

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2022

Department of the Treasury
Internal Revenue Service

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

A For the 2022 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ALLIED MEDIA PROJECTS, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4126 THIRD STREET City or town, state or province, country, and ZIP or foreign postal code DETROIT, MI 48201 F Name and address of principal officer: TONI MOCERI SAME AS C ABOVE	D Employer identification number 01-0559608 E Telephone number (313) 718-2267 G Gross receipts \$ 28,593,369. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ALLIEDMEDIA.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		
L Year of formation: 2001		M State of legal domicile: MI

Part I Summary

1	Briefly describe the organization's mission or most significant activities: TO SUPPORT THE GROWTH OF MEDIA-BASED ORGANIZING MODELS.		
2	Check this box <input type="checkbox"/> 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)	3	9
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	108
6	Total number of volunteers (estimate if necessary)	6	250
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	-101,892.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9	Program service revenue (Part VIII, line 2g)	38,552,309.	26,748,605.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,297,187.	1,794,447.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	20,903.	24,887.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-71,144.	-101,892.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	40,799,255.	28,466,047.
14	Benefits paid to or for members (Part IX, column (A), line 4)	3,813,540.	6,093,708.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	6,219,206.	7,028,330.
b	Total fundraising expenses (Part IX, column (D), line 25) 412,579.	117,465.	132,956.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	8,445,560.	12,448,499.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18,595,771.	25,703,493.
19	Revenue less expenses. Subtract line 18 from line 12	22,203,484.	2,762,554.
20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21	Total liabilities (Part X, line 26)	51,986,924.	59,513,356.
22	Net assets or fund balances. Subtract line 21 from line 20	10,390,896.	15,154,774.
22		41,596,028.	44,358,582.

Part II 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.

Sign Here	Signature of officer TONI MOCERI, CO-EXECUTIVE DIRECTOR Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name MICHAEL B BOISVENU, CPA	Preparer's signature <i>Michael B Boisvenu</i>
	Firm's name BOISVENU & COMPANY, P.C.	Date 11/15/23
	Firm's address 30600 TELEGRAPH ROAD, SUITE 1300 BINGHAM FARMS, MI 48025	Check if self-employed <input type="checkbox"/> PTIN P01355707
		Firm's EIN 38-2857129
		Phone no. (248) 647-7200

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III []

1 Briefly describe the organization's mission:
ALLIED MEDIA PROJECTS CULTIVATES MEDIA STRATEGIES FOR A MORE JUST, CREATIVE, AND COLLABORATIVE WORLD. WE SERVE A NETWORK OF MEDIA MAKERS, ARTISTS, EDUCATORS, AND TECHNOLOGISTS WORKING FOR SOCIAL JUSTICE.

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 [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 23,165,218. including grants of \$ 6,093,708.) (Revenue \$ 1,794,447.)
THROUGH THE ANNUAL ALLIED MEDIA CONFERENCE WE INNOVATE AND EXCHANGE MODELS FOR USING MEDIA FOR TRANSFORMATIVE SOCIAL CHANGE. OUT OF THE CONFERENCE EMERGE NEW PROJECTS, CAMPAIGNS, AND COLLABORATIONS THAT CONTINUE YEAR ROUND. THROUGH OUR SPONSORED PROJECTS PROGRAM, AMP OFFERS THESE PROJECTS ACCESS TO A RANGE OF SUPPORTIVE SERVICES INCLUDING FISCAL MANAGEMENT, PROJECT PLANNING, FUNDRAISING SUPPORT, AND COMMUNICATIONS STRATEGY.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 23,165,218.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		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):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	X	
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
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>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

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		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed MI
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
ASTA PETKEVICIUTE - (313) 718-2267
4126 THIRD STREET, DETROIT, MI 48201

