Form	990
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** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information						Inspection		
AI	For th	ne 2023 calend	lar year, or tax year beginning and	ending				
	Check if applicable: C Name of organization D Employer identificat							
Address National Council of Nonprofits								
	Nam chan	ble Doing b	usiness as	1	52-1689643	3		
	retur	n Number	and street (or P.O. box if mail is not delivered to street address)	Room/suite				
	Final	n/ 1001	•	700E	(202)962-0			
_	termi ated	City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,975,369.		
	retur		ington, DC 20001		H(a) Is this a group retu			
	Appli tion pend		nd address of principal officer: Charles T. Delaney			Yes 🔀 No		
		same	as C above		H(b) Are all subordinates inclue	ded? Yes No		
1.	Tax-ex	xempt status:		or 527	If "No," attach a lis	t. See instructions		
	Vebs		councilofnonprofits.org		H(c) Group exemption r			
			X Corporation Trust Association Other	L Year	of formation: 1990 M S	State of legal domicile: DC		
Pa	art I	Summary		-		-		
Ð	1	Briefly describ	be the organization's mission or most significant activities: \underline{To} a	dvance	the vital ro	ole,		
Governance		capacit	y, and voice of charitable nonprof					
sr në	2	Check this bo	x if the organization discontinued its operations or dispos	sed of more	e than 25% of its net assets			
Ň	3					14		
			dependent voting members of the governing body (Part VI, line 1b)			14		
es	5		of individuals employed in calendar year 2023 (Part V, line 2a)			12		
Activities &	6		of volunteers (estimate if necessary)			14		
Act	7 a				<u>7a</u>	47,315.		
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11			0.		
					Prior Year	Current Year		
P	8		and grants (Part VIII, line 1h)		3,537,792.	1,816,526.		
Revenue	9		ice revenue (Part VIII, line 2g)		556,605.	554,402.		
ş	10		come (Part VIII, column (A), lines 3, 4, and 7d)		-20,993.	21,075.		
-	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		226.	36,310.		
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,073,630.	2,428,313.		
	13		milar amounts paid (Part IX, column (A), lines 1-3)		0.	836,450.		
	14		to or for members (Part IX, column (A), line 4)		0.	0.		
es	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)		1,478,154.	2,122,704.		
sus	16a		undraising fees (Part IX, column (A), line 11e)	10	0.	0.		
Expenses	. b		ing expenses (Part IX, column (D), line 25) 143,8			077 440		
ш	1		es (Part IX, column (A), lines 11a-11d, 11f-24e)		706,717.	877,442.		
	18		es. Add lines 13-17 (must equal Part IX, column (A), line 25)	·····	2,184,871.	3,836,596.		
	19	Revenue less	expenses. Subtract line 18 from line 12		1,888,759.	-1,408,283.		
Net Assets or					eginning of Current Year	End of Year		
Sset	20		Part X, line 16)		8,767,035.	7,843,167.		
3t A	21		s (Part X, line 26)		980,365.	1,252,948.		
		Net assets or	fund balances. Subtract line 21 from line 20		7,786,670.	6,590,219.		
	art II				and and to the boot of a large	and a data shared to a Park 1971		

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

Sign	Date									
	Charles T. Delaney, President & CEO									
	Type or print name and title									
	Print/Type preparer's name	Preparer's signature		Date	Check	PTIN				
Paid	Stacy Cullen				if self-employed	P00974308				
Preparer	Firm's name Aprio, LLP				Firm's EIN 57-	1157523				
Use Only	Firm's address 111 Rockville Pik	e Suite 600								
	Rockville, MD 208		Phone no. (301) 231-6200						
May the IRS discuss this return with the preparer shown above? See instructions X Yes No										
LHA For	LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)									

See Schedule O for Organization Mission Statement Continuation

Form	1990 (2023) National Council of Nonprofits	52-1689643	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
•	To advance the vital role, capacity, and voice of charit	able nonprof	. +
		able nonpror	<u> 1 </u>
	organizations through our state and national networks.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	XNo
	If "Yes," describe these new services on Schedule O.		
~			XNo
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		
	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 other	rs, the total expenses, a	nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses 1, 674, 861. including grants of 836, 450.) (Reven	we\$ 320,	933.)
	Connect through Network Support: As the largest network		/
	in North America, NCN is uniquely positioned to convene		
	community-based organizations across the country by work		
	through our unique core network of 52 state and regional		
	of nonprofits and their extended network of more than 30		
	members. Our network builds community and provides a for	um to identi	fy
	shared challenges and exchange successful strategies and	solutions	
	across state lines. Built on a foundation of trust, our		
	collectively respond swiftly when policy opportunities a		
	affecting nonprofits arise. In 2023, NCN initiated a pro		+ 0
			10
	investments in strengthening our network with the goal o	I IOSTERING	
	more resilient communities.		
4b	(Code:) (Expenses \$ 800, 575 • including grants of \$) (Reven	nue \$)
	Champion through Public Policy Advocacy: NCN champions t	he public go	od
	through our public policy work at the federal, state, an		
	We build the capacity of nonprofits to engage in everyda		
	improving lives and communities. We consistently deliver		
	analyses and effective strategies that nonprofits and po		0117
	on. In 2023, we submitted comments to Congress supportin		
	giving, supporting proposed federal grant reform legisla		
	opposing politicalization of charitable nonprofits; part	icipated in	
	federal rulemaking by submitting public comments regardi	ng DOL's	
	proposed overtime rules and OMB's federal grantmaking gu	idance; and	
	among other things, coordinated the nationwide state Non	profit	
	Legislative Caucus.	-	
4c		2.3.3	469.
10	(Code:) (Expenses \$380,558. including grants of \$) (Reven Inform through Communications: NCN is the trusted go-to	resource for	
	and about the nonprofit sector. We provide timely, pract	igal	
	information that nonprofits and foundations depend on an		1r
	everyday operations. Our publications illuminate the cha		
	nonprofits face and how the public good depends upon a f		
	nonprofit sector. We create and curate content in our ne	wsletters,	
	website, social media, and reports to amplify nonprofit		
	bring awareness to critical issues like historic pandemi		
	funding, workforce shortages, and nonpartisan civic enga		
	2023, we collected and analyzed data from the field ofte		
	nationwide on the persistent nonprofit workforce shortag		
	newly-revamped website received more than 4.8 million vi	ews.	
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ 43,993. including grants of \$) (Revenue \$)	
4e	Total program service expenses 2,899,987.	,	
		Eorm 9	90 (2023)
332000	2 12-21-23		- (2020)

