990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

For the 2023 calendar year, or tax year beginning , 2023, and ending , 20 C Name of organization From The Heart Productions Check if applicable: D Employer identification number Address change Doing business as 95-4445418 Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change Room/suite 1013 Harbor Blvd 53 (805)984-0098 Initial return Final return/terminated City or town, state or province, country, and ZIP or foreign postal code Oxnard, CA 93035 **G** Gross receipts \$6,305,718. Amended return H(a) Is this a group return for subordinates? Yes No Application pending F Name and address of principal officer: Carole Dean, 1013 Harbor Blvd, Oxnard, CA 93035 **H(b)** Are all subordinates included? Yes No) (insert no.) 4947(a)(1) or 527 Tax-exempt status: If "No," attach a list. See instructions. **X** 501(c)(3) 501(c) (Website: https://fromtheheartproductions.com H(c) Group exemption number Form of organization: X Corporation Trust Association Other L Year of formation: 2000 M State of legal domicile: CA Part I **Summary** Briefly describe the organization's mission or most significant activities: FROM THE HEART PRODUCTIONS, INC. 1 IS A NON-PROFIT ORGANIZATION DEDICATED TO FUNDING FILMS THAT ARE Activities & Governance UNIQUE AND MAKE A CONTRIBUTION TO SOCIETY. THESE ARE FILMS, CREATED BY 2 Check this box \Box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 7 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 1 6 Total number of volunteers (estimate if necessary) 6 3 Total unrelated business revenue from Part VIII, column (C), line 1 7a 0. Net unrelated business taxable income from Form 990-T, Part I line 11 7b 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 8 7,218,501 6,302,631. Revenue 9 Program service revenue (Part VIII, line 2g) 13,256. 911. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 7,317. 2,176. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 7,239,074 6,305,718. 13 Grants and similar amounts paid (Part IX, Volumn (A), lines 1–3) 6,859,123 5,855,888. 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 58,012 22,761. Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 300,481. 377,730. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 7,217,616. 6,256,379. 19 Revenue less expenses. Subtract line 18 from line 12 21,458. 49,339. Assets or **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 1,857,093. 1,979,960. 21 Total liabilities (Part X, line 26) . 874,430. 569,792. Net/ Fund 22 Net assets or fund balances. Subtract line 21 from line 20 982,663. 1,410,168. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 11/12/2024 Sign Signature of officer Here Carole Dean, President Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check | if **Paid** self-employed P00234726 Carl Hebeler. CPA Carl Hebeler. CPA 11/13/2024 **Preparer** Firm's name HEBELER ACCOUNTANCY CORPORATION Firm's EIN 71-0923209 Use Only Phone no. (310)312-87004223 Glencoe Ave, Marina Del Rey, CA 90292 May the IRS discuss this return with the preparer shown above? See instructions X Yes No

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Part		
	Check if Schedule O contains a response or note to any line in this Part III	×
1	Briefly describe the organization's mission:	
	FROM THE HEART PRODUCTIONS, INC.	
	IS A NON-PROFIT ORGANIZATION DEDICATED TO FUNDING FILMS THAT ARE	
	UNIQUE AND MAKE A CONTRIBUTION TO SOCIETY. THESE ARE FILMS, CREATED BY	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	0
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	0
	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, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 5,712,516. including grants of \$ 0.) (Revenue \$ 0.)	
	FISCAL SPONSORSHIP in 2023 continued to accomplish its purpose to	
	provide financial and administrative support to filmmakder from charitable	
	-	
	donations restricted for designated films. 408 new filmmakers were added	
	a 20% increase over prior years. This growth underscores our committment	
	to empower more filmmakers to tell impactful stories and reach wider	
	audience.60% of the new filmmakers raised funds through the program	
	who access fund from FTH which receive sponsor's tax deductible donations to FTH	
	<u> </u>	
	<u> </u>	
4b	(Code:) (Expenses \$ 200,000. including grants of \$ 200,000.) (Revenue \$ 0.)	
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4b		ds
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	90 (2023)			Page (
Part	IV Checklist of Required Schedules			
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	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	×	
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		×
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		×
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		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		×
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? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9	×	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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, Part VI	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
e f	Did the organization report an amount for othe Nabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i>	11e		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
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		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a b	Did the organization maintain an office, employees, or agents outside of the United States? 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	14a		×
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		×
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		×
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		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		×
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		×