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.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) RASHID SHABAZZ CRITICAL MINDED EXECUTIVE DIRECTOR	40.00					X	173,259.	0.	5,929.	
(2) MARIANNE RUIZ KAIROS EXECUTIVE DIRECTOR	40.00					X	147,085.	0.	6,645.	
(3) JEANETTE L. LEE FORMER EXECUTIVE DIRECTOR	36.00			X			97,033.	52,000.	2,502.	
(4) SANDHYA ANANTHARAMAN KAIROS INTERIM DIR. OF PROGRAMS	40.00					X	129,784.	0.	11,210.	
(5) JACQUELINE GENNELL BROOKS KAIROS DEPUTY DIRECTOR	40.00					X	130,884.	0.	8,930.	
(6) JELANI MICHELLE DREW-DAVI KAIROS DIRECTOR OF CAMPAIGNS	40.00					X	114,747.	0.	11,548.	
(7) MARS MARSHALL CO-EXECUTIVE DIRECTOR	36.00			X			113,995.	0.	10,800.	
(8) TONI MOCERI CO-EXECUTIVE DIRECTOR	36.00			X			112,857.	0.	10,800.	
(9) IRMA BAJAR EXECUTIVE DIRECTOR 18 MILLION RISING	40.00					X	110,886.	0.	10,696.	
(10) EMI KANE DIRECTOR	0.50	X					0.	0.	0.	
(11) CEZANNE CHARLES SECRETARY	2.00	X		X			0.	0.	0.	
(12) MOYA BAILEY PRESIDENT	3.00	X		X			0.	0.	0.	
(13) HELIXX ARMAGEDDOR DIRECTOR	0.50	X					0.	0.	0.	
(14) DANA BRITTO TREASURER	2.00	X		X			0.	0.	0.	
(15) ELENA ROSE VERA DIRECTOR	0.50	X					0.	0.	0.	
(16) ANNE CHOIKE DIRECTOR	0.50	X					0.	0.	0.	
(17) KIM HUNTER DIRECTOR	0.50	X					0.	0.	0.	

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

Table with columns (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes entry for AKUA HILL, DIRECTOR.

1b Subtotal 1,130,530. 52,000. 79,060.
1c Total from continuation sheets to Part VII, Section A 0. 0. 0.
1d Total (add lines 1b and 1c) 1,130,530. 52,000. 79,060.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 8

Table with 3 columns: Question, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Lists contractors like LEVERAGE PHILANTHROPIC PARTNERS, LLC and SOCIAL IMPACT COMMONS INC.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 18

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	26,748,605.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			26,748,605.			
Program Service Revenue	2 a REGISTRATION & PROGRAM FEES	Business Code	611420	1,794,447.	1,794,447.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			1,794,447.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			24,887.		24,887.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	25,430.			
			(ii) Personal				
	b Less: rental expenses ...	6b		127,322.			
	c Rental income or (loss)	6c		-101,892.			
	d Net rental income or (loss)			-101,892.		-101,892.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c					
d Net gain or (loss)							
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	Business Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			28,466,047.	1,794,447.	-101,892.	24,887.	

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 X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,678,214.	5,678,214.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	415,494.	415,494.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	326,749.	163,374.	130,700.	32,675.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	5,655,214.	4,710,292.	820,283.	124,639.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	570,327.	473,003.	84,279.	13,045.
10 Payroll taxes	476,040.	388,449.	75,214.	12,377.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	132,956.			132,956.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	8,789,601.	8,104,781.	663,157.	21,663.
12 Advertising and promotion	1,061,942.	1,015,853.	31,115.	14,974.
13 Office expenses				
14 Information technology	413,709.	223,320.	180,377.	10,012.
15 Royalties				
16 Occupancy	423,153.	342,373.	57,845.	22,935.
17 Travel	516,576.	508,879.	7,594.	103.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	540,414.	537,009.	3,134.	271.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a ACTIVITIES & MATERIALS	703,104.	604,177.	71,998.	26,929.
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	25,703,493.	23,165,218.	2,125,696.	412,579.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	27,857,778.	1	29,587,257.
	2 Savings and temporary cash investments	10,477,507.	2	10,503,894.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	1,493,153.	4	3,278,659.
	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	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	9,554.	9	48,222.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,283,641.		
	b Less: accumulated depreciation	10b 279,296.	1,004,345.	10c 1,004,345.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	11,144,587.	15	15,090,979.
16 Total assets. Add lines 1 through 15 (must equal line 33)	51,986,924.	16	59,513,356.	
Liabilities	17 Accounts payable and accrued expenses	1,658,876.	17	2,283,775.
	18 Grants payable		18	
	19 Deferred revenue	178,609.	19	2,076,439.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties	999,955.	23	3,300,000.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	7,553,456.	25	7,494,560.
	26 Total liabilities. Add lines 17 through 25	10,390,896.	26	15,154,774.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/>			
	and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	7,683,928.	27	14,695,851.
	28 Net assets with donor restrictions	33,912,100.	28	29,662,731.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/>			
	and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
31 Retained earnings, endowment, accumulated income, or other funds		31		
32 Total net assets or fund balances	41,596,028.	32	44,358,582.	
33 Total liabilities and net assets/fund balances	51,986,924.	33	59,513,356.	

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	28,466,047.
2	Total expenses (must equal Part IX, column (A), line 25)	2	25,703,493.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,762,554.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	41,596,028.
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	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	44,358,582.