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Form 990 (of	Nonprofits
Part IV	Che	cklist of Required Sche	dules		

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		<u>X</u>
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	X	
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		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			77
-	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
	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	10		х
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		
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,	11a	x	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
D		11b		х
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	x	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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			
	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,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
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 Part IV
 Checklist of Required Schedules (continued)
 Page 4

			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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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
	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
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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		
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?			
-	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 13			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
-	(gambling) winnings to prize winners?	1c	х	
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Form	990 (2023) National Council of Nonprofits	52-16	89643	Р	_{age} 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a	L2		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2 b	X	
				X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	<u>3b</u>	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	iccount)?	<u>4a</u>		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 A	ccounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction				X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		. <u>5c</u>		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e organization solicit			
	any contributions that were not tax deductible as charitable contributions?		. <u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons or gifts			
	were not tax deductible?		. <u>6b</u>		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payo	r? 7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as required			
	to file Form 8282?		. 7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as required?	7g	N/	A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a Form 1098-C	? 7h	N/	A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
	sponsoring organization have excess business holdings at any time during the year?	N/A	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?	N/A	. 9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	N/A	. 9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders N/A	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the yearN/A	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?	N/A	. 13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
с	Enter the amount of reserves on hand	13c			
14a			. 14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	le O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
	excess parachute payment(s) during the year?		. 15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?			X
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		. 17		
_	If "Yes," complete Form 6069.				
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Form 990	(2023)
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National Council of Nonprofits

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

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

1a Enter the number of voting members of the governing body at the end of the tax year 1a 1a 14 1b Enter the number of voting members included on line 1 all above, who are independent 1b 1d 2 Did any officient, functed, or key employee have a family relationship of a Lusiess relationship with any other of forcer, functer, nustees, or key employee have a family relationship of a Lusiess relationship with any other of forcer, director, nustees, or key employees to a management duries customarily performed by or under the direct supervision of officers, directors, nustees, or key employees to the governing body and the points form 900 was filed? 2 5 Did the organization become aware during the year of a significant diversion of the organization aware during the year of a significant diversion of the organization have members, stockholders? 6 6 6 Did the organization have members, stockholders? 6 8 X 7 Did the organization have members, stockholders? 7 7 X X 6 Each committee with authority to act or behalf of the governing body? 8 X 8 X 7 Did the organization have wentber, stockholders, or attration about policies not ensured by members, stockholder, or approx 7 X 8 Did the organization have wentber polices an						Yes	No
boy displate brad authority to an examite or similar committies, explain on Schelate 0. 1 <td< td=""><td>1a</td><td>Enter the number of voting members of the governing body at the end of the tax year</td><td>1a</td><td>14</td><td></td><td></td><td></td></td<>	1a	Enter the number of voting members of the governing body at the end of the tax year	1a	14			
b Inter the number of voting members included on line 1a, above, who are independent		If there are material differences in voting rights among members of the governing body, or if the governing					
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National Council of Nonprofits

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.

• 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.

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

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(15) Caroline Altman Smith1.00X0.0.0.Board MemberX1.000.0.0.0.(16) Jeanne Tedrow1.00X0.0.0.0.Board MemberX0.0.0.0.0.(17) Sean Thomas-Breitfeld1.00X0.0.0.Board MemberX0.0.0.0.	-	1.00								•	
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(16) Jeanne Tedrow1.000.0.Board MemberX0.0.0.(17) Sean Thomas-Breitfeld1.00X0.0.Board MemberX0.0.0.		1.00								•	
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(17) Sean Thomas-Breitfeld 1.00 X 0. 0. 0. 0.		1.00								•	
Board Member X 0.		1 00	X						0.	Ο.	<u> </u>
		L 1.00								•	
			Х						0.	υ.	

332007 12-21-23

Form 990 (2023)

	Council								52-1689	643 Page 8				
(A) Name and title	stees, Key Emp (B) Average hours per week	(C) Posi (do not check r box, unless per			eck more than one compensation compensation						(C) (D) Position t check more than one less person is both an ord o director (trustee)	(D) Reportable	, ,	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutio nal trustee	Officer	Key em ployee	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				
(18) Leon Wilson	1.00				_									
Board Member		Х						0.	0.	0.				
(19) Laurie Wolf	1.00													
Board Member		X						0.	0.	0.				
									0	102 196				
1b Subtotal c Total from continuation sheets to Part V	/II, Section A							1,175,117.	0.	0.				
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but 								1,175,117.	0.	103,186.				
compensation from the organization		056	11510	uat	JOVE	<i>y</i> wii	016	ceived more than \$100		5				
3 Did the organization list any former office			-	•	-		Ŭ	• •		Yes No				
line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> 4 For any individual listed on line 1a, is the	sum of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from t	he organization	3 X				
and related organizations greater than \$15Did any person listed on line 1a receive or										4 X				
rendered to the organization? If "Yes." co	-				-			-		5 X				
Section B. Independent Contractors						911				· · ·				
1 Complete this table for your five highest of										ation from				
the organization. Report compensation fo (A)	r the calendar ye	ear e	endir	ng w	ith c	or wi	thin	<u>i the organization's tax y</u> (B)	ear.	(C)				
Name and busines	s address	N	ONE	2				Description of s	services	Compensation				
							\neg							
							+							
2 Total number of independent contractors	(including but no	ot lin	nitec	d to t	thos	se lis	ted	above) who received m	ore than					
\$100,000 of compensation from the organ					0)								

Form **990** (2023)