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

X

X

20a

20b

Part	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	×	
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		×
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		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 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		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		
	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			
26	If "Yes," complete Schedule L, Part I	25b		×
	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		×
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		×
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? <i>If</i> "Yes," complete Schedule L, Part IV	28a		×
	A family member of any individual described in line 28a. Yes," complete Schedule L, Part IV	28b		×
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>			
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	30		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	0.		
	complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
0.5	or IV, and Part V, line 1	34		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
	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? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
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	×	
Part	V Statements Regarding Other IRS Filings and Tax Compliance	,		
	Check if Schedule O contains a response or note to any line in this Part V		. Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0		168	INO
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		

Part	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 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>×</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u>×</u>
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	0a		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		<u>×</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		_
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		×
g	If the organization received a contribution of qualified intellectual property, tid the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other yehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders	-		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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			
С	Enter the amount of reserves on hand	-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u></u>
_b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	4.5		
	If "Yes," see the instructions and file Form 4720, Schedule N.	15		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.	10		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			
-	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (2023) Page **6**

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

Part VI

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 × Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 × Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 × 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 × Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a × Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b × Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b × Is there any officer, director, trustee, or key employee listed in Part W. Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 × Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a **10a** Did the organization have local chapters, branches, or affiliates? × If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations accommon sistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a × **b** Describe on Schedule O the process, if any, and by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a × Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b × Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X 13 Did the organization have a written whistleblower policy? 13 × 14 × 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . 15a × 15b × If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a × b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ☐ Upon request X Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records. 20 Carole Dean, 1013 Harbor Blvd, Oxnard, CA 93035 (805)984-0098

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.

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

		(C)								
(A)	(B)		Position (do not check more than one				(D)	(E)	(F)	
Name and title	Average						Reportable	Reportable	Estimated amount	
Name and the	hours	box, unless person is both an officer and a director/trustee)						compensation	compensation	of other
	per week				_			from the	from related	compensation
	(list any hours for	divi	stitu	Officer	ey e	Highest do employee	Former	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	related	dua	Ti Oi	4	Ϊþ	st d	Ψ̈́	1099-NEC)	1099-NEC)	related organizations
	organizations below	Y E	า <u>ลl</u> t		Key employee		4			
	dotted line)	Individual trustee or director	Institutional trustee		ď	peg				
	,		ee		1	sated				
(1) CAROLE DEAN	40.00									
PRESIDENT		× (-	×	×					
(2) LORI PYE	2.00	11	7							
SECRETARY	N	O,		×						
(3) RICHARD KAUFMAN	15 00									
DIRECTOR	V	×								
(4) MARGARITA SWEET	3.00									
DIRECTOR		×								
(5) CAROLE JOYCE	35.00									
DIRECTOR		×						22,761.		
(6) NAHEED ISMAIL	3.00									
DIRECTOR		×								
(7)										
(0)										
(8)										
(9)										
-X-7										
(10)										
(11)										
(40)										
(12)										
(13)										
(14)		-								