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	3b	

Form 990 (2022)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization: ALLIED MEDIA PROJECTS, INC.
Employer identification number: 01-0559608

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 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).
3 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).
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).
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).
8 A community trust described in section 170(b)(1)(A)(vi).
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.
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...
11 An organization organized and operated exclusively to test for public safety.
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...
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
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 about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6,823,837.	11,658,216.	19,487,670.	38,552,310.	26,748,605.	103,270,638.
2 Tax revenues levied for the organization'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	6,823,837.	11,658,216.	19,487,670.	38,552,310.	26,748,605.	103,270,638.
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)						22,002,853.
6 Public support. Subtract line 5 from line 4.						81,267,785.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	6,823,837.	11,658,216.	19,487,670.	38,552,310.	26,748,605.	103,270,638.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	7,717.	13,340.	24,977.	20,903.	24,887.	91,824.
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.)						
11 Total support. Add lines 7 through 10						103,362,462.
12 Gross receipts from related activities, etc. (see instructions)					12	8,325,849.
13 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) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	78.62 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	75.06 %
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. 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 organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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 A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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 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						
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						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c 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 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 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 C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
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 supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> 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.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? 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.			
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.			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	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
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide 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 organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2022		
a	From 2017		
b	From 2018		
c	From 2019		
d	From 2020		
e	From 2021		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2022 distributable amount		
i	Carryover from 2017 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2022 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2022 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2023. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2018		
b	Excess from 2019		
c	Excess from 2020		
d	Excess from 2021		
e	Excess from 2022		

Part VI

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

Lined area for supplemental information with a large diagonal 'COPY' watermark.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization **ALLIED MEDIA PROJECTS, INC.** Employer identification number **01-0559608**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds 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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

4 Number of states where property subject to conservation easement is located _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 \$ _____

(ii) Assets included in Form 990, Part X \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a 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 Instructions for Form 990.

Schedule D (Form 990) 2022

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, 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
1a Land		194,900.		194,900.
b Buildings		887,900.	108,812.	779,088.
c Leasehold improvements				
d Equipment		110,075.	79,718.	30,357.
e Other		90,766.	90,766.	0.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,004,345.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) LEASE DEPOSIT	8,995.
(2) EQUITY IN LBI	6,054,790.
(3) CONSTRUCTION IN PROGRESS	9,027,194.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	15,090,979.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) INTRA-ORGANIZATION PAYABLE	7,494,560.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	7,494,560.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5

Part XIII Supplemental Information.

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 XI, LINE 4B - OTHER ADJUSTMENTS:

BUILDING RENTAL INCOME - NET

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2022

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization: ALLIED MEDIA PROJECTS, INC. Employer identification number: 01-0559608

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

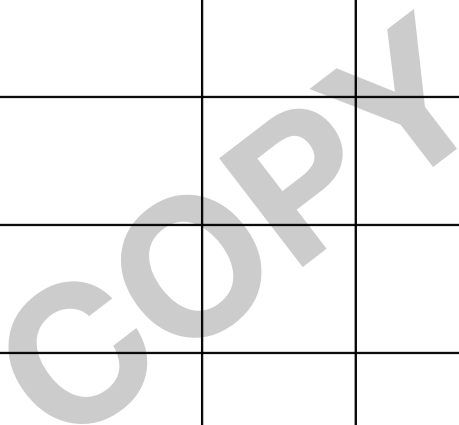
Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees, agents, and independent contractors in the region, (d) Activities conducted in the region (by type), (e) If activity listed in (d) is a program service, describe specific type of service(s) in the region, (f) Total expenditures for and investments in the region. Includes subtotal and totals rows.

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

Schedule F (Form 990) 2022

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	TO BE USED TO SUPPORT	30,000.		0.		



2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

COPY

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

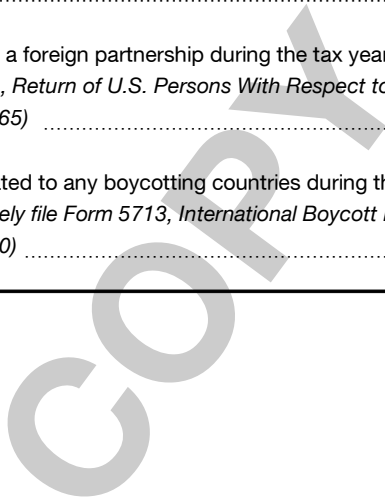
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Schedule F (Form 990) 2022



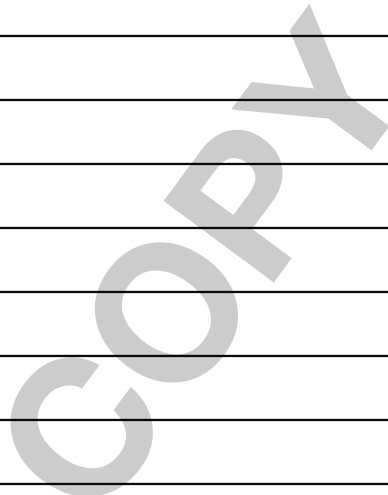
Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART II, COLUMN (D):

REGION: NORTH AMERICA

TO BE USED TO SUPPORT TWO MOMUS EMERGING CRITICS RESIDENCIES, EACH
AUTHORED AND LED BY A NETWORK OF ESTEEMED CRITICS, PUBLISHERS, CURATORS,
AND EDUCATORS



**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization **ALLIED MEDIA PROJECTS, INC.** Employer identification number **01-0559608**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
ALICIA DALY LLC - 4326 VERMONT AVE., ALEXANDRIA, VA	DEVELOPMENT SERVICES		X	0.	43,200.	0.
ELEVATE, LLC - 1201 CONNECTICUT AVE. NW 503,	DEVELOPMENT SERVICES		X	0.	20,250.	0.
ELYSIAN X INCORPORATED - 1403 COLORADO BEND DR., CEDAR	DEVELOPMENT SERVICES		X	0.	9,030.	0.
ENGLISH HUDSON CONSULTING - 2382 GENERATION DRIVE,	DEVELOPMENT SERVICES		X	0.	33,000.	0.
OLIVIA D AMATO - 335 HUFF HERITAGE, CHRISTIANSBURG, VA	DEVELOPMENT SERVICES		X	0.	8,750.	0.
PATHOEY PRODUCTIONS - 7 CHESTNUT AVENUE, AUBURN, MA	DEVELOPMENT SERVICES		X	0.	10,000.	0.
Total					124,230.	

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts			
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
	11	Net income summary. Subtract line 10 from line 3, column (d)			

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____

c If "Yes," enter name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: ALICIA DALY LLC

(I) ADDRESS OF FUNDRAISER: 4326 VERMONT AVE., ALEXANDRIA, VA 22304

(I) NAME OF FUNDRAISER: ELEVATE, LLC

(I) ADDRESS OF FUNDRAISER:

1201 CONNECTICUT AVE. NW 503, WASHINGTON, DC 20036

Part IV Supplemental Information (continued)

(I) NAME OF FUNDRAISER: ELYSIAN X INCORPORATED

(I) ADDRESS OF FUNDRAISER: 1403 COLORADO BEND DR., CEDAR PARK, TX 78613

(I) NAME OF FUNDRAISER: ENGLISH HUDSON CONSULTING

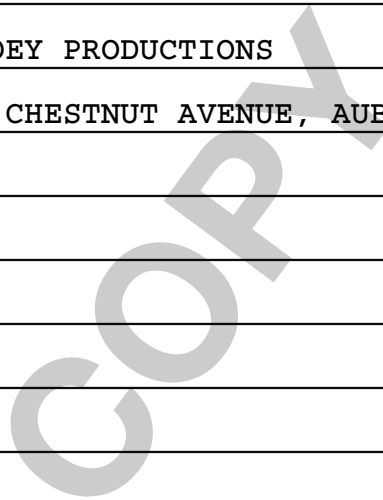
(I) ADDRESS OF FUNDRAISER: 2382 GENERATION DRIVE, RESTON, VA 20191

(I) NAME OF FUNDRAISER: OLIVIA D AMATO

(I) ADDRESS OF FUNDRAISER: 335 HUFF HERITAGE, CHRISTIANSBURG, VA 24073

(I) NAME OF FUNDRAISER: PATHOEY PRODUCTIONS

(I) ADDRESS OF FUNDRAISER: 7 CHESTNUT AVENUE, AUBURN , MA 01501



**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **ALLIED MEDIA PROJECTS, INC.** Employer identification number **01-0559608**

Part I General Information on Grants and Assistance

- 1 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? Yes No
- 2 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.

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
1 MICHIGAN FOR THE GLOBAL MAJORITY 1920 SCOTTEN AVENUE DETROIT, MI 48209	84-2249717	501C3	50,000.	0.			TRAIN YOUTH TO TAKE POWER, ADVOCATE THROUGH COMMUNITY ORGANIZING TO ADVANCE IMMIGRANT POLICY
482FORWARD 440 BURROUGHS, STE. 111 DETROIT, MI 48202	47-3537426	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT MISTUDENTS DREAM IN ORGANIZING CAMPAIGNS FOR CONCRETE
BEYOND NUCLEAR 7304 CARROLL AVE NO 182 TAKOMA PARK, MD 20912	91-2170071	501C3	6,750.	0.			ENDEM SUBGRANT
CAKECUTTER INSTITUTE 1419 S. ATLANTIC DRIVE COMPTON, CA 90221	84-3788544	501C3	50,000.	0.			THESE TWO GRANTS SPECIFICALLY FURTHER CRITICAL MINDED EFFORTS TO: 1) INCREASE SUPPORT
COMEUNITY ONE STOP 35741 BIBBINS ROMULUS, MI 48174	90-0741471	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT COMEUNITY ONE STOP IN COLLABORATING WITH JOSIN'FOR CHANGE TO
NATIONAL BLACK TALK SHOW ASSOC 100 RIVERFRONT DR. APT 1508 DETROIT, MI 48226	38-3494883	501C3	10,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT COMEUNITY ONE STOP IN COLLABORATING WITH JOSIN'FOR CHANGE TO

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **15.**

3 Enter total number of other organizations listed in the line 1 table **56.**

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

Schedule I (Form 990) 2022

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
NYU TISCH SCHOOL OF ARTS 721 BROADWAY FLOOR 12 NEW YORK, NY 10003	13-5562308	501C3	50,000.	0.			THIS GRANT IS FOR POP CONFERENCE 2023, A GATHERING DEDICATED TO MUSIC WRITERS OF ALL
SHAKESPEARE IN DETROIT PO BOX 2642 DEARBORN, MI 48123	47-4374924	501C3	55,000.	0.			SHAKESPEARE STEAM -- ARTISTIC AND VOCATIONAL TRAINING FOR DETROIT STUDENT
SIDEWALK DETROIT PO BOX 02805 DETROIT, MI 48202	82-3611774	501C3	50,000.	0.			SIDEWALK DETROIT WILL IMPLEMENT WORK AS DETAILED IN THE ACCEPTED GRANT PROPOSAL, EXPLORING
THE POINT COMMUNITY DEVELOPMENT CORPORATION - 940 GARRISON AVENUE - BRONX, NY 10474	13-3765140	501C3	241,500.	0.			TO CREATE A FRAMEWORK FOR BUILDING A COMMUNITY INTERNET TRUST
URBAN CORE COLLECTIVE 413 HALL ST. SE, SUITE 1 GRAND RAPIDS, MI 49507	46-5227869	501C3	16,750.	0.			A. WORK DIRECTLY WITH MEJC AND OTHER ENERGY DEMOCRACY PARTNERS TO DEVELOP AND SHARE AN
WARRIORS ON WHEELS OF METRO DETROIT - 15999 KNOLLWOOD DR. - DEARBORN, MI 48120	26-3144403	501C3	45,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT DISABILITY JUSTICE LEADERSHIP IN DETROIT, HIGHLAND PARK OR
WE THE PEOPLE MI 440 BURROUGHS STREET STE. 174 DETROIT, MI 48202	84-3520391	501C3	70,000.	0.			WILL IMPLEMENT THE ADVANCING DETROIT'S "RIGHT RELATIONSHIP AESTHETIC PROJECT AS
WISDOM INSTITUTE 17401 WISCONSIN ST DETROIT, MI 48221	35-2203867	501C3	25,000.	0.			THE WISDOM INSTITUTE WILL IMPLEMENT THE PASSING THE TORCH & PRESERVING THE FLAME PROJECT AS DETAILED
YOUNG NATION 8869 AVIS ST DETROIT, MI 48209	26-2296175	501C3	50,000.	0.			TO DEEP NARRATIVE TO HELP CULTIVATE THE STORIES OF DETROITERS.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
ALLIANCE FOR GLOBAL JUSTICE 225 E. 26TH STREET, SUITE 1 TUCSON, AZ 85713	52-2094677		15,000.	0.			THESE FUNDS ARE TO BE USED FOR THE "TAKING BLACK PRIDE" EVENT AND ALL THE LOGISTICS THAT GO
AMALGAMATED CHARITABLE FOUNDATION, INC - 1825 K STREET NW - WASHINGTON, DC 20006	82-1517696		1,137,000.	0.			TO MOVE UNTETHERED RESOURCES TO HELP SHAPE A FUTURE IN WHICH WE CAN ALL HEAL FROM GENERATIONS
TIDES ADVOCACY 1014 TORNEY AVENUE SAN FRANCISCO, CA 94129	94-3153687		16,750.	0.			GENERAL SUPPORT FLINT RECOVERY FUND
ADDIE TSAI 4612 PATTERSON AVE RICHMOND, VA 23226	40-8477828		11,950.	0.			THE GRANT WILL BE USED TO SUPPORT JUST FEMME AND DANDY TO: PAY STIPENDS TO TEAM MEMBERS, PAY
ADELA NIEVES MARTINEZ 18761 SAN QUENTIN DR. LATHRUP VILLAGE, MI 48076	00-7668203		25,000.	0.			WILL IMPLEMENT THE 'CULTURE RECLAIM PROJECT' AS DETAILED IN THE ACCEPTED GRANT PROPOSAL,
BASS INC 15885 WOODWARD AVE HIGHLAND PARK, MI 48203	38-3142470		25,000.	0.			ENGAGING AND EMPOWERING RESIDENTS IN ASSET MAPPING STRATEGY TO UNDERSTAND THE ISSUES
BLACK WOMXN FLOURISH LLC 2410 N CHARLES STREET APT 2 BALTIMORE, MD 21218	85-0699007		10,000.	0.			WE HAVE INVITED BLACK WOMXN FLOURISH A FORMATION OF FOLKS WHO HAVE ONGOING WORK USING
BRANDON NORRIS 15354 PIEDMONT ST. DETROIT, MI 48223	82-4334257		10,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT THE DETROIT PEOPLE'S ACTION IN IMPLEMENTING EDUCATIONAL
BRUJULAS INC HC 645 BOX 8078 TRUJILLO ALTO, PR 00976	66-0941561		10,000.	0.			WE HAVE INVITED ESPEJOS CEMPAZUCHITL, A FORMATION OF FOLKS WHO HAVE ONGOING WORK USING EMERGENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
BRYCE DETROIT 104 KENILWORTH STREET DETROIT, MI 48202	82-4471931		50,000.	0.			WILL IMPLEMENT THE DETROIT DESIGN DIPLOMACY PROJECT AS DETAILED IN THE ACCEPTED GRANT
CANOPY CANOPY CANOPY, INC. 264 CANAL STREET 3W NEW YORK, NY 10013	30-0537058		20,000.	0.			THE GRANT WILL BE USED TO SUPPORT THE TRIPLE CANOPY'S TWENTY- EIGHTH ISSUE, LIFE WRITING (JUNE
CHANGE ELEMENTAL 717 PENNSYLVANIA AVE. NW SUITE 1025 WASHINGTON, DC 20006	52-1305780		10,000.	0.			WE HAVE INVITED FORMATION, A FORMATION OF FOLKS WHO HAVE ONGOING WORK USING EMERGENT
CHURCH OF THE MESSIAH 231 EAST GRAND BLVD DETROIT, MI 48207	31-3100064		25,000.	0.			DIRECT GRANT TO CHURCH OF THE MESSIAH FOR EQUITABLE INTERNET INITIATIVE.
CRAFT TIMES P.O.BOX 401356 REDFORD, MI 48240	86-1543139		10,000.	0.			A.CRAFT WILL WORK DIRECTLY WITH MEJC AND OTHER ENERGY DEMOCRACY PARTNERS TO DEVELOP AND
CRISTINA ESCOBAR ANDRADE 805 LOS ARBOLES LANE SANTE FE, NM 87501	30-8026865		27,000.	0.			THE \$27,000 GRANT FROM CRITICAL MINDED WILL SPECIFICALLY SUPPORT LATINAMEDIA.CO IN THEIR
DET. BLACK COMMUNITY FOOD SECURITY NET - 11000 W. MCNICHOLS ROAD, SUITE 103 - DETROIT, MI 48221	33-1140762		10,000.	0.			THE PURPOSE OF THIS GRANT IS TO SUPPORT DETROIT PEOPLE'S FOOD CO-OP IN INCREASING DETROIT
DETROIT IS DIFFERENT INC 1640 CLEMENTS DETROIT, MI 48238	82-0680050		25,000.	0.			TO PROVIDE AND CREATE SPACES FOR NARRATIVE BUILDING TO SHIFT THE NARRATIVE THAT
EL PUENTE DE WILLIAMSMBURG, INC 211 SOUTH 4TH STREET BROOKLYN, NY 11211	11-2614265		32,500.	0.			FACILITATE COMMUNITY WORKSHOPS TO FORMALIZE PRINCIPALS AND DEMANDS, SURVEY AND MAP

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
ENVIRONMENTAL TRANSFORMATION MOVEMENT OF FLINT - 1432 WOODSLEA DRIVE - FLINT, MI 48507	83-2914543		6,750.	0.			A. WORK DIRECTLY WITH MEJC AND OTHER ENERGY DEMOCRACY PARTNERS TO DEVELOP AND SHARE AN
FORCE DETROIT 2727 SECOND AVENUE SUITE 162 DETROIT, MI 48201	85-2023097		25,000.	0.			CREATE BOTH IN-PERSON AND VIRTUAL ORGANIZING MATERIALS, HIRE A PHOTOGRAPHER, PAY
GENRE: URBAN ARTS, LLC 4218 NORTH 13TH STREET MILWAUKEE, WI 53209	85-3805022		19,750.	0.			THE GRANT FOR \$19,750 FROM CRITICAL MINDED WILL SUPPORT GENRE URBAN ARTS: REVOLUTIONARY ART
GODDESS GREAT 10728 DUPREY DETROIT, MI 48224	85-1424134		25,000.	0.			TO PROVIDE EDUCATION AWARENESS, LEADERSHIP TRAINING AND DEVELOPMENT ON INFANT AND MATERNAL
GRACE IN ACTION 1725 LAWNSDALE ST DETROIT, MI 48209	46-2588340		20,000.	0.			INCREASE INTERNET ACCESS IN UNDERSERVED NEIGHBORHOODS. INCREASE INTERNET ADOPTION THROUGH
GREATER DAYTON UNION COOP INITIATIVE - 840 GERMANTOWN ST - DAYTON, OH 45402	81-3470465		10,000.	0.			WE HAVE INVITED FORMATION, A FORMATION OF FOLKS WHO HAVE ONGOING WORK USING EMERGENT
ITSINSCOPE LLC 308 YOUNG COURT POMONA, CA 91766	84-3779255		10,000.	0.			TO GAIN AN UNDERSTANDING ABOUT THE LEGACY OF SLAVERY AND SETTLER COLONIALISM WHICH CREATED
JAMIE BROADNAX 4001-117 VIRGINIA BEACH BLVD #158 VIRGINIA BEACH, VA 23452	82-3837927		14,960.	0.			THE \$14,960 GRANT FROM CRITICAL MINDED WILL SPECIFICALLY SUPPORT BLACK GIRL NERDS IN
JAPANESE AMERICAN NATIONAL MUSEUM 100 N. CENTRAL AVENUE LOS ANGELES, CA 90230	95-3966024		8,000.	0.			THE GRANT WILL BE USED TO SUPPORT THE JAPANESE AMERICAN NATIONAL MUSEUM. THE \$8,000 FROM CRITICAL

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
JOURNEY TO HEALING 66 COLORADO HIGHLAND PARK, MI 48203	83-2494109		25,000.	0.			PROVIDE TRAINING AND EDUCATION TO COMMUNITY MEMBERS WITHIN THE CITY OF DETROIT, HAMTRAMCK AND
LAWRENCE N BURNEY III 1725 ALICEANNA ST BALTIMORE, MD 21231	21-7290927		15,200.	0.			THE \$15,200 GRANT FROM CRITICAL MINDED TO TRUE LAURELS' WILL GO TOWARDS THE NEXT ISSUE SCHEDULED
LEVELS AND BOSSES LLC 1085 99TH ST APT 4 BAY HARBOR ISLANDS, FL 33154	82-4968311		10,000.	0.			WE HAVE INVITED OTRO INVENTARIO, A FORMATION OF FOLKS WHO HAVE ONGOING WORK USING EMERGENT
LINKE FLIGL LLC 1154 BOSTON CORNER RD MILLERTON, NY 12546	81-3845654		99,395.	0.			THE LAND-BASED CULTURAL WORK AS CRITICAL PRACTICE TO BUILD A MORE JUST WORLD. WE CREATED SPACE
LUIS ALEJANDRO TAPIA 679 W 239TH ST #3H BRONX, NY 10463	05-4701433		10,000.	0.			WE HAVE INVITED FORMATION, A FORMATION OF FOLKS WHO HAVE ONGOING WORK USING EMERGENT
MARCH 13 FUND 4837 SOUTH HONORE STREET CHICAGO, IL 60609	82-5447737		39,325.	0.			THESE FUNDS WILL GO TOWARDS LOVE & PROTECT TO SUPPORT CRIMINALIZED SURVIVORS OF ABUSE IN THE
MICHIGAN ENVIRONMENTAL JUSTICE COALITION - PO BOX 441130. #9771 - DETROIT, MI 48244-1130	86-1272770		477,132.	0.			TO ACHIEVE A CLEAN, HEALTHY, AND SAFE ENVIRONMENT FOR MICHIGAN RESIDENTS MOST AFFECTED
SOLIDARITY MICHIGAN 428 W. LENAWEE ST. LANSING, MI 48933	83-1020828		10,258.	0.			1869-13 (6) BAIL SUPPORT.
MUSLIM ANTI RACISM COLLABORATIVE 8780 19TH STREET UNIT 291 ALTA LOMA, CA 91701	47-2444781		57,817.	0.			TO ADDRESS THE INTERSECTIONS OF ANTI-BLACK RACISM AND ISLAMOPHOBIA THROUGH

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
MUSLIMARC 8780 19TH ST. 291 ALTA LOMA, CA 91701	47-2444781		71,672.	0.			TO ADDRESS THE INTERSECTIONS OF ANTI-BLACK RACISM AND ISLAMOPHOBIA THROUGH
NEO PHILANTHROPY, INC. 45 W 36TH ST 6TH FLOOR NEW YORK, NY 10018	13-3191113		10,000.	0.			FUNDS TO VOCES UNIDAS NEO PHILANTHROPY INC FOR THEIR PARTICIPATION IN THE ESII PRAXIS PROJECT
NEWBURGH LGBTQIA CENTER 215 NORTH STREET APT2 NEWBURGH, NY 12550	82-3338305		10,000.	0.			FUNDS TO THE NEWBURGH LGBTQIA CENTER FOR THEIR PARTICIPATION IN THE ESII PRAXIS PROJECT.
NEWCC 7700 SECOND AVE SUITE 500 DETROIT, MI 48202	46-4008664		15,000.	0.			FACILITATE AN EQUIPMENT STIPEND FOR YOUR ORGANIZATION IN THE AMOUNT OF \$15,000
RESIDENCY ART GALLERY 8737 DARTFORD PLACE INGLEWOOD, CA 90305	56-4695709		15,000.	0.			TO GAIN AN UNDERSTANDING ABOUT THE LEGACY OF SLAVERY AND SETTLER COLONIALISM WHICH CREATED
ROCKAWAY DEVELOPMENT AND REVITALIZATION CORPORATION - 1920 MOTT AVENUE - FAR ROCKAWAY, NY 11691	11-2575794		20,000.	0.			FACILITATE COMMUNITY WORKSHOPS TO FORMALIZE PRINCIPALS AND DEMANDS, SURVEY AND MAP
ROSA MARIA ZAMARRON 4760 TERNES DETROIT, MI 48210	44-3940132		25,000.	0.			WILL IMPLEMENT WORK AS DETAILED IN THE ACCEPTED GRANT PROPOSAL, CREATING A VISUAL NARRATIVE THAT
SOCIAL AND ENVIRONMENTAL ENTREPRENEUR - 23532 CALABASAS RD SUITE 201 - CALABASAS, CA 91302	95-4116679		33,325.	0.			THESE FUNDS WILL GO TOWARDS SUPPORTING CRIMINALIZED SUVIVORS OF ABUSE IN THE FORM OF
SOCIAL GOOD FUND 12651-5473 SAN PABLO AVE. RICHMOND, CA 94805	46-1323531		1,801,664.	0.			TO MOVE UNTETHERED RESOURCES TO HELP SHAPE A FUTURE IN WHICH WE CAN ALL HEAL FROM GENERATIONS

Schedule I (Form 990)

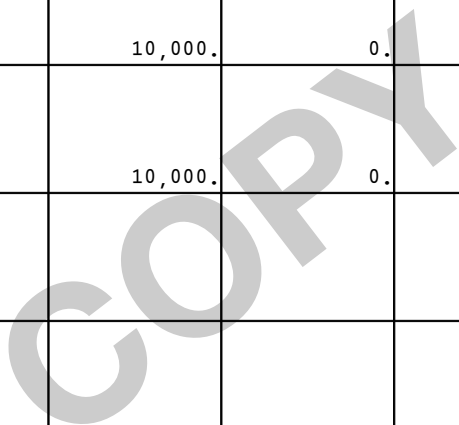
Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
SOLA CONTEMPORARY 5211 W. ADAMS #33 LOS ANGELES, CA 90016	61-1720055		15,000.	0.			TO GAIN AN UNDERSTANDING ABOUT THE LEGACY OF SLAVERY AND SETTLