Total liabilities and net assets/fund balances .			2,077,934.	33	2,399,212

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Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI		· · · · · · · · · · · · · · · · · · ·		X		
1	Total revenue (must equal Part VIII, column (A), line 12)		1,68				
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,46				
3	Revenue less expenses. Subtract line 2 from line 1	3		5,1			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,92				
5	Net unrealized gains (losses) on investments	5	<u> 15</u>	1,2	20.		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-1	5,7	97.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	2,27	1,5	75.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>				
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b				
			Form	990	(2023)		

332012 12-21-23

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No. 1545-0047

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

Name of the organization

Employer identification number

NATIONAL PEACE CORPS ASSOCIATION 58-1431113 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 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)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1436772.	3900626.	2504115.	1754075.	1426160.	11021748.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1436772.	3900626.	2504115.	1754075.	1426160.	11021748.
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)						2898743.
6	Public support. Subtract line 5 from line 4.						8123005.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	1436772.	3900626.	2504115.	1754075.	1426160.	11021748.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	32,445.	20,332.	20,803.	7,302.	28,349.	109,231.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)			906.			906.
11	Total support. Add lines 7 through 10						11131885.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	189,978.
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)	_
	organization, check this box and stop						
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2023 (I	ine 6, column (f), di	vided by line 11, c	olumn (f))		14	72.97 %
	Public support percentage from 2022					15	74.17 %
16a	16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and						
	stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization qualifies as a publicly supported organization						
17a	17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,						
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
b	b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or						
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the						
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	s
						Cohodulo A	(Form 990) 2023

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

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

Sed	etion A. Public Support	siow, picase comp	note i art ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
_	the organization without charge						
	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8 Sec	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6		, ,		,		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ie organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizatio	on,
	check this box and stop here		-				<u></u>
	ction C. Computation of Publi		<u>-</u>			 	
	Public support percentage for 2023 (I			column (f))		15	<u>%</u>
	Public support percentage from 2022		•			16	<u>%</u>
	ction D. Computation of Inves			ina 10. as l		147	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from 3			on line 14 and line		18	7 is not
ıya	33 1/3% support tests - 2023. If the						
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2022. If the	organization did r	not check a box or	line 14 or line 19	a, and line 16 is m	ore than 33 1/3%, a	and
00	line 18 is not more than 33 1/3%, che						
/()	Private foundation. If the organization	n did not check a	DOX ON line 14 19	a or igo check th	us dox and see in:	SITUCHORS	1 1

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Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

1		Yes	No
2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b			
2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b			
3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b	1		
3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b			
3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b			
3b 3c 4a 4b 4b 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b	2		
3b 3c 4a 4b 4b 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b			
3c	3a		
3c			
3c			
4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b	3b		
4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b			
4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b	3с		
4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b			
4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b	4a		
4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b			
4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b			
5a 5b 5c 6 7 8 9a 9b 9c 10a	4b		
5a 5b 5c 6 7 8 9a 9b 9c 10a			
5a 5b 5c 6 7 8 9a 9b 9c 10a			
5a 5b 5c 6 7 8 9a 9b 9c 10a			
5b 5c 6 7 8 9a 9b 9c 10a	4c		
5b 5c 6 7 8 9a 9b 9c 10a			
5b 5c 6 7 8 9a 9b 9c 10a			
5b 5c 6 7 8 9a 9b 9c 10a			
5b 5c 6 7 8 9a 9b 9c 10a			
5c 6 7 8 9a 9b 9c 10a 10b	5a		
5c 6 7 8 9a 9b 9c 10a 10b	Eh		
6 7 8 9a 9b 9c 10a 10b			
7 8 9a 9b 9c 10a	50		
7 8 9a 9b 9c 10a			
7 8 9a 9b 9c 10a			
7 8 9a 9b 9c 10a			
7 8 9a 9b 9c 10a	6		
9a 9b 9c 10a			
9a 9b 9c 10a			
9a 9b 9c 10a	7		
9a 9b 9c 10a			
9b 9c 10a	8		
9b 9c 10a			
9b 9c 10a			
9c 10a 10b	9a		
9c 10a 10b			
10a	9b		
10a			
10b	9с		
10b			
10b			
	10a		
			<u> </u>

332024 12-21-23 Schedule A (Form 990) 2023

Par	art IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of or	ne or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's off	icers,		
	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 support and low remarks of the property o			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1 1		
		-		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		100	110
	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	1		
Sect	the supported organization(s). ction D. All Type III Supporting Organizations			
	out 2.7 m Type in cupper ung Craumautic		Yes	No
4	Did the expenization provide to each of its supported expenizations, by the last day of the fifth month of the		162	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	4		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
Sact	supported organizations played in this regard. ction E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	uctions).		
a				
b				
С	5 Jessines III supported a governmental entitle	ly (see instruction	I	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	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? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	<u>2b</u>		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
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.	3b		

2 Acquisition indebtedness applicable to non-exempt-use assets

5 Net value of non-exempt-use assets (subtract line 4 from line 3)

1 Adjusted net income for prior year (from Section A, line 8, column A)

3 Minimum asset amount for prior year (from Section B, line 8, column A)

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

Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,

3 Subtract line 2 from line 1d.

Multiply line 5 by 0.035.

Section C - Distributable Amount

Enter greater of line 2 or line 3

Income tax imposed in prior year

2 Enter 0.85 of line 1.

Recoveries of prior-year distributions

Minimum Asset Amount (add line 7 to line 6)

emergency temporary reduction (see instructions)

see instructions).

6

7

5

2 3

4

5 6

7

8

1

2 3

4 5

emergency temperary reduction (see metactions).	•		
Check here if the current year is the organization's first as a non-functionally into	egrated Type	III supporting organ	ization (see
instructions).			

Schedule A (Form 990) 2023

Current Year

Schedule A (Form 990) 2023

e Excess from 2023

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization Employer identification number

NATIONAL PEACE CORPS ASSOCIATION 58-1431113

Organization type (check one):

or garneration type (Oriotic orio).						
Filers of:	ilers of: Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule						
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or y one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
sections 509(a)(1) contributor, durin	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one get the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; Z, line 1. Complete Parts I and II.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
year, contribution is checked, enter purpose. Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the as exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively be, etc., contributions totaling \$5,000 or more during the year \$					
answer "No" on Part IV, lin	religious, charitable, etc., contributions totaling \$5,000 or more during the year ution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it swer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify it it doesn't meet the filing requirements of Schedule B (Form 990).					

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Page 2 Name of organization Employer identification number

NATIONAL PEACE CORPS ASSOCIATION

58-1431113

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 114,091.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 334,271.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

NATIONAL PEACE CORPS ASSOCIATION

58-1431113

(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	(b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given	(b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) FMV (or estimate) (See instructions.) (e) FMV (or estimate) (See instructions.) (f) FMV (or estimate) (See instructions.) (g) FMV (or estimate) (See instructions.)

Schedule B (Form 990) (2023)

Page 4 Name of organization **Employer identification number** NATIONAL PEACE CORPS ASSOCIATION 58-1431113 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of orga	anization	ions. Complete Fait III.		l E	mployer identification number
		L PEACE CORPS AS	SOCTATION	-	58-1431113
Part I-A	Complete if the org	anization is exempt und	er section 501(c)	or is a section 527	organization.
2 Political	a description of the organiz	\$			
Part I-B	Complete if the org	anization is exempt und	ler section 501(c)(3).	
1 Enter th	e amount of any excise tax	incurred by the organization un	der section 4955	•	\$
2 Enter th	e amount of any excise tax	incurred by organization manag	ers under section 4955		\$
3 If the or	ganization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a c	orrection made?				Yes No
b If "Yes,"	describe in Part IV.				
		anization is exempt und			
		I by the filing organization for se			\$
		ization's funds contributed to of	~		
					\$
	•	. Add lines 1 and 2. Enter here a	•		
		4400 DOL (
		1120-POL for this year?			
		mployer identification number (E tion listed, enter the amount pai		~	
•	,	omptly and directly delivered to			•
		additional space is needed, pro-			arate eeg. egatea tanta et a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization funds. If none, enter	's contributions received and

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

Schedule C (Form 990) 2023

Part II-A Complete if the org		npt under section			ection under
section 501(h)).					
			Part IV each affiliated of	group member's nam	e, address, EIN,
	e of excess lobbying e	. ,			
		nd "limited control" pro	visions apply.	(a) Filing	(b) Affiliated group
	ts on Lobbying Expe litures" means amou	ints paid or incurred.)		organization's totals	totals
1a Total lobbying expenditures to influ	ence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influ	ence a legislative boo	ly (direct lobbying)			
c Total lobbying expenditures (add lin	nes 1a and 1b)				
d Other exempt purpose expenditure					
e Total exempt purpose expenditures					
f Lobbying nontaxable amount. Ente			Г		
If the amount on line 1e, column (a) of		bying nontaxable am			
not over \$500,000,	` '	the amount on line 1e.			
over \$500,000 but not over \$1,000		00 plus 15% of the exc	ess over \$500 000		
over \$1,000,000 but not over \$1,50		00 plus 10% of the exc			
over \$1,500,000 but not over \$17,0		00 plus 5% of the exce			
over \$17,000,000,	\$1,000,	•	33 ονει ψ1,000,000.		
g Grassroots nontaxable amount (en	han 050/ af line 46				
h Subtract line 1g from line 1a. If zero	,				
i Subtract line 1f from line 1c. If zero					
	,	ling 1: did the every	_		
j If there is an amount other than zer	_				□ vaa □ Na
reporting section 4911 tax for this			0 " 504"		Yes No
(Some organizations th	at made a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all o	f the five columns b	elow.
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(2	a)	(b)	
of the lobbying activity.	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?	X			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			
c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?		X		
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		209	,016.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i Other activities?		X	0.0.0	01.6
j Total. Add lines 1c through 1i			209	,016.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X		
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c	n 501(c)(/	5) or sec	tion	
501(c)(6).	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i>J</i> , 01 300		
			Yes	No
Were substantially all (90% or more) dues received nondeductible by members?		1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
Did the organization make only inflodes lobbying experiorities of \$2,000 or less: Did the organization agree to carry over lobbying and political campaign activity expenditures from the control of the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying expenditures from the organization agree to carry over lobbying expension agree to carry ove		····		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	on 501(c)(o), or sec	tion	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				3, is
answered "Yes."				
Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)				
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year				
c Total				
0 1 1 1 1 1 0000 1 1 1 1 1 1 1 1 1 1 1		_		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	cess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 ar	nd 2 (see	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART II-B, LINE 1, LOBBYING ACTIVITIES:				
NPCA'S LOBBYING ACTIVITIES INCLUDE ACTION ALERTS AND	MOBILIZ	AULTON		
CONCEDUTIVO CRECTETO LEGICIANTON MOCH CENEN REALING W			_	
CONCERNING SPECIFIC LEGISLATION, MOST OFTEN DEALING W	ITH THE	E PEAC	<u> </u>	
CODDO ME ALGO HOLD NDOA GEARE LEVEL MERENDOG MINH CO	TODELCCT	-		
CORPS. WE ALSO HOLD NPCA STAFF LEVEL MEETINGS WITH CO	NGKESSI	UNAL		
OFFICES TO SIDDODE SIGN I FOTSIANTON ADDITIONALLY WE	יי שם או	ים עותדו	יאים קידות	
OFFICES TO SUPPORT SUCH LEGISLATION. ADDITIONALLY, WE	WORK W	VIIT C.	LIIVEN	
ADVOCATES TO ORGANIZE AND CARRYOUT CONSTITUENT MEETING	за мттг	Ţ. Ճ ™	ZKERC	
TELOCITED TO ONOMITTE WAS CHIMIOOL COMBILLIONAL MEETING	V VY II.			990) 2023

332043 11-06-23

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

NATIONAL PEACE CORPS ASSOCIATION

Employer identification number 58-1431113

Par			or Accounts. Complete if the				
	organization answered "Yes" on Form 990, Part IV, lin	e 6. (a) Donor advised funds	(b) Funds and other accounts				
	Takel groups as an electronic	(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4 5	Aggregate value at end of year Did the organization inform all donors and donor advisors in v	Luviting that the coasts hold in donor advis	and funds				
3	-	_					
6							
O	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring						
Par							
1	Purpose(s) of conservation easements held by the organization						
·	Preservation of land for public use (for example, recrea		f a historically important land area				
	Protection of natural habitat		f a certified historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last				
	day of the tax year.		Held at the End of the Tax Year				
а	Total number of conservation easements		2a				
			4.				
С	Number of conservation easements on a certified historic stru	ucture included on line 2a	2c				
d	Number of conservation easements included on line 2c acqu	ired after July 25, 2006, and not					
	on a historic structure listed in the National Register		2d				
3	Number of conservation easements modified, transferred, rel-						
	year						
4	Number of states where property subject to conservation eas	sement is located					
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of					
	violations, and enforcement of the conservation easements it						
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con-	servation easements during the year				
-	Assessment of company of the company	lling of violations and outputing account	tion consents division the conse				
7	Amount of expenses incurred in monitoring, inspecting, hand	alling of violations, and emorcing conserva	tion easements during the year				
8	Does each conservation easement reported on line 2d above	seatisfy the requirements of section 170/h)/(1/(R)/i)				
Ü		satisfy the requirements of section 170(i					
9	In Part XIII, describe how the organization reports conservation						
Ŭ	balance sheet, and include, if applicable, the text of the footn	•					
	organization's accounting for conservation easements.		one that accompce the				
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther Similar Assets.				
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.					
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement a	and balance sheet works				
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in fu	urtherance of public				
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.						
b	b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of						
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,						
	provide the following amounts relating to these items.						
	(i) Revenue included on Form 990, Part VIII, line 1		\$				
2	If the organization received or held works of art, historical treatment	asures, or other similar assets for financia					
	the following amounts required to be reported under FASB A	SC 958 relating to these items:					
а	Revenue included on Form 990, Part VIII, line 1		\$ <u></u>				
<u>b</u>	Assets included in Form 990, Part X						
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2023				

332051 09-28-23

	t III Organizations Maintaining C	ollections of Art			er Sin		S (contin		age 🚣
3	Using the organization's acquisition, accession						(COITER	lucu)	
	collection items (check all that apply).	,	,	3	3				
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other	0.0					
С	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's exe	empt pi	urpose in Part	XIII.		
5	During the year, did the organization solicit or								
	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arrang						ine 9, or		
	reported an amount on Form 990, Par		· ·			, ,	·		
1a	Is the organization an agent, trustee, custodia	an, or other intermed	iary for contribution	s or other assets no	t inclu	ded			
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII								
		•	· ·				Amount	t	
С	Beginning balance					1c			
	Additions during the year					1d			
	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo				ility?		Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	planation has been	provided in Part XIII					
Par	t V Endowment Funds Complete if	the organization ans	wered "Yes" on For	m 990, Part IV, line	10.				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Th	rree years back	(e) Four	years	back
1a	Beginning of year balance	1,418,561.	1,897,479.	880,772.		789,504.		697,	519.
b	Contributions		192,669.	905,125.					
	Net investment earnings, gains, and losses	140,399.	-71,969.	129,919.		102,913.		136,	832.
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs							33,	500.
f	Administrative expenses	43,000.	599,618.	18,337.		11,645.		11,	347.
g	End of year balance	1,515,960.	1,418,561.	1,897,479.		880,772.		789,	504.
2	Provide the estimated percentage of the curr	ent year end balance	(line 1g, column (a)) held as:					
а	Board designated or quasi-endowment	.0000	%						
b	Permanent endowment 85.7550	%	_						
С	Term endowment 14.2450								
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.							
За	Are there endowment funds not in the posses	ssion of the organizat	tion that are held ar	d administered for t	:he		_		
	organization by:							Yes	No
	(i) Unrelated organizations?						3a(i)		X
	(ii) Related organizations?						3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the		vment funds.						
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990, Part X	(, line 1	0.			
	Description of property	(a) Cost or ot		' '	Accum		(d) Bool	k valu	е
		basis (investm	ent) basis	(other) d	eprecia	ation			
	Land								
	Buildings								
	Leasehold improvements								
d	Equipment								
	Other		8	1,724.	80	,073.		1,6	<u>51.</u>
T-4-1	Add lines to through to (O.) (1)			(51)			•	ו ה	ب آ

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 NATIONAL PEA Part VIII Investments - Other Securities	ACE CORPS ASSO	CIATION 50	-1431113 Page 3
Complete if the organization answered "Yes" of	n Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)	167,952.	COST	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	167 052		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.	167,952.		
Complete if the organization answered "Yes" o	on Form 900 Part IV line 1	1c See Form 990 Part Y line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	l-of-vear market value
	(b) Book value	(b) Mothod of Valuation. Cost of the	a or your market value
(1) (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" o		1d. See Form 990, Part X, line 15.	
(a) [Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)	(D))		
Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities	(B))		
Complete if the organization answered "Yes" of	on Form 990 Part IV line 1	1e or 11f See Form 990 Part X line 25	
1. (a) Description of liability		10 01 1111 000 1 01111 000, 1 01171, 1110 20	(b) Book value
(1) Federal income taxes			() / = = = : : : : : : : : : : : : : : : :
(2)			
(3)			
(4)			
(5)			
(6)			

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

Schedule D (Form 990) 2023

(7) (8)

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

	dule D (Form 990) 2023 NATIONAL PEACE CORPS ASSOCI				1431113	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	its With	Revenue per Re	turn		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				1 006	600
1	Total revenue, gains, and other support per audited financial statements			1	1,826,	673.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	4-4 000			
а	Net unrealized gains (losses) on investments	2a	151,220.	-		
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	-15,004.			
е	Add lines 2a through 2d			2e	136,	
3	Subtract line 2e from line 1			3	1,690,	<u>457.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b	-7,397.			
С	Add lines 4a and 4b			4c		<u>397.</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,683,	060.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	nts With	Expenses per F	Returr	า	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	1,476,	078.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d	23,194.			
е	Add lines 2a through 2d			2e	23,	194.
3	Subtract line 2e from line 1			3	1,452,	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				· · · · ·	
· a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	15,004.			
b	Other (Describe in Part XIII.)	4b	- · · · · · · · · · · · · · · · · · · ·			
-	Add lines 4a and 4b			4c	15.	004.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,467,	
	t XIII Supplemental Information					
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	/ lines 1h	and 2h: Part V. line 4	· Dort V	/ line 2: Part VI	
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi	•		, rait /	t, iiile 2, i ait Ai,	
PAI	T XI, LINE 2D - OTHER ADJUSTMENTS:					
IN	ESTMENT MANAGEMENT FEES REPORTED ON FORM 9	90, P <i>I</i>	ART IX,			
LI	E 11F				-15,0	04.
PAI	T XI, LINE 4B - OTHER ADJUSTMENTS:					
COS	T OF GOODS SOLD REPORTED ON FORM 990, PART	VIII,	LINE			
10I					-7,3	97.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD REPORTED ON FORM 990, PART VIII, LINE

10B 7,397.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Schedule I (Form 990) 2023

Name of the organization NATIONAL PEACE CORPS ASSOCIATION							Employer identification number $58-1431113$	
Part I	General Information on Grants a		ID ADDOCIAL	1014				30 1431113
1 Does	the organization maintain records t ia used to award the grants or assis ribe in Part IV the organization's pro	stance?						
Part II	Grants and Other Assistance to recipient that received more than \$	Domestic Organi	zations and Domesti	c Governments.	Complete if the org	anization answered "Y	'es" on Form 990, Par	t IV, line 21, for any
1 (a) Na	ame and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
	total number of section 501(c)(3) at	· ·	•	le line 1 table		<u> </u>		

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
t IV Supplemental Information. Provide the information re	equired in Part I, lin	e 2; Part III, columr	n (b); and any other ac	ditional information.	
RT I, LINE 2:					
NPCA'S COMMUNITY FUND GRANTS,	RECIPIENT	'S SUBMIT :	FINAL FINAN	CIAL REPORTS	
IMPACT REPORTS DOCUMENTING ACT	TIVITIES,	INCLUDING	PHOTOS AND	MEDIA.	

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

ZUZ3

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

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

Employer identification number

NATIONAL PEACE CORPS ASSOCIATION

58-1431113

Tavel to the appropriate box(ex) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel	Pa	rt I Questions Regarding Compensation			
Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Travel for companions Payments for business use of personal residence Travel for companions Payments for business use of personal residence Travel for companions Payments for business use of personal residence Travel for companions Payments for business use of personal residence Travel for companions Payments for business use of personal residence Travel for companions Payments for business use of personal residence Payments for pushess used used in the separation of the payment or reimbursing or all owing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the time schecked on line 1a 2 Payments for the organization used to establish the compensation of the organization to establish the compensation of the organization of the declorability of the payment for an expense personal payment payment of the payment for an expense payment for payment? During the year, did any person listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the retermination of the retermination o				Yes	No
First class or charter travel	1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
Travel for companions		Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
Tax indemnification and gross-up payments		First-class or charter travel Housing allowance or residence for personal use			l
Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No." complete Part III to explain 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and orficers, including the CEO/Executive Director, regarding the items checked on line 1a? 2		Travel for companions Payments for business use of personal residence			
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Written or properties of the compensation committee Written employment contract Written or a related organization or a related organization: Approval by the board or compensation committee Written or a related organization or a related organization: Participate in or receive payment from a supplemental nonqualified retirement plan? 4a		Tax indemnification and gross-up payments Health or social club dues or initiation fees			
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b		Discretionary spending account Personal services (such as maid, chauffeur, chef)			l
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b					l
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation committee Compensation committee Written employment contract X Independent compensation consultant Compensation survey or study X Form 990 of other organizations X Approval by the board or compensation committee Usual properties X Approval by the board or compensation committee X Independent compensation isseed on Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: 4 Participate in or receive payment or change-of-control payment? 4a	b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Will independent compensation consultant Compensation survey or study Form 990 of other organizations Will provide the part of the compensation or members of the compensation or a related organizations Receive a severance payment for many explemental nonqualified retirement plan? Participate in or receive payment from a supplemental nonqualified retirement plan? Participate in or receive payment from an equity-based compensation arrangement? West on any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: The organization? The organization? Shapped organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accr		reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u> </u>
Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee	2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Written employment Written employment contract Written employment Written employment contract Written employment Written em		trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Written employment Written employment contract Written employment Written employment contract Written employment Written em					
establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract	3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
Compensation committee		CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
X Independent compensation consultant		establish compensation of the CEO/Executive Director, but explain in Part III.			
X Form 990 of other organizations X Approval by the board or compensation committee 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? 4 Participate in or receive payment from a supplemental nonqualified retirement plan? c Participate in or receive payment from an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? f "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? f "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 7 X Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in					
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: 8 Receive a severance payment or change-of-control payment? 4 Participate in or receive payment from a supplemental nonqualified retirement plan? 4 Participate in or receive payment from an equity-based compensation arrangement? 4 If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? 5 Propersons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? 5 Propersons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? 5 Propersons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? 6 Propersons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 7 For persons listed on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in					
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For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? f "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? f "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 Were any amounts reported on Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? f "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? f "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 Were any amounts reported on Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in					
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If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in					x
For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	b		UU		
not described on lines 5 and 6? If "Yes," describe in Part III 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	7				
 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in 	•		7		х
initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	g		•		_
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	J		8		х
	9				
	•	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

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 aren't 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.

(A) Name and Title		(B) Breakdown of W	V-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DANIEL BAKER	(i)	149,735.	0.	0.	7,500.	498.	157,733.	0.
ACTING PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
_	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							1 1/5 000) 0000

Part III Supplemental information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 3:
THE COMPENSATION PROCESS IS A HIGHLY PARTICIPATORY PROCESS, INCLUDING MORE
THAN 20 INTERVIEWS OF BOARD MEMBERS AND NPCA FULL-TIME STAFF THAT PROVIDE
INPUT BASED ON THE YEAR'S GOALS AS WELL AS OVERALL FEEDBACK AND PRIORITIES
MOVING FORWARD. THE EXECUTIVE COMMITTEE THEN CONDENSES AND SUMMARIZES THIS
INFORMATION AND PRESENTS IT TO THE BOARD WHO VOTE ON IT AND THEN THE LETTER
IS PRESENTED IN PERSON TO THE PRESIDENT.

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

NATIONAL PEACE CORPS ASSOCIATION

Employer identification number 58-1431113

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

BE; EMPOWERING MEMBERS AND AFFILIATE GROUPS TO THRIVE; AND AMPLIFYING

THE PEACE CORPS COMMUNITY'S GLOBAL SOCIAL IMPACT.

FORM 990, PART VI, SECTION A, LINE 6:

NPCA HAS ONE CLASS OF MEMBERS (INDIVIDUAL).

FORM 990, PART VI, SECTION A, LINE 7A:

NINE MEMBERS OF THE BOARD OF DIRECTORS ARE ELECTED BY NPCA MEMBERS FOR

THREE-YEAR TERMS ON A ROTATING THREE YEAR SCHEDULE (THREE PER YEAR); NINE

MEMBERS OF THE BOARD ARE ELECTED BY THE BOARD ITSELF FOR THREE-YEAR TERMS

ON A ROTATING THREE YEAR SCHEDULE (THREE PER YEAR); ONE MEMBER IS SELECTED

BY NPCA AFFILIATE GROUPS FOR A TWO-YEAR TERM; AND ONE MEMBER (THE PRESIDENT

& CEO) IS EX OFFICIO.

FORM 990, PART VI, SECTION B, LINE 11B:

THE TAX RETURN IS REVIEWED BY SENIOR MANAGEMENT. THE DRAFT 990 IS PRESENTED

TO THE FINANCE COMMITTEE FOR REVIEW. THE FINANCE COMMITTEE REVIEWS THIS

FORM AND ASKS QUESTIONS WHICH ARE ANSWERED BY THE PRESIDENT. A COPY OF THE

FINAL 990 IS SENT TO THE ENTIRE BOARD AFTER IT IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY THE BOARD OF DIRECTORS BEFORE FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

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

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2 Name of the organization **Employer identification number** NATIONAL PEACE CORPS ASSOCIATION 58-1431113 ALL BOARD MEMBERS, EMPLOYEES AND OFFICERS ARE ASKED TO DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST AT LEAST ONCE A YEAR. IF A BOARD MEMBER OR OFFICER HAS A CONFLICT, THEY RECUSE THEMSELF FROM DELIBERATING OR VOTING ON THAT MATTER. THE BOARD CHAIR MONITORS COMPLIANCE. FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE COMMITTEE ANNUALLY REVIEWS THE PRESIDENT'S COMPENSATION PACKAGE. THERE IS A HIGHLY PARTICIPATORY PROCESS, INCLUDING MORE THAN 20 INTERVIEWS OF BOARD MEMBERS AND NPCA FULL-TIME STAFF THAT PROVIDE INPUT BASED ON THE YEAR'S GOALS AS WELL AS OVERALL FEEDBACK AND PRIORITIES MOVING FORWARD. THE EXECUTIVE COMMITTEE THEN CONDENSES AND SUMMARIZES THIS INFORMATION AND PRESENTS IT TO THE BOARD, WHO VOTE ON IT, AND THE CHAIR, THEN PRESENTS THIS LETTER IN PERSON TO THE PRESIDENT. THE PROCESS FOR DETERMINING COMPENSATION FOR THE PRESIDENT TAKES PLACE ON AN ANNUAL BASIS BY THE EXECUTIVE COMMITTEE. FORM 990, PART VI, SECTION C, LINE 19:

NPCA MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. ALSO, THE DOCUMENTS ARE POSTED ON THE WEBSITE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

LOSSES ON UNCOLLECTIBLE PLEDGES -15,797.

Form **8868**

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Taxpayer identification number (TIN) Name of exempt organization, employer, or other filer, see instructions. Type or **Print** 58-1431113 NATIONAL PEACE CORPS ASSOCIATION File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 20 F ST NW, 7TH FL return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions 20001 WASHINGTON, DC Enter the Return Code for the return that this application is for (file a separate application for each return) 07 Application Is For Return | Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 12 05 Form 8870 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of \overline{DANIEL} \overline{BAKER} 20 F ST NW, 7TH FL - WASHINGTON, DC 20001 Telephone No. (202) 293-7728 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN)
. If this is for the whole group, check this If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15 , 20 24 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 23 or tax year beginning _____, 20 ____, and ending ___ If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

990-T Exempt Organization Business Income Tax Retur				n	OMB No. 1545-0047
			(and proxy tax under section 6033(e))		0000
		For ca	lendar year 2023 or other tax year beginning , and ending		2023
Departm Internal I	ent of the Treasury Revenue Service		Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)		Open to Public Inspection for 501(c)(3) Organizations Only
A	Check box if address changed.		Name of organization (Check box if name changed and see instructions.)	D Em	ployer identification number
	mpt under section	Print	NATIONAL PEACE CORPS ASSOCIATION		8-1431113
	501(c)(3)	or Type	Number, street, and room or suite no. If a P.O. box, see instructions.		oup exemption number e instructions)
=	408(e) 220(e)	.,,,,	20 F ST NW, 7TH FL	_	
=	408A530(a) 529(a)529A		City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20001	F	Check box if
			ok value of all assets at end of year		an amended return.
G C	neck organization	type	X 501(c) corporation 501(c) trust 401(a) trust Other trust	_ State	college/university
			6417(d)(1)(A) Applicable entity		
	neck if filing only to				ount from Form 3800
			ation filing a consolidated return with a 501(c)(2) titleholding corporation		
			ed Schedules A (Form 990-T) e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?		Yes X No
			d identifying number of the parent corporation	L	Yes NO
	ne books are in car		DANIEL BAKER Telephone number	(202	3) 293-7728
Parl			d Business Taxable Income	\ 202	7 233 7720
1			ess taxable income computed from all unrelated trades or businesses (see instructions)	1	0.
2				2	
3	Add lines 1 and 2			3	
4	Charitable contril		(see instructions for limitation rules)	4	0.
5	Total unrelated b	usiness	s taxable income before net operating losses. Subtract line 4 from line 3		
6	Deduction for ne	t opera	ting loss. See instructions	6	
7	Total of unrelated	d busin	ess taxable income before specific deduction and section 199A deduction.		
	Subtract line 6 from			7	
8			erally \$1,000, but see instructions for exceptions)		1,000.
9			eduction. See instructions		
10			lines 8 and 9	10	1,000.
11 Part			table income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	. 11	0.
	1 331 3 3111			Т.	
1			as corporations. Multiply Part I, line 11 by 21% (0.21)	. 1	0.
2			rates. See instructions for tax computation. Income tax on the amount on		
•			Tax rate schedule or Schedule D (Form 1041)		
3			ons		
4 5			instructions		-
6	Tax on noncome	nliant f	acility income. See instructions	6	
7			gh 6 to line 1 or 2, whichever applies	7	0.
Parl					
1a	Foreign tax credi	t (corpo	orations attach Form 1118; trusts attach Form 1116)		
b	Other credits (see				
С	General business	credit.	Attach Form 3800 (see instructions) 1c		
d	Credit for prior-ye	ear mini	mum tax (attach Form 8801 or 8827)	_	
е	Total credits. Ad			1e	
2	Subtract line 1e f	from Pa	rt II, line 7	2	0.
3a	Amount due from			_	
b	Amount due from			-	
C	Amount due from			_	
d	Amount due from			-	
e	Other amounts d	•			^
f 4			lines 3a through 3e	3f	0.
4			nd 3f (see instructions).		0.
5			x amount here lity paid from Form 965-A, Part II, column (k)		0.
	- GIT - GIT - GOO I	.an nab	pasa ann a ann a ao r g r aire ng doidinn (ny		

Page **2** Form 990-T (2023)

Part	III Tax and Payments (continued)				
6 a	Payments: Preceding year's overpayment credited to the current year	6a			
b	Current year's estimated tax payments. Check if section 643(g) election				
	applies	6b			
С	Tax deposited with Form 8868	6c			
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d			
е	Backup withholding (see instructions)	6e			
f	Credit for small employer health insurance premiums (attach Form 8941)	6f			
g	Elective payment election amount from Form 3800	6g			
h	Payment from Form 2439	6h			
i	Credit from Form 4136	6i			
j	Other (see instructions)	6j			
7	Total payments. Add lines 6a through 6j			7	
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached			8	
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed			9	
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpain	id		10	
11	Enter the amount of line 10 you want: Credited to 2024 estimated tax		Refunded	11	
Part	IV Statements Regarding Certain Activities and Other Informatio	n (see instruction	ons)		

•	At any time during the 2023 calendar year, did the organization have an interest in	or a signature or other authority	res	NC
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the	e organization may have to file		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter t	he name of the foreign country		
	here			Х
2	During the tax year, did the organization receive a distribution from, or was it the gr	antor of, or transferor to, a		
	foreign trust?			X
	If "Yes," see instructions for other forms the organization may have to file.			
3	Enter the amount of tax-exempt interest received or accrued during the tax year	\$		
4	Enter available pre-2018 NOL carryovers here \$ Do no	ot include any post-2017 NOL carryover		
	shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by	y any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-20	17 NOL carryovers. Don't reduce		
	the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17	for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover		
	541800	\$ 4,154.		
		\$		
		\$		

			· · · · · · · · · · · · · · · · · · ·	4
		Business Activity Code	Available post-2017 NOL carryover	
		541800	\$ 4,154.	
			\$	ł
			\$	i
			\$	
6 a	Reserved for future use			
b	Reserved for future use			
D	V C. malamandal	lada was aki a sa		

Part V Supplemental Information

Provide any additional information. See instructions.

Sign	Under penalties of perjury, I declare that I have examin correct, and complete. Declaration of preparer (other the					wledge and belie	f, it is true,		
Here			PRESI	DENT & C	ΞΟ	-	May the IRS discuss this return with the preparer shown below (see instructions)? Yes No		
	Signature of officer	Date	Title			instructions)?	X Yes	No	
	Print/Type preparer's name	Preparer's signature		Date	Check	if PTIN			
Paid					self-employe	d			
Prepare	, GLENN MILLER, CPA	GLENN MILLE	R, CPA	10/29/24		P00	0086726	;	
Use Only		LLP			Firm's EIN	39-	-097403	1	
000 01	419 N LEE								
	Firm's address ALEXANDRI	A, VA 22314-	2301		Phone no.	(703)	519-09	90	
	·	·		·			000 T	,	

Form **990-T** (2023)

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

NATIONAL PEACE CORPS ASSOCIATION

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

501(c)(3) Organizations Only

B Employer identification number

58-1431113

C Unrelated business activity code (see instructions) 541800 D Sequence.								1 of 1	
<u>E 1</u>	E Describe the unrelated trade or business REVENUE FROM ADVERTISEMENTS								
Pa	rt I Unrelated Trade or Business Income	es	(C) Net						
1a	Gross receipts or sales								
b		1c							
2	Cost of goods sold (Part III, line 8)	2							
3	Gross profit. Subtract line 2 from line 1c	3							
4 a	Capital gain net income (attach Schedule D (Form 1041 or Form								
	1120)). See instructions	4a							
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b							
С		4c							
5	Income (loss) from a partnership or an S corporation (attach								
	statement)	5							
6	Rent income (Part IV)	6							
7	Unrelated debt-financed income (Part V)	7							
8	Interest, annuities, royalties, and rents from a controlled								
	organization (Part VI)	8							
9	Investment income of section 501(c)(7), (9), or (17)								
	organizations (Part VII)	9							
10	Exploited exempt activity income (Part VIII)	10	4 -			1.4	000	1.42.001	
11	Advertising income (Part IX)	11	15	7,9	90.	14,	989.	143,001.	
12	Other income (see instructions; attach statement)	12	1 -	7 0	00	1.4	000	142 001	
<u>13</u>	Total. Combine lines 3 through 12	13	12	1,9	90.	14,	989.	143,001.	
Pa	Tt II Deductions Not Taken Elsewhere. See instruct directly connected with the unrelated business in			ons d	on dedu	ictions. Ded	duction	ns must be	
	Companyation of officers directors and twisters (Dort V)						4		
1	Compensation of officers, directors, and trustees (Part X)						2		
2 3	Salaries and wages						3		
4	Repairs and maintenance Bad debts						4		
5	Bad debts Interest (attach statement). See instructions						5		
6							6		
7	Taxes and licenses Depreciation (attach Form 4562). See instructions			7	Ϊ		0		
8	Less depreciation claimed in Part III and elsewhere on return						8b		
9							9		
10	Depletion Contributions to deferred compensation plans						10		
11	Employee benefit programs						11		
12	Excess exempt expenses (Part VIII)						12		
13	Excess readership costs (Part IX)						13	143,001.	
14	Other deductions (attach statement)		SF	EE S	STATE	MENT 1	14	1,500.	
15	Total deductions. Add lines 1 through 14						15	144,501.	
16	Unrelated business income before net operating loss deduction. Su						10		
	column (C)						16	-1,500.	
17	Deduction for net operating loss. See instructions						17	0.	
18	Unrelated business taxable income. Subtract line 17 from line 16						18	-1,500.	
	Paperwork Reduction Act Notice, see instructions.						_	le A (Form 990-T) 2023	

	1
Page	2

Part	III Cost of Goods Sold Enter meth	nod of inventory valuati	on		1 ago <u>=</u>
1	Inventory at beginning of year	•		1	
2	Purchases			_	
3	Cost of labor				
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year			_	
8	Cost of goods sold. Subtract line 7 from line 6. Enter h			_	
9	Do the rules of section 263A (with respect to property p	•			Yes No
Part					
1	Description of property (property street address, city, s	tate, ZIP code). Check	if a dual-use. See instru	ctions.	
	A	,			
	В				
	c 🗆				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
_	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
-	percentage of rent for personal property exceeds				
С	50% or if the rent is based on profit or income) Total rents received or accrued by property.				
·	Add lines 2a and 2b, columns A through D				
	Add lines 2a and 2b, columns A through b	l			
3	Total rents received or accrued. Add line 2c, columns A	through D. Enter here	and on Part Lline 6 co	olumn (A)	0.
3	Deductions directly connected with the income	t through b. Litter here	and on rait i, line o, co	numm (A)	
4					
7	in lines 2a and 2b (attach statement)				
5	Total deductions. Add line 4, columns A through D. Er	nter here and on Part I	line 6 column (B)		0.
Part		e instructions)	inic o, column (b)		• • • • • • • • • • • • • • • • • • • •
1	Description of debt-financed property (street address, of	,	heck if a dual-use. See i	nstructions	
•	A	nty, state, zn oodej. o	neon ii a daar ase. eee i	noti dottorio.	
	В				
	c \square				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed	,			
-	property				
3	Deductions directly connected with or allocable				
3	to debt-financed property				
	Straight line depreciation (attach statement)				
a					
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
_	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
_	financed property (attach statement)				
6	Divide line 4 by line 5	%	%		% %
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D).	. Enter here and on Par	t I, line 7, column (A)		0.
		ı	Т		
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A thr				0.
11	Total dividends-received deductions included in line	10			0.

1 Page 3

Part VI Interest, Ann	ાities, R	oyalties, and Re	ents Fro	m Contro	lled O	rganization	S (s	ee instruct	tions)		Page 3
·	•					xempt Contro					
Name of controll organization	ed	identification incom				al of specified nents made	5. Part of column 4 that is included in the controlling organization's gross income		in the aniza-	I COMMECTED WITH	
(1)											
(2)											
(3)											
(4)											
7 Tavabla lasans				Controlled Or	-	1	-£!.				al ati a sa alisa atl
7. Taxable Income	ir	Net unrelated ncome (loss) e instructions)		otal of specifications of the specification of the		that is inc controlling gross	luded	in the zation's		COI	ductions directly nnected with ne in column 10
(1)											
(2)											
(3)											
(4)											
						Add colum Enter here line 8, c	and o	n Part I,	Ent	er h	olumns 6 and 11. ere and on Part I, 8, column (B).
Totals								0.			0.
Part VII Investment	Income	of a Section 50	1(c)(7), (9), or (17)	Orgar	nization (s	ee ins	tructions)			
	scription of	income		2. Amou		3. Deduction directly connuctation (attach states	ected	4. Set (attach s	-asides tateme	٠ ا	5. Total deductions and set-asides (add cols 3 and 4)
(1)											
(2)											
(3)											
(4) Totals				Add amou column 2. here and or line 9, colu	Enter n Part I,						Add amounts in column 5. Enter here and on Part I, line 9, column (B).
Part VIII Exploited I	Exempt A	Activity Income,	Other 7	han Adve	rtising	Income	see in	structions)		
Description of exploit	ed activity:										
2 Gross unrelated busi	ness incom	e from trade or busi	ness. Ente	r here and or	n Part I,	line 10, colum	n (A)		2		
3 Expenses directly co	nnected wit	th production of unre	elated bus	iness income	. Enter l	nere and on Pa	art I,				
line 10, column (B)									3		
4 Net income (loss) from											
									4		
5 Gross income from a									5		
6 Expenses attributable									6		
7 Excess exempt expe											
4. Enter here and on	Part II, line	12							7		

Schedule A (Form 990-T) 2023

Part	IX Advertising Income				Tago 4
1	Name(s) of periodical(s). Check box if reporting two	or more periodicals on a c	onsolidated basis.	STATEM	ENT 3
	A X WORLDVIEW & ENEWS				
	В 🔲				
	c				
	D				
Enter a	mounts for each periodical listed above in the corresp	oonding column.		1	
		A	В	С	D
2	Gross advertising income				155.000
	Add columns A through D. Enter here and on Part I,	line 11, column (A)			157,990.
а	5	14,989.		1	
3	Direct advertising costs by periodical				14,989.
а	Add columns A through D. Enter here and on Part I,	line 11, column (B)			14,303.
4	Advertising gain (loss). Subtract line 3 from line			1	
7	For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column in				
	line 4 showing a loss or zero, do not complete				
	lines 5 through 7, and enter -0- on line 8	143,001.			
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is less				
	than line 6, enter -0-	256,746.			
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain on	1 40 004			
	line 4, enter the lesser of line 4 or line 7	<u></u> -			
а	Add line 8, columns A through D. Enter the greater of				1.42 0.01
Part	X Compensation of Officers, Director	rs and Trustees (as	a inaturational		143,001.
ı art	y compensation of Officers, Director	s, and musices (se	e instructions)	3. Percentage	4. Compensation
	1. Name	2. Title		of time devoted	attributable to
	II Name			to business	unrelated business
(1)				%	annotated bachiese
(2)				%	
(3)				%	
(4)				%	
	Enter here and on Part II, line 1				0.
Part	XI Supplemental Information (see instr	uctions)			

FORM 990-T	90-T (A) OTHER DEDUCTIONS			STATEMENT 1	
DESCRIPTIO	И			AMOUNT	
TAX PREPAR	1,500.				
TOTAL TO S		1,500.			
990-T SCH	A POST-201	LOSS DEDUCTION	STATEMENT 2		
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
12/31/18 12/31/19 12/31/21 12/31/22	1,500. 1,500. 500. 1,500.	846. 0. 0. 0.	654. 1,500. 500. 1,500.	654. 1,500. 500. 1,500.	
NOL CARRYOVER AVAILABLE THIS YEAR			4,154.	4,154.	

	SEPARATE PERIO A CONSOLIDAT		·	STATEMENT 3	
		GROSS INCOME	DIRECT COSTS	CIRC. INCOME	RDRSHIP COSTS
WORLDVIEW & ENEWS	- WORLDVIEW & ENEWS	119,815.	7,937.	9,077.	265,823.
	- WEBSITE SUBTOTAL	38,175. 157,990.	7,052. 14,989.	0. 9,077.	0. 265,823.