Part	Section A. Officers, Directors, 7 (A)	(B)			(o	C) ition			lighest Compe	ensated E (E)	Emplo	yees (continued) (F)
	Name and title	Average hours per week (list any hours for related organizations below dotted line)	box, office Individua	unles	ss pe	rson	e than of the is or/trus Highest compensated employee	n an	Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	Reporta compens from rel organization 1099-M 1099-N	sation ated ns (W-2/ ISC/	Estimated amount of other compensation from the organization and related organizations
(15)							ğ					
(16)												
(17)												
(18)												
(19)												
(20)												
(21)												
(22)						(2	7				
(23)					(5						
(24)			ii	<u>ن</u>								
(25)			Ò,									
	Subtotal	VII. Captio		•					22,761.			
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)								22,761.			
2	Total number of individuals (including but reportable compensation from the organi	not limited								e than \$10	00,000	of
3	Did the organization list any former of employee on line 1a? If "Yes," complete s	Schedule J	for su	ıch	indi	ivid	ual					3 ×
4	For any individual listed on line 1a, is the organization and related organizations individual			150,		? /:						
5	Did any person listed on line 1a receive of for services rendered to the organization						,		•	tion or ind		
	on B. Independent Contractors											
1	Complete this table for your five high compensation from the organization. Rep											
	(A) Name and business add	ress							(B) Description of serv	vices	((C) Compensation
	Total number of independent contractor	rs (includir	ng bi	ıt n	ot I	limit	ed to	th	nose listed abov	e) who		
_	received more than \$100,000 of compens									.,		

Part VIII Statement of Revenue Check if Schedule O contain

rait	VIII.	Check if Schedule O contains a respons	se or note to ar	ny line in this Pa	ırt VIII		\sqcap
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
S,	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b					
g m	С	Fundraising events 1c					
fts, r A	d	Related organizations 1d					
Gi	е	Government grants (contributions) 1e					
ns, Sin	f	All other contributions, gifts, grants,					
utio ner			6,302,631.				
rib Ot	g	Noncash contributions included in					
ont		lines 1a–1f 1g					
<u>a</u>	h	Total. Add lines 1a–1f		6,302,631.			
4)			Business Code				
/ice	2 a	5 .	999999	891.	891.	0.	0.
Program Service Revenue	b	HFF Class & Book	999999	20.	20.	0.	0.
gram Ser Revenue	С						
ran ?ev	d						
.og	е						
P	f	All other program service revenue		2.1			
	<u>g</u> 	Total. Add lines 2a–2f	interest and	911.			
	3	other similar amounts)		2,176.	2 176	0.	0.
	4	Income from investment of tax-exempt bor		2,176.	2,176.	0.	0.
	5	•		- W.			
	3	Royalties	(ii) Personal				
	6a	Gross rents 6a	(ii) i oroonai				
	b	Less: rental expenses 6b					
	C	Rental income or (loss) 6c	-				
	d	Net rental income or (loss)	$\mathcal{O}_{I_{I}}$				
	7a	Gross amount from (i) Securities	(ii) Other				
	<i>1</i> u	sales of assets) () ()				
		other than inventory 7a					
Ф	b	Less: cost or other basis					
evenue		and sales expenses . 7b					
eve	С	Gain or (loss) 7c					
r B	d	Net gain or (loss)					
Other	8a	Gross income from fundraising					
Ö		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising ever	nts				
	9a	Gross income from gaming					
		activities. See Part IV, line 19 . 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities	S				
	10a	Gross sales of inventory, less					
		returns and allowances 10a					
		Less: cost of goods sold 10b	W. /				
	С	Net income or (loss) from sales of inventor	-				
Miscellaneous Revenue	110	-	Business Code				
scellaneo Revenue	11a						
lla	b						
SCE	c d	All other revenue					
Ξ		Total. Add lines 11a–11d					
	12	Total revenue. See instructions		6,305,718.	3,087.	0.	0.

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). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising Do not include amounts reported on lines 6b. 7b. (A) Total expenses (B) Program service Management and 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . 26,957. 26,957. Grants and other assistance to domestic 2 individuals. See Part IV, line 22 5,828,931. 5,828,931. 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 22,761. 22,761. 0. 0. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0. 0. 0. 0. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (nonemployees): 11 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 Schedule O.) L63,497. 64,205. 37,610. 61,682. 12 Advertising and promotion . 17,119. 11,891. 1,042. 4,186. 13 Office expenses 21,974. 2,659. 19,010. 305. 14 Information technology 46,211. 15,463. 30,748. 0. 15 Royalties Occupancy 30,612. 30,612. 16 0. 8,101. 8,101. 17 0. 0. Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 1,134. 1,134. 20 0. 21 Payments to affiliates 16,971. 8,005. 8,966. 0. 22 Depreciation, depletion, and amortization . 23 1,782. 0. 1,782. 0. Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) a Merchant&Bank Fees 24,386. 4,781. 0. 19,605. Research&Development 372. 372. 0. 0. 12,069. 12,069. 0. c Vehicle 0. Insurance Benefits 33,502. 33,502. 0. e All other expenses 25 **Total functional expenses.** Add lines 1 through 24e 6,256,379. 5,989,345. 181,256. 85,778. 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)

Part X Balance Sheet
Check if Schedule O contain

•	are A	Check if Schedule O contains a response or note to any line in this F	Part X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,819,626.	1	1,799,072.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			
	_			6	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use		8	
4	9	Prepaid expenses and deferred charges		9	
	10a	basis. Complete Part VI of Schedule D 10a 52,992			
	b	Less: accumulated depreciation		10c	22,415.
	11	Investments—publicly traded securities	. 22,107.	11	22,115.
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets	15,000.	14	62,040.
	15	Other assets. See Part IV, line 11		15	96,433.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,857,093.	16	1,979,960.
	17	Accounts payable and accrued expenses	16,848.	17	8,501.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	752,627.	21	455,884.
ies	22	Loans and other payables to any current or larger officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		00	F 700
iak	00			22	5,792.
_	23 24	Secured mortgages and notes payable to inrelated third parties Unsecured notes and loans payable to unrelated third parties	104,955.	24	99,615.
	25	Other liabilities (including federal income tax, payables to related third		24	99,013.
		parties, and other liabilities not included on lines 17–24). Complete Part X	1		
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	874,430.	26	569,792.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
lan	27	Net assets without donor restrictions	888,036.	27	521,228.
Ba	28	Net assets with donor restrictions	94,627.	28	888,940.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here	71,027.		000,510.
ř		and complete lines 29 through 33.			
S	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds .	000 660	31	1 410 160
let	32	Total net assets or fund balances	982,663.	32	1,410,168.
_	33	Total liabilities and net assets/fund balances	1,857,093.	33	1,979,960.

Page **12** Form 990 (2023)

Part	XI Reconciliation of Net Assets			•	
	Check if Schedule O contains a response or note to any line in this Part XI				×
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,3	05,7	18.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,2	56,3	79.
3	Revenue less expenses. Subtract line 2 from line 1	3		49,3	39.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	91	32,6	63.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
		10	1,0	32,0	02.
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain (on		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .				<u>×</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled	or		
	reviewed on a separate basis, consolidated basis, or both.				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	×	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	ed on	a		
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over		1 1		
	the audit, review, or compilation of its financial statements and selection of an independent accountar				<u>×</u> _
	If the organization changed either its oversight process or selection process during the tax year, ex	plain (on		
•	Schedule O.				
3a	As a result of a federal award, was the organization repuired to undergo an audit or audits as set for	n in ti	1 1		
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F3		3a		<u>×</u> _
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo explain why on School to O and describe any stage taken to undergo such as				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	uuts .			
	PEV 05/00/24 PPO		Eorn	, aan	(2023)

REV 05/09/24 PRO Form **990** (2023)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

OMB No. 1545-0047

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name	of the organization					Employer identification	number				
	m The Heart Productions					95-4445418					
Par							ons.				
ine d	organization is not a private founda \square A church, convention of church		,		-	•					
2	A school described in section	•				Ο(Δ)(1)(Α)(1).					
3											
4											
	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	6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7	An organization that normally described in section 170(b)(1)			port from	a gover	nmental unit or fron	n the general public				
8	☐ A community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)							
9	An agricultural research organi or university or a non-land-grauuniversity:	nt college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or				
10	An organization that normally r receipts from activities related support from gross investment acquired by the organization at	income and uni	related business taxal	ble incom	ie (less se	ection 511 tax) from	fees, and gross 33 ¹ / ₃ % of its businesses				
	☐ An organization organized and	•									
12	☐ An organization organized and	•	· · · · · /								
	one or more publicly supported the box on lines 12a through 12										
а	_ ;;										
	the supported organization supporting organization. You	ou must comple	ete Part IV, Sections	A and B.	-						
b	 Type II. A supporting organ control or management of t 										
	organization(s). You must (persons	that control of man	age the supported				
С	□ T	-	•		onnection	n with, and function	ally integrated with,				
	its supported organization(
d	Type III non-functionally i that is not functionally integrequirement (see instruction	grated. The orga	nization generally mus	st satisfy	a distribu	ıtion requirement an					
е	☐ Check this box if the organ	ization received	a written determination	on from th	ne IRS tha	at it is a Type I, Type	e II, Type III				
	functionally integrated, or T										
f	Enter the number of supported of	•									
g											
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	, ,	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
				Yes	No						
(A)											
(B)											
(C)											
(D)											
(E)											
Tota											

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (d) 2022 (c) 2021 **(e)** 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 4 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) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 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.) **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) % 14 Public support percentage from 2022 Schedule A, Part II, line 14 15 331/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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

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

Section	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")	3,065,886.	4,597,388.	3,988,646.	7,239,071.	6,303,540.	25,194,531.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	3,065,886.	4,597,388.	3,988,646.	7,239,071.	6,303,540.	25,194,531.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	776,805.	857,286.	1,761,188.		2,359,292.	5,754,571.
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	776,805.	957 296	1,761,188.		2 250 202	5,754,571.
8	Public support. (Subtract line 7c from	770,803.	837,280.	1,701,100.		2,339,292.	J,/J4,J/1.
	line 6.)		\sim				19,439,960.
Secti	on B. Total Support				•	•	
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	3,065,886	4,597,388.	3,988,646.	7,239,071.	6,303,540.	25,194,531.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	DAL				2,176.	2,176.
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b					2,176.	2,176.
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,	3,065,886.	4 507 200	2 000 646	7 220 071	6 205 716	25 106 707
14	First 5 years. If the Form 990 is for the						
	organization, check this box and stop he	•			•		
Secti	on C. Computation of Public Suppo	rt Percentag	е				
15	Public support percentage for 2023 (line		-	13, column (f))			77.15 %
16	Public support percentage from 2022 Sci					16	82.59 %
	on D. Computation of Investment In				(6)		
17	Investment income percentage for 2023 (-	* * * *		0.01 %
18	Investment income percentage from 2022						0 %
19a	33 ¹ / ₃ % support tests—2023. If the organ 17 is not more than 33 ¹ / ₃ %, check this box						
b	33 ¹ / ₃ % support tests—2022. If the organiz	_	_	-		_	_
	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	_	_	-	-		_

Part IV **Supporting Organizations**

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

ecu	on A. All Supporting Organizations		Yes	No
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		res	NO
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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.	2 3a		
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.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part V what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
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).	7		
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).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
h	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to			

determine whether the organization had excess business holdings.)

Part I	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI .	11c		
Section	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	•		
2	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		
Section	on C. Type II Supporting Organizations			
	<u> </u>		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
_	organization's governing documents in effect on the ofte of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors or rustees 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			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations	<u> </u>		L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	s)
a	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			٠,.
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struct	tions).
2	Activities Test. Answer lines 2a and 2b below.		Yes	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
_	the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify</i>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3h		I

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations	
1	\Box Check here if the organization satisfied the Integral Part Test as a qualifying	tru	st on Nov. 20, 1970 (expl	ain in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	ions A through E.
Sect	Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7_	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	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 greate) amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from tine 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		
Sect	ion C—Distributable Amount	•		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional		ntegrated Type III suppo	rting organization
-	(see instructions).			

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2023 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 **a** From 2018 From 2019 **c** From 2020 **d** From 2021 From 2022 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2023 distributable amount Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 31. Distributions for 2023 from 4 Section D, line 7: Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. 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. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . . Excess from 2023 . . .

Schedule A (Form 990) 2023 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Fro	m The Heart Productions		95-4445418
Par			ls or Accounts
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a		
	funds are the organization's property, subject to the	organization's exclusive legal control	$? \cdot \cdot \cdot \cdot \cdot \square$ Yes \square No
6	Did the organization inform all grantees, donors, ar		
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		· · · · · · □ Yes □ No
Par	Conservation Easements		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the c	organization (check all that apply).	
	Preservation of land for public use (for example, recre	ation or education)	f a historically important land area
	☐ Protection of natural habitat	☐ Preservation of	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	in the form of a conservation
	easement on the last day of the tax year.	-0.3	Held at the End of the Tax Year
а	Total number of conservation easements	$\cdot \cdot \cdot \cdot \cdot \sim O^{N} \cdot \cdot \cdot \cdot \cdot \cdot \cdot$. 2a
b	Total acreage restricted by conservation easements	s 	. 2b
С	Number of conservation easements on a certified hi	storic structure included on line 2a .	. 2c
d	Number of conservation easements included on line	e 2c acquired after July 25, 2006, and	not
	on a historic structure listed in the National Register		· 2d
3	Number of conservation easements modified, trans	erred, released, extinguished, or term	ninated by the organization during the
	tax year		
4	Number of states where property subject to conserv	vation easement is located	
5	Does the organization have a written policy reg		
	violations, and enforcement of the conservation eas	ements it holds?	· · · · ·
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing o	conservation easements during the year
_	- 		
8	Does each conservation easement reported on line		
_	and section 170(h)(4)(B)(ii)?		
9	sheet, and include, if applicable, the text of the foot		
	organization's accounting for conservation easemer	S	terrients that describes the
Dow			Other Circiles Assets
Part			Juner Similar Assets
4	Complete if the organization answered "		
ıa	If the organization elected, as permitted under FAS of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote t		
h	-		
b	If the organization elected, as permitted under FAS art, historical treasures, or other similar assets held		
	provide the following amounts relating to these item		earch in furtherance of public service,
	-		Ф
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		D
0	(II) ASSETS INCluded In Form 990, Part X	historical transuras, or other similar	D
2	following amounts required to be reported under FA	Tilstorical treasures, or other similar a	assets for illiancial gain, provide the
		-	Φ.
a	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X		»
D	Λοοσιο πισιασσα πιποπιπαάθυ, Γάπι∧		Ф

Part	Organizations Maintaining Col	lections of Art, His	torical Treasures,	or Other Similar A	Assets (continued)
3	Using the organization's acquisition, access collection items (check all that apply).	ssion, and other reco	rds, check any of the	e following that make	e significant use of its
а	☐ Public exhibition	d	☐ Loan or exchange	e program	
b	☐ Scholarly research	е	☐ Other		
С	☐ Preservation for future generations				
4	Provide a description of the organization's XIII.	collections and expl	ain how they further t	the organization's ex	empt purpose in Part
5	During the year, did the organization solid assets to be sold to raise funds rather than				
Part					
·	Complete if the organization ans 990, Part X, line 21.		m 990, Part IV, line	9, or reported an a	amount on Form
1a	Is the organization an agent, trustee, cust included on Form 990, Part X?				not . X Yes No
b	If "Yes," explain the arrangement in Part XI	II and complete the fo	ollowing table.		Amount
С	Beginning balance			1c	752,627.
d	Additions during the year			1d	0.
e	Distributions during the year			1e	296,743.
f	Ending balance			1f	455,884.
2a	Did the organization include an amount on			stodial account liabil	
b	If "Yes," explain the arrangement in Part XI				
Par			'		
	Complete if the organization ans	wered "Yes" on For	m 990 Part IV, line	10.	
	. (a)	Current year (b) Pr	or year (c) Two years	s back (d) Three years ba	ack (e) Four years back
1a	Beginning of year balance		-04		
b	Contributions		1		
С	Net investment earnings, gains, and losses				
d	Grants or scholarships	-			
e	Other expenditures for facilities and	<i>M</i> ,			
·	programs				
f	Administrative expenses	\bigcirc			
	End of year balance				
g 2	Provide the estimated percentage of the cu	irrent vear end balance	e (line 1g. column (a)) held as:	
a		•	e (iiile 19, coluitiii (a)) Held as.	
a b	Permanent endowment%	%			
С	Term endowment % The percentages on lines 2a, 2b, and 2c sh	ould oqual 100%			
За	Are there endowment funds not in the pos		zation that are held s	and administered for	the
oa	organization by:	socoolori or the organ	zation that are near	and daministered for	Yes No
					. 3a(i)
	.,				. 3a(ii)
b	If "Yes" on line 3a(ii), are the related organi				
4	Describe in Part XIII the intended uses of the	·			. 50
Part			JWITIETT TUTIOS.		
L CIT	Complete if the organization ans		m 990 Part IV line	11a See Form 99	0 Part X line 10
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
	Lond	,	(==.6.)		0
1a h	Land	0.			0.
b	Buildings				
۲ C	Leasehold improvements				
d	Equipment		52,992.	30,577.	22 415
E Total	Other	agual Form 000 Dort			22,415. 22,415.
ı otal.	Add intes ta tillough te. (Oolullii (u) Illust t	oquai i Oiiii 330, i ail .	a, iii ie i oo, colullill (E	<i>''',</i>	<u>~~, -</u> 13.

Part VII	Investments—Other Securities			
	Complete if the organization answered "Yes" on F	orm 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value		nod of valuation: of-year market value
(1) Financial	derivatives			
	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	mn (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments – Program Related			
Part VIII	Complete if the organization answered "Yes" on F	orm 990 Part IV lin	e 11c See Form	990 Part X line 13
	(a) Description of investment	(b) Book value		nod of valuation:
	(a) Description of investment	(b) Book value		of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)		0		
(7)		~ OX		
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered ** on F	orm 990, Part IV, lin	e 11d. See Form	990, Part X, line 15.
	(a) Description			(b) Book value
(1)	X			
(2)	·			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, line 15, col. (B))			
Part X	Other Liabilities	<u> </u>		
raitx	Complete if the organization answered "Yes" on F	orm 990 Part IV lin	e 11e or 11f See	Form 990 Part X
	line 25.	o 000, 1 a.c. 17,		, i oim ooo, i air xi,
1.	(a) Description of liability			(b) Book value
(1) Federal ir	ncome taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 25, col. (B))			
	r uncertain tax positions. In Part XIII, provide the text of the foo			
organization'	s liability for uncertain tax positions under FASB ASC 740. Che	eck here if the text of the	e footnote has been p	provided in Part XIII .

Pa		Reconciliation of Revenue per Audited Financial Stateme			Retur	n
	(Complete if the organization answered "Yes" on Form 990, I	Part I	V, line 12a.		
1	Total re	evenue, gains, and other support per audited financial statements			1	6,305,718.
2	Amoun	its included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net un	realized gains (losses) on investments	2a			
b	Donate	ed services and use of facilities	2b			
C		eries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lin	es 2a through 2d			2e	
3	Subtrac	ct line 2e from line 1			3	6,305,718.
4	Amoun	its included on Form 990, Part VIII, line 12, but not on line 1:				
а	n Investn	ment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
C		nes 4a and 4b			4c	
5		evenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	6,305,718.
Paı		Reconciliation of Expenses per Audited Financial Statem			er Ret	urn
		Complete if the organization answered "Yes" on Form 990, I	Part I	V, line 12a.		
1	Total e	xpenses and losses per audited financial statements			1	6,251,180.
2	Amoun	its included on line 1 but not on Form 990, Part IX, line 25:				
а	Donate	ed services and use of facilities	2a			
b	Prior ye	ear adjustments	2b			
C	Other lo	osses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lin	es 2a through 2d			2e	
3		ct line 2e from line 1	7		3	6,251,180.
4		its included on Form 990, Part IX, line 25, but not on line 1:)			
а		nent expenses not included on Form 990, Part VIII, line 7	4a			
b	•	Describe in Part XIII.)	4b			
C		nes 4a and 4b			4c	
5		xpenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)		5	6,251,180.
		Supplemental Information				
		escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and				
2; Pa	art XI, lines	s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to pro	ovide any additional i	ntormat	ion.
		X				
D+	T77 T + 2	no 1b. Dogonilistion of Gustodial Funda				
P C		ne 1b: Reconiliation of Custodial Funds				
D+	TV/ T.ir	ne 2b: Donors above 2% of revenue				

Schedule D (For	rm 990) 2023	Page \$
Part XIII	Supplemental Information (continued)	
	4	
	6063	
	QUDI ^C	
	X	

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Employer identification number

From The Heart Productions 95-4445418 **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990. Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of (g) Description of (h) Purpose of grant (book, FMV, appraisal, or government (if applicable) grant noncash assistance noncash assistance or assistance other) (11)(12)

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
				1		
V	Supplemental Information. Pro	ovide the information re	equired in Part I, I	ine 2, Part III, colum	n (b); and any other addition	onal information.
				<u> </u>		
			نن			
			101,			
			Q ₀			

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

From The Heart Productions	95-4445418
Pt VI, Line 11b: Form 990 is presented to the Board of Directors pr	ior to filing
for their review.	
Pt XI: Line 9 records Prior Year adjustment for unrestricted net as	sets. Reclassified
custodial funds from Net Assets to Custodial Fund Liability on line	21
Other: Accomplishments Statement Attached	
Pt VI, Line 12c: From the Heart has a conflict of interest policy w	hich is annually
signed by each director, principal officer, and members of their bo	ard of directors.
From the heart's executive committee regulary and consistently moni	tors and enforces
compliance with this policy by reviewing annual statements and taki	ng such other
action as necessary for effective oversight	
Pt VI, Line 15a: The Process of determining the salary of the execu	tive director
is based on a complete performance review againts strategic goals s	et for the
organization and is in line with the prevailing industry rates and	the executive
directors work experience.	
Pt VI, Line 15b: The process of determining staff compensation is b	ased on an
annual benchmarking of wages againt a nonprofit organizations of si	milar size
as well as reviewing compensation based on location and other organ	izations in
the same industry. Annual performance reviews are also performed to	review compensation
based on work experience and performance.	
Pt VI, Line 19: From the hearts governing documents are posted on t	he organization
website, www.fromtheheartproductions.com. They are also available t	o the public
upon request during normal business hours at from the heart office.	
Pt XI: Reconciled Donations intended as Custodial Funds reclassifie	
21 Liability	
Pt III, Line 4d:	

Name of the organization	Employer identification number
	95-4445418
Expenses: \$0 including grants of: \$0 Revenue: \$0	
Degenintion: Enon The Heart Dreductions was becaused with the	
Description: From The Heart Productions was honored with the	
Top-rated Non Profit Badge by GreatNonProfits.org	
Carole Dean, founder and president received the Indie FIlms Visionary Ware	at the ETHOS Film Awards
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<i>'iO</i>	
<i>:</i> 0''	
X	

From The Heart Productions 95-4445418 1

Additional Information From 2023 Federal Exempt Tax Return

Form 990: Return of Organization Exempt from Income Tax Line 28, column (B)

Itemization Statement

Description	Amount
Custodial Accounts Restricted	455,884.
Filmmaker Donations on Hold	433,056.
Total	888,940.

Public Coby