332008 12-21-23

Ра	rt VII	Statement of Rev	venue					
		Check if Schedule O o	contains a respor	nse or note to any lin		(=)	(2)	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a b c d f g	Fundraising events Related organizations Government grants (contri- All other contributions, gifts, similar amounts not included Noncash contributions included in	1b 1c 1d ibutions) 1e grants, and labove	1,816,526.	1 016 526			
a C	n	Total. Add lines 1a-1f		Business Code	1,816,526.			
	• •	Momborahin Du	0.0	900099	320,933.	320 033		
ice	2 a	Membership Du		900099	233,469.	320,933. 186,154.	47,315.	
ierv ue	a	<u>Program/Servi</u>			255,409.	100,194.	47,515.	
m S ven	C L							
gra Re	d							
Program Service Revenue	e f	All other program service						
-		Total. Add lines 2a-2f			554,402.			
	3	Investment income (includ						
	•	·	0		94,271.			94,271.
	4	Income from investment of						- ,
	5	Royalties						
		··· ·	(i) Real	(ii) Personal				
	6 a	Gross rents	6a					
		Less: rental expenses	6b					
		Rental income or (loss)	6c					
		Net rental income or (loss))					
	7 a	Gross amount from sales of	(i) Securitie	es (ii) Other				
		assets other than inventory	_{7a} 473,86	0.				
	b	Less: cost or other basis						
ne		and sales expenses	_{7b} 547,05	6.				
Revenue	с	Gain or (loss)	7c - 73,19	6.				
Re		Net gain or (loss)			-73,196.			-73,196.
Other	8 a	Gross income from fundraisin including \$ contributions reported on Part IV, line 18	of line 1c). See	8a				
	b	Less: direct expenses		8b				
		Net income or (loss) from						
		Gross income from gamin	u					
		Part IV, line 19	-	9a				
	b	Less: direct expenses		9b				
	с	Net income or (loss) from	gaming activities					
	10 a	Gross sales of inventory, I	ess returns					
		and allowances		10a				
	b	Less: cost of goods sold		10b				
	с	Net income or (loss) from	sales of inventory	/				
s				Business Code				
e e	11 a	Miscellaneous		900099	36,310.			36,310.
scellaneo Revenue	b							
cell }eve	С							
Miscellaneous Revenue	d	All other revenue						
_		Total. Add lines 11a-11d			36,310.		48.045	
	12	Total revenue. See instruction	ons		2,428,313.	507,087.	47,315.	57,385.
33200	9 12-21-	-23						Form 990 (2023)

National Council of Nonprofits

Form 990 (2023)

10 2023.04000 NATIONAL COUNCIL OF NONPR 48785001

52-1689643 Page 9

National Council of Nonprofits Part IX Statement of Functional Expenses

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

ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B)	(C)	(D)
50, 50, and 100 of Fait VIII.	rotal expensee	Program service expenses	Management and general expenses	Fundraising expenses
Grants and other assistance to domestic organizations		ľ		
and domestic governments. See Part IV, line 21	836,450.	836,450.		
Grants and other assistance to domestic				
individuals. See Part IV, line 22				
Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				
Benefits paid to or for members				
Compensation of current officers, directors,				
	483,906.	345,480.	113,595.	24,831.
	1 402 026	1 000 204		70 041
-	1,403,936.	1,002,324.	329,5/1.	72,041.
	10 101	21 10E	11 212	0 490
				2,4/3.
				2,473. 2,636. 6,943.
	135,304.	90,599.	51,702.	0,943.
	200	71	110	11.
				5,869.
	110,004.	55,410.	05,005.	5,009.
	18 860		18 860	
	10,000.		10,000	
	121 353.	43 131.	71 799.	6,423.
	121/0001	10,1010	, _ , , , , , , , , , , , , , , , , , ,	0/120
	40.997.	23,177.	16,678,	1,142.
			-	466.
	244,710.	173,685.	57,873.	13,152.
			-	45.
	•		,	
,				
	102,919.	94,113.	8,806.	
	196.	70.	116.	10.
Depreciation, depletion, and amortization	80,741.	57,907.	18,616.	4,218.
Insurance	4,817.	1,401.	3,293.	123.
Other expenses. Itemize expenses not covered				
above. (List miscellaneous expenses on line 24e. If				
amount, list line 24e expenses on Schedule 0.)				
Books and Publications	47,306.	41,540.	3,986.	1,780.
				1,586.
Staff Development		6,114.	3,514.	69.
Dues and Subscriptions	1,470.	1,470.		
· · · · · · · · · · · · · · · · · · ·				
Total functional expenses. Add lines 1 through 24e	3,836,596.	2,899,987.	792,791.	143,818.
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)				
	and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (nonemployees): Management Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) Advertising and promotion Office expenses Information technology Royalties Occupancy Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on Schedule 0.) Books and Publications Payroll Processing Staff Development Dues and Subscriptions All other expenses. Complete this line only if the organization reported in column (B) joint costs from a combined	and domestic governments. See Part IV, line 21 836,450. Grants and other assistance to domestic individuals. See Part IV, line 22	and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 12 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons described in section 4958(c)(3)(B) Other salaries and wages 1,403,936. 1,002,324. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions; Other employee benefits Legal Accounting Lobbying Professional fundraising services. See Part V, line 17 Investment management fees Column (A), amount, list line 11g expenses on Sch OL) Advertising and promotion Office expenses Conferences, conventions, and meetings Interest Payments of fravel or entertainment expenses Cocupancy Travel Payments to affiliates Depreciation, depletion, and amortization Inservance Depreciation, depletion, and amortization Inservance Dues and Public afficials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Inservance Dues and Public afficials Payments to affiliates Payments t	and domestic governments: See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key emptoyees Compensation of current officers, directors, trustees, and key emptoyees Compensation of current officers, directors, trustees, and key emptoyees Compensation of disR(I(1)) and persons (as defined under section 4958(I(1)) person (as defined under section 4958(I(1)) Anagement Legal Accounting Legal Accounting Legal Accounting Lobbying Professional fundraling services. See Part IV, line 17 Investment management tese 400, 997. 23, 177. 16, 678. 110, 884. 39, 410. 45, 853. 2, 787. Payrol 11 as difficuent expenses 400, 997. 23, 177. 16, 678. 114, 229. 9, 468. 4, 716. Payments of travel or entertainment expenses Conferences, conventions, and meetings Interest Depreciation, depletion, and amortization Boxest and Public officials 102, 919. 94, 113. 8, 806. 102, 919. 94, 113. 8, 806. 104, 817. 1,

2023.04000 NATIONAL COUNCIL OF NONPR 48785001

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33

Total liabilities and net assets/fund balances

8,767,035.

33

7,843,167.

Form 990 (2023)

- orm 990 ((2023)	National	Council	of	Nonprofits
Part X	Balance Shee	et			

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

(A) Beginning of year (B) End of year 1 1 Cash - non-interest-bearing 2,932,211. 1,716,238. 2 2 Savings and temporary cash investments 2,603,780. 1,666,243. Pledges and grants receivable, net 3 3 9,521. 14,650. 4 4 Accounts receivable, net Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 7 Assets 8 Inventories for sale or use 8 26,042. 73,466. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 670,150. basis. Complete Part VI of Schedule D _____ 10a 392,204. 354,499. 277,946. b Less: accumulated depreciation 10b 10c 3,705,134. 2,242,281. Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 544,134. 334,923. 14 14 Intangible assets 54,567. 54,567. 15 15 Other assets. See Part IV, line 11 8,767,035. 7,843,167. 16 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 131,102. 646,353. Accounts payable and accrued expenses 17 17 18 18 Grants payable 28,860. 13,735. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties 23 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 820,403. 592,860. 25 of Schedule D 980,365. 1,252,948. 26 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 4,923,976. 5,165,390. 27 27 Net assets without donor restrictions Net assets with donor restrictions 2,621,280. 1,666,243. 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 6,590,219. Total net assets or fund balances 7,786,670. 32 32

Form 990		52-1	689643	Pag	_{ge} 12	
Part X	Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1 Tot	al revenue (must equal Part VIII, column (A), line 12)	1	2,428			
2 Tot	al expenses (must equal Part IX, column (A), line 25)	2	3,836			
3 Re	venue less expenses. Subtract line 2 from line 1	3	-1,408			
4 Ne	t assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,786			
5 Ne	t unrealized gains (losses) on investments	5	211	L,8	32.	
6 Do	nated services and use of facilities	6				
7 Inv	estment expenses	7				
8 Pri	or period adjustments	8				
9 Oth	ner changes in net assets or fund balances (explain on Schedule O)	9			0.	
10 Ne	t assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
col	umn (B))	10	6,590),2	<u>19.</u>	
Part X	I 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 Acc	counting method used to prepare the Form 990: 🗌 Cash 🛛 🛛 Accrual 🗌 Other		_			
lf ti	ne organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a We	re the organization's financial statements compiled or reviewed by an independent accountant?		2a		X	
lf "`	Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
sep	parate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			x		
b We	b Were the organization's financial statements audited by an independent accountant?					
lf "`	Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,				
	nsolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
	Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the					
	iew, or compilation of its financial statements and selection of an independent accountant?		2c	Х	<u> </u>	
	ne organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.				
	a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	form Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X	
	Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi					
or a	audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000		

Form **990** (2023)

SCHEDULE A (Form 990)	Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Department of the Treasury Internal Revenue Service	Attach to Form 990 or Form 990-EZ.
	Go to www.irs.gov/Form990 for instructions and the latest information.
Name of the organizati	on
	National Council of Nonprofits
Part I Reason	for Public Charity Status. (All organizations must complete this part.) See instruction

Part	tl	Reason for Public Charity Status. (All organizations must complete this part.) See instructions.
The or	rgani	ization is not a private foundation because it is: (For lines 1 through 12, check only one box.)
1 [A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)
з [A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 [A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,
		city, and state:
5 🗌		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).
7 [X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in
		section 170(b)(1)(A)(vi). (Complete Part II.)
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9		An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college
		or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or
		university:
10		An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from
		activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment
		income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.
_		See section 509(a)(2). (Complete Part III.)
11		An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
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.
а		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 b 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.

с	Type III functionally integrated.	A supporting	organization operated in	connection with,	and functionally	integrated with,
	its supported organization(s) (see	instructions).	You must complete Pa	rt IV, Sections A	, D, and E.	

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d 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.

e	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.

f Enter the number of supported organizations

g Provide the following information	n about the supporte	d organization(s).				
(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed	(v) Amount of monetary	(vi) Amount of other
organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
		above (see instructions))	100			
Total						

OMB No. 1545-0047

/U Open to Public Inspection

Employer identification number 52-1689643

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National Council of Nonprofits

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization 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	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	1374043.	2245779.	3436353.	3537792.	1816526.	12410493.	
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	1374043.	2245779.	3436353.	3537792.	1816526.	12410493.	
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)						5253018.	
6	Public support. Subtract line 5 from line 4.						7157475.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
	Amounts from line 4	1374043.	2245779.	3436353.	3537792.	1816526.	12410493.	
	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	818.	1,731.	1,437.	73,980.	94,271.	172,237.	
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.)	3,211.	1,039.	1,319.	226.	36,310.	42,105.	
11	Total support. Add lines 7 through 10						<u>42,105.</u> 12624835.	
12	Gross receipts from related activities,	etc. (see instructio	ons)			12		
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, t	fourth, or fifth tax y	/ear as a section 5	01(c)(3)		
	organization, check this box and stop	bhere						
Sec	ction C. Computation of Publi	c Support Per	centage					
14	Public support percentage for 2023 (I	ine 6, column (f), d	ivided by line 11, c	column (f))		14	56.69 %	
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	<u>55.78 %</u>	
1 6a	33 1/3% support test - 2023. If the o	organization did no	t check the box or	n line 13, and line ⁻	14 is 33 1/3% or m	ore, check this bo	x 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 qual	ifies as a publicly s	supported organization	ation				
17a	7a 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 te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization	-		
b	10% -facts-and-circumstances test	- 2022. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or	
	more, and if the organization meets th	ne facts-and-circum	nstances test, cheo	ck this box and st	t op here. Explain i	n Part VI how the		
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	ation		
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s	
						Schedule A	(Form 990) 2023	

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	Schedule A	Form	990) 2023
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Schedule A (Form 990) 2023National Council of NonprofitsPart IIISupport 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	3 (f) Total
1	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 bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	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	3 (f) Total
	Amounts from line 6						
	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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	he organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) orgar	ization,
_	check this box and stop here						
	ction C. Computation of Publ		•			<u> </u>	
	Public support percentage for 2023 (•	column (f))		15	%
_	Public support percentage from 2022					16	%
	ction D. Computation of Inves		•			1 1	
	Investment income percentage for 20			ne 13, column (f))		17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2023. If the						ine 17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che						ition
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins		
33202	23 12-21-23		16			Sched	dule A (Form 990) 2023

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Sche	edule A (Form 990) 2023 National Council of Nonprofits	52-1
Pa	rt 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.)	
Sec	tion 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.	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	
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		
	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.	
С	Did the organization support any foreign supported organization that does not have an IRS determination	
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used	
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	
_	purposes.	
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	
h	was accomplished (such as by amendment to the organizing document).	
D	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?	
~	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	
Ŭ	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.	
с	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section	

1

2

За

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

10b Schedule A (Form 990) 2023

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4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated

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

supporting organizations)? If "Yes," answer line 10b below.

Schedule A (Form 990) 202

Section A. All Suppo

Sec	tion B. Type I Supporting Organizations				
	detail in Part VI.	11	lc		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide				
	A family member of a person described on line 11a above?	11	lb		
	11c below, the governing body of a supported organization?	1	la		
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and				
11	Has the organization accepted a gift or contribution from any of the following persons?				
				Yes	No
Pa	rt IV Supporting Organizations (continued)				
	dule A (Form 990) 2023 National Council of Nonprolits	27-709	043	Pa	age 5

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> <i>effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported</i> <i>organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i>					
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.					
2	Did the organization operate for the benefit of any supported organization other than the supported					
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in					
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,					
	supervised, or controlled the supporting organization.	2				
Sec	tion C. Type II Supporting Organizations					

			1
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		-
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		
	or management of the supporting organization was vested in the same persons that controlled or managed		
	the supported organization(s).	1	
54	action D. All Type III Supporting Organizations		_

000	Sion B. Air Type in Supporting Organizations
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the
	organization's governing documents in effect on the date of notification, to the extent not previously provided?
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported

	organization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3	By reason of the relationship described 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		

	ns plaved in this regard.		
Section E. Type III Fu	nctionally Integrated	Supporting	Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the	e year (see instructions).
---	--	----------------------------

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с		The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).	_
---	--	---	---	---

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**

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.*

Yes No

3

Yes No

Yes No

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Schedule A	(Form 990)) 2023 (Nat	cional	Council	l of	Nonpr	ofits	
Part V	Type III	l Non	-Functionally	y Integrat	ed 509(a)(3	B) Sup	porting (Organizat	tions

1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	n Nov. 20, 1970 (<i>explain in</i> I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complet	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount				Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

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

Schedule A (Form 990) 2023

332026 12-21-23

Section D - Distributions

1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.	0		8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	IS	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2019				
b	Excess from 2020				
с	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				
				Sc	hedule A (Form 990) 2023

 Schedule A (Form 990) 2023
 National Council of Nonprofits

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

52-1689643 Page 7

Current Year

Schedule A (Form 990) 2023 National Council of Nonprofits Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 10	52-1689643 Pag	ge 8
Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any a (See instructions.)	lines 1 and 2; Part IV, Section C, Part V, Section B, line 1e; Part V,	
SCHEDULE A, PART II, LINE 1 - UNUSUAL GRANT		
THE ORGANIZATION RECEIVED AN UNUSUAL GRANT IN THE AMOUNT	OF \$2,000,000	
FROM THE CHICAGO COMMUNITY FOUNDATION IN TAX YEAR 2021. T	HEREFORE, THIS	
AMOUNT IS NOT INCLUDED ON SCHEDULE A, PART II, LINE 1.		
332028 12-21-23 21	Schedule A (Form 990) 2	2023

** PUBLIC DISCLOSURE COPY

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

Employer identification number

Sched	lu	le	В
Form 990)			

Department of the Treasury Internal Revenue Service

Name of the organization

1	National Council of Nonprofits	52-1689643
Organization type (check	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	\fbox 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	

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

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

General Rule

📙 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______\$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)	
Name of organization	

09240723 795476 4878500

Employer identification number

National Council of Nonprofits 52-1689643 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 770,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll 100,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 X Person Payroll 300,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 4 X Person Payroll 50,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 X Person Payroll 50,000. Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.) 323452 12-26-23 Schedule B (Form 990) (2023) 24

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a)						
No.	(b)	(c)	(d)			
from	Description of noncash property given	FMV (or estimate)	Date received			
Part I		(See instructions.)				
		_				
		—				
		\$				
(a)		(c)				
No.	(b)	FMV (or estimate)	(d)			
from Part I	Description of noncash property given	(See instructions.)	Date received			
Faiti						
		_				
		\$				
(2)						
(a) No.	(b)	(c)	(d)			
from	Description of noncash property given	FMV (or estimate)	Date received			
Part I		(See instructions.)				
		-				
		-				
		\$				
(a)		(-)				
No.	(b)	(c)	(d)			
from	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received			
Part I						
		—				
		\$				
(a)		(c)				
No.	(b)	FMV (or estimate)	(d)			
from Part I	Description of noncash property given	(See instructions.)	Date received			
Part I						
		_				
		 \$				
(a) No.	//->	(c)	(-1)			
from	(b)	FMV (or estimate)	(d) Data reasived			
Part I	Description of noncash property given	(See instructions.)	Date received			
		—				
		_				
		\$				

Name of organization

National Council of Nonprofits

52-1689643

323453 12-26-23

Schedule B (Form 990) (2023)

09240723 795476 4878500

25 2023.04000 NATIONAL COUNCIL OF NONPR 48785001

Schedule I	B (Form 990) (2023)		Page 4
Name of o	organization		Employer identification number
Natio	nal Council of Nonprofit	.s	52-1689643
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a)	ons to organizations described in secti through (e) and the following line entry. tharitable, etc., contributions of \$1,000 or les	on 501(c)(7), (8), or (10) that total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Polationship of transform to transform
			Relationship of transferor to transferee
(a) No.		[
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			_
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
·		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
·		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
323454 12-26			Schedule B (Form 990) (2023)

26 2023.04000 NATIONAL COUNCIL OF NONPR 48785001

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: Con 	• 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		n 990-EZ, Part VI, lir	ne 47 (Lobbving Activ	vities).	then:				
 Section 501(c)(3) organizations that 									
 Section 501(c)(3) organizations that 	l.	()/							
If the organization answered "Yes" on	· ·				•				
Tax) (see separate instructions), then:					_,, .,				
 Section 501(c)(4), (5), or (6) organiza 	• Section 501(c)(4), (5), or (6) organizations: Complete Part III.								
Name of organization	·			Emplo	over identification number				
Nationa	1 Council of Nonp	rofits			52-1689643				
Part I-A Complete if the org	ganization is exempt under	section 501(c)	or is a section 52	27 org					
1 Provide a description of the organiz	zation's direct and indirect political	campaion activities i	n Part IV						
2 Political campaign activity expendit	•			\$					
3 Volunteer hours for political campa									
3 Volumeer nours for pointcar campa				•••••					
Part I-B Complete if the org	ganization is exempt under	section 501(c)(3).						
1 Enter the amount of any excise tax				\$					
2 Enter the amount of any excise tax									
3 If the organization incurred a section									
b If "Yes," describe in Part IV. Part I-C Complete if the org	ganization is exempt under	section 501(c)	excent section ⁴	501(c)	(3)				
	•				(0).				
1 Enter the amount directly expended		-		Þ.					
2 Enter the amount of the filing organ		0		•					
				\$.					
3 Total exempt function expenditures				•					
line 17b									
4 Did the filing organization file Form									
5 Enter the names, addresses, and e			•						
made payments. For each organiza	· · ·				•				
contributions received that were pr				eparate	segregated fund or a				
political action committee (PAC). If	additional space is needed, provide	e information in Part	IV.						
(a) Name	(b) Address	(c) EIN	(d) Amount paid		(e) Amount of political				
			filing organizatio		contributions received and				
			funds. If none, ent	er -0	promptly and directly delivered to a separate				
					political organization.				
					If none, enter -0				

Political Campaign and Lobbying Activities

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

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

Schedule C (Form 990) 2023

OMB No. 1545-0047

2023

Open to Public

Inspection

LHA 332041 11-06-23

SCHEDULE C

Department of the Treasury

Internal Revenue Service

(Form 990)

_	dule C (Form 990) 2023 Natio:	nal Council of Nonprofits		689643 Page 2
Pa		n is exempt under section $\overline{5}01(c)(3)$ and file	ed Form 5768 (ele	ction under
	section 501(h)).			
Α	Check if the filing organization belon	gs to an affiliated group (and list in Part IV each affiliated	group member's name	e, address, EIN,
	expenses, and share of exces	s lobbying expenditures).		
B	Check if the filing organization check	ed box A and "limited control" provisions apply.		
		oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence pub	ic opinion (grassroots lobbying)	32,332.	
b	Total lobbying expenditures to influence a leg	gislative body (direct lobbying)	11,661.	
с	Total lobbying expenditures (add lines 1a and	11b)	43,993.	
d			2,855,994.	
е		s 1c and 1d)	2,899,987.	
f	Lobbying nontaxable amount. Enter the amo		294,999.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	not over \$500,000,	20% of the amount on line 1e.		
	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.		
	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.		
	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.		
	over \$17,000,000,	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% of	line 1f)	73,750.	
h	Subtract line 1g from line 1a. If zero or less, e	enter -0-	0.	
i	Subtract line 1f from line 1c. If zero or less, e	nter -0-	0.	
j	If there is an amount other than zero on eithe	r line 1h or line 1i, did the organization file Form 4720		
	reporting section 4911 tax for this year?			Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(e) Total							
2a Lobbying nontaxable amount	243,510.	253,835.	259,244.	294,999.	1,051,588.			
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					1,577,382.			
c Total lobbying expenditures	190,457.	62,063.	47,692.	43,993.	344,205.			
d Grassroots nontaxable amount	60,878.	63,459.	64,811.	73,750.	262,898.			
e Grassroots ceiling amount (150% of line 2d, column (e))					394,347.			
f Grassroots lobbying expenditures	103,395.	29,612.	23,467.	32,332.	188,806.			

Schedule C (Form 990) 2023

332042 11-06-23

Schedule C (Form 990) 2023 National Council of Nonprofits 52-16896 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 e	For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)	
			No	Amo	ount	
1 a	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: Volunteers?					
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	Media advertisements?					
d	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities?					
j	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5)	, or sec	tion		
	501(c)(6).					
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		. 2			
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		3			
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."				3, is	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political					
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
	Total		2c			
3			. 3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical				
	expenditures next year?		4			
_5	Taxable amount of lobbying and political expenditures. See instructions		. 5			
	t IV Supplemental Information					
Drovi	de the descriptions required for Part I.A. line 1: Part I.B. line 1: Part I.C. line 5: Part II.A (affiliated aroun	lict). Dort II A	lines 1 a	ad 9 (aaa		

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 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990) 2023

332043 11-06-23

SCHEDULE D	Supplemental Fi
(Form 990)	Complete if the organization Part IV, line 6, 7, 8, 9, 10, 11a,
Department of the Treasury Internal Revenue Service	Attach Go to www.irs.gov/Form990 for ir

inancial Statements

on answered "Yes" on Form 990, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. to Form 990.

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

OMB No. 1545-0047
0000
2023
Open to Public
Inspection

Employer identification number 52-1689643

Name of the organization

National Council of Nonprofits

Par			s or Accour	nts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(b) Eur	nds and other accounts
		(a) Donor advised funds	(b) Fur	
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in			
	are the organization's property, subject to the organization's			Yes No
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor of		•	
Par				
			, Part IV, line 7	
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recrea			important land area
	Protection of natural habitat	Preservation of	of a certified hi	storic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form	n of a conserva	
	day of the tax year.			Held at the End of the Tax Year
			<u>2a</u>	
b				
С	Number of conservation easements on a certified historic str		<u>2c</u>	
d	Number of conservation easements included on line 2c acqu			
	on a historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by th	ne organization	during the tax
	year			
4	Number of states where property subject to conservation eas	sement is located	_	
5	Does the organization have a written policy regarding the per		f	
	violations, and enforcement of the conservation easements in			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation ease	ements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserv	ation easemen	ts during the year
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170((h)(4)(B)(i)	
9	In Part XIII, describe how the organization reports conservati			
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial staten	nents that desc	cribes the
Der	organization's accounting for conservation easements.	Art Historical Tracquires or O	thay Simila	× Acceto
Par	t III Organizations Maintaining Collections of		ner Simia	r Assels.
	Complete if the organization answered "Yes" on Form	· ·		
1a	If the organization elected, as permitted under FASB ASC 95	, I		
	of art, historical treasures, or other similar assets held for put	olic exhibition, education, or research in t	furtherance of	public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these iter	ms.	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and	I balance sheet	works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fur	therance of pu	blic service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(ii) Assets included in Form 990, Part X			\$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financi	ial gain, provide	e
	the following amounts required to be reported under FASB A	SC 958 relating to these items:		
	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			\$
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.		Schedule D (Form 990) 2023
332051	09-28-23			
		30		

Sche		<u>l Council d</u>				ļ	52-16	89643	3 Р	_{age} 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical 1	Freasures, or O	Other S	Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of t	ne following that m	nake signi	ificant u	ise of its			
	collection items (check all that apply).									
а	Public exhibition	d	Loan or	exchange program	ı					
b	Scholarly research	e	e 🗌 Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explair	n how they furthe	r the organization'	s exempt	t purpos	se in Part	XIII.		
5	During the year, did the organization solicit of	r receive donations o	of art, historical ti	easures, or other s	similar as	sets		_		_
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		te if the organiza	tion answered "Ye	s" on For	rm 990,	Part IV, li	ne 9, or		
4.										
18	Is the organization an agent, trustee, custodi							7 ¥ • •		
L	on Form 990, Part X?						∟	Yes		_ No
b		and complete the lot	nowing table.					Amount	•	
с	Beginning balance					1c		, ano an		
	Additions during the year					1d				
	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on F					·		Yes		No
	If "Yes," explain the arrangement in Part XIII.									
Par										
		(a) Current year	(b) Prior year) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance									
b	Contributions									
с	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	•	e (line 1g, columr	ı (a)) held as:						
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С		%								
	The percentages on lines 2a, 2b, and 2c sho	•								
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held	and administered	for the			ſ	Yes	Na
	organization by:								res	No
	(i) Unrelated organizations?							3a(i)		
L	(ii) Related organizations?	tiona liatad aa kaavir						3a(ii)		
U A				٦?				3b		
Par	t VI Land, Buildings, and Equipm		whient lunds.							
	Complete if the organization answere). Part IV. line 11a	a. See Form 990. F	Part X. line	e 10.				
	Description of property	(a) Cost or o		ost or other	(c) Accu		Ы	(d) Bool	< value	e
	becomption of property	basis (investr	• •	sis (other)	• •	eciation	~	(4) 000	, vaiu	-
1a	Land									
	Buildings									
	Leasehold improvements			284,981.		2,23				47.
d	Equipment			120,109.		4,89			5,2	
e	Other			265,060.	4	5,07	72.		9,9	
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	<u>X, line 10c, colu</u>	<u>mn (B))</u>		<u></u>		27	7,9	46.

Schedule D (Form 990) 2023

		uncil of Nonp	rofits	52-1689643 Page 3
Part \				
	Complete if the organization answered "Yes"			
	cription of security or category (including name of security)	(b) Book value	(c) Method of valuation: C	Cost or end-of-year market value
	ncial derivatives			
	ely held equity interests			
(3) Othe	er			
(A)				
<u>(B)</u>				
(C)				
(D)				
<u>(E)</u>				
<u>(F)</u>				
<u>(G)</u>				
<u>(H)</u>				
Total. (C	ol. (b) must equal Form 990, Part X, line 12, col. (B)) /III Investments - Program Related.			
Part		an Farma 000 Dart IV/ lines	11. Cas Farma 000 Davit V line	10
	Complete if the organization answered "Yes" (a) Description of investment			
	(a) Description of investment	(b) Book value	(c) Method of Valuation: C	Cost or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (C Part I	ol. (b) must equal Form 990, Part X, line 13, col. (B)) X Other Assets			
Faili	Complete if the organization answered "Yes"	on Form 000 Dort IV/ line	11d See Form 000 Part V line	16
	-	Description	TTG. See Form 990, Part A, Ille	(b) Book value
	(a)	Description		
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Part)	Column (b) must equal Form 990, Part X, line 15, cc	ы. (В))		
i art /	Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form 990 Part	X line 25
	(a) Description of liability			(b) Book value
<u>1.</u>				
	Federal income taxes LEASE LIABILITY			592,860.
	DEASE DIADIDITI			592,000.
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				E00 060
	Column (b) must equal Form 990, Part X, line 25, cc			
	ility for uncertain tax positions. In Part XIII, provide		-	
orga	inization's liability for uncertain tax positions under	r FASB ASC 740. Check he	ere it the text of the footnote ha	s been provided in Part XIII 🚺

Schedule D (Form 990) 2023

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Sche	edule D (Form 990) 2023 National Council of Nong	profits		52-2	1689643 Pag	ge 4
Pa	t XI Reconciliation of Revenue per Audited Financial State	ements With F	Revenue per Ret	turn		
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	2,666,91	.7.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	211,832.			
b	Donated services and use of facilities	2b	45,632.			
с	Recoveries of prior year grants	2c				
d						
е	Add lines 2a through 2d			2e	257,46	54.
3	Subtract line 2e from line 1			3	2,409,45	53.
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	18,860.			
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c	18,86	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	2,428,31	3.
	(This must eduar to the observed) at the test			•		
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	tements With	Expenses per R	leturi		
Pa	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	tements With	Expenses per R	leturi	1	
Pa 1	TXII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	tements With e 12a.	Expenses per R	leturi 1		
	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	tements With e 12a.	Expenses per R	T	1	
1	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements	tements With	Expenses per R	T	1	
1 2	rt XII Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	tements With ⇒ 12a. 	Expenses per R	T	1	
1 2 a	TXII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	tements With 212a. 2a 2b	Expenses per R	T	1	
1 2 a	rt XII Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c	Expenses per R	T	1 3,863,36	8.
1 2 a b c	rt XII Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per R 45,632.	1 2e	3,863,36 45,63	82.
1 2 b c d	rt XII Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per R	1	1 3,863,36	82.
1 2 b c d e	rt XII Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	Expenses per R 45,632.	1 2e	3,863,36 45,63	82.
1 2 b c d e 3	TXII Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	Expenses per R	1 2e	3,863,36 45,63	82.
1 2 a b c d e 3 4	T XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	Expenses per R	1 2e	3,863,36 <u>45,63</u> 3,817,73	32. 36.
] 1 2 a b c d e 3 4 a b	T XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a 4b	Expenses per R 45,632. 18,860.	1 2e	3,863,36 <u>45,63</u> 3,817,73 18,86	<u>82.</u> 6.
1 2 d e 3 4 b c 5	TXII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	Expenses per R 45,632. 18,860.	1 2e 3	3,863,36 <u>45,63</u> 3,817,73	<u>82.</u> 6.

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

Part X, Line 2:

The Council evaluates uncertainty in income tax positions based on a
more-likely-than-not recognition standard. If that threshold is met, the
tax position is then measured at the largest amount that is greater than
50% likely of being realized upon ultimate settlement. If applicable, the
Council records interest and penalties as a component of income tax
expense. Tax years from inception to 2020 through the current year remain
open for examination by tax authorities.

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332054 09-28-23

SCHEDULE I (Form 990)	Go	irants and Oth vernments, ar ete if the organizatio	nd Individual	s in the Ŭni	ted States		OMB No. 1545-0047
Department of the Treasury			Attach to Form				Open to Public
Internal Revenue Service		Go to www.irs	s.gov/Form990 for	the latest information	ation.		Inspection
Name of the organization National	Council o	f Nonprofit	s				Employer identification number 52-1689643
Part I General Information on Grants			~				
 Does the organization maintain records criteria used to award the grants or ass Describe in Part IV the organization's p 	istance?	oring the use of grant	funds in the United	l States.			X Yes No
Part II Grants and Other Assistance to recipient that received more than	-				anization answered "Y	′es" on Form 990, Part	IV, line 21, for any
1 (a) Name 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
Florida Nonprofit Alliance 40 East Adams Street Jacksonville, FL 32202	46-1185150	501(c)(3)	82,300.	0.			Building organizational capacity
Montana Nonprofit Association 7 W. 6th Ave. Suite 610 Helena, MT 59624	73-1654969	501(c)(3)	91,790.	0.			Building organizational capacity
New Jersey Center for Nonprofits 3635 Quakerbridge Road, Suite 35 Mercerville, NJ 08619	22-2427364	501(c)(3)	70,500.	0.			Building organizational capacity
North Carolina Center for Nonprofits – 5800 Faringdon Pl – Raleigh, NC 27609	56-1729407	501(c)(3)	60,000.	0.			Developing new toolkit
Together SC PO Box 12903 Columbia, SC 29211	57-1057398	501(c)(3)	93,300.	0.			Building organizational capacity
2 Enter total number of section 501(c)/3)							5

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ______

3 Enter total number of other organizations listed in the line 1 table ...

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

Schedule I (Form 990) 2023

52-1689643 Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(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

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part I, Line 2:

Each institution that receives a grant applies through a competitive

program. An independent committee reviews the applications and makes award

recommendations. Each grant recipient is required to submit regular

progress reports, which are reviewed.

SC	HEDULE J	Compensation Information	ĺ	OMB No. 1	545-004	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	2	
•	•	Compensated Employees		20	ZJ	j –
D		Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction	
Nam	e of the organization		Employer	identificatio	on nui	nber
		National Council of Nonprofits	52-1	L689643	3	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropri	ate box(es) 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 c	harter travel Housing allowance or residence for perso	nal use			
	Travel for com	panions Payments for business use of personal re	sidence			
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	s			
	Discretionary :	spending account Personal services (such as maid, chauffer	ur, chef)			
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or p	rovision of all of the expenses described above? If "No," complete Part III to explain		1b		
2	Did the organization	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
3	Indicate which, if an	ny, of the following the organization used to establish the compensation of the organization's	i			
	CEO/Executive Dire	ctor. Check all that apply. Do not check any boxes for methods used by a related organization	on to			
	establish compensa	ation of the CEO/Executive Director, but explain in Part III.				
	Compensatior					
	Independent o	ompensation consultant X Compensation survey or study				
	Form 990 of o	ther organizations X Approval by the board or compensation of	ommittee			
4		any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re	-				37
а		e payment or change-of-control payment?				X
b	-	eive payment from a supplemental nonqualified retirement plan?				X
с		eive payment from an equity-based compensation arrangement?		4c		X
	If "Yes" to any of lir	es 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	0					
-)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	-			
5		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
_	contingent on the r					v
		ation?				X X
a		ation?		<u>5b</u>		
e		r 5b, describe in Part III. In Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any componentia	n			
0	contingent on the r	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation of compare of:	11			
~	•	0		60		x
		ation?				X
u		ation? r 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
'		es 5 and 6? If "Yes," describe in Part III		7		x
þ		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th				
8				8		x
9		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III				
3		153.4958-6(c)?		9		
For		on Act Notice, see the Instructions for Form 990.		ule J (Forn	n 900	2023
1.01	aper work neudel		Genet		. 550)	2020

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	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Charles T. Delaney	(i)	400,000.	50,000.	0.	16,500.	17,407.	483,907.	0.
President & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) David L. Thompson	(i)	223,660.	5,000.	0.	11,515.	10,769.	250,944.	0.
VP of Public Policy	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) Donna Murray-Brown	(i)	190,800.	5,000.	0.	9,848.	1,190.	206,838.	0.
VP of Strategy and Development	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) Richard Cohen	(i)	174,900.	10,000.	0.	9,293.	11,430.	205,623.	0.
Chief Operating Officer/Chief Commun	(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) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023

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.

Schedule J (Form 990) 2023

SCHEDULE O (Form 990)

Name of the organization

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.



52-1689643

National Council of Nonprofits

Form 990, Part I, Line 1, Description of Organization Mission:

our state and national networks.

Form 990, Part III, Line 4d, Other Program Services:

Legislative/Lobbying Activities: The National Council of Nonprofits

(NCN) exercises the First Amendment and statutory rights enjoyed by

charitable nonprofits to petition governments by engaging in direct and

grassroots lobbying regarding public policy proposals, including

legislation, that support the work of the nonprofit community and

oppose proposals that would hinder the ability of nonprofits to improve

the quality of life for individuals and communities.

NCN has elected to apply the cost-expenditure standards available under

section 501(h) of the Internal Revenue Code because that section

provides charitable nonprofit organizations with clear and objective

guidelines for ensuring full compliance with the law and their rights

and obligations to pursue their missions through advocacy. NCN and its

staff comply in all respects with federal lobbying disclosure laws.

Expenses \$ 43,993. including grants of \$ 0. Revenue \$ 0.

Form 990, Part VI, Section A, line 4:

The organization has updated its bylaws since the prior Form 990 was filed.

Form 990, Part VI, Section A, line 6:

The members of the board of directors are elected each year by full-status

state association members in good standing. For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

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Form 990, Part VI, Section A, line 7a:

Only state association members shall have the right to vote on the election of directors, and as provided by the D.C. Code on any amendment to the articles of incorporation; on the disposition of all or substantially all of the corporation's assets; or to approve any merger, consolidation, or dissolution. Other rights of members are determined by the board of directors of the National Council of Nonprofits from time to time.

Form 990, Part VI, Section A, line 7b:

The executive committee, a standing committee of the board, has the authority to make decisions on behalf of the board of directors on administrative matters and time-critical matters that arise between board meetings with the exception of actions reserved for members of the corporation, and the amendment of bylaws, approval of the annual budget and IRS Form 990, the hiring and release of the chief executive officer, and the receipt of the annual audit, which are reserved for the full board.

Form 990, Part VI, Section B, line 11b:

Annually, the organization's financial audit and draft Form 990 are

reviewed by the audit committee for approval, then presented to the board

of directors for final review and approval.

Form 990, Part VI, Section B, Line 12c:

Annually, the board and staff review and discuss the conflict-of-interest

policy and each board and staff member completes a conflict disclosure

questionnaire.

332212 11-14-23

Form 990, Part VI, Section B, Line 15:

The President & CEO's compensation is reviewed and approved by the board of

directors after a review of comparable data.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990:

AL, AR, CA, CT, FL, IL, KS, KY, ME, MD, MA, MI, MN, NH, NJ, NM, NY, NC, ND, OH, PA, RI, SC, VA, WV

WI

Form 990, Part VI, Section C, Line 19:

The organization provides documents it is legally required to make publicly

available via its website and upon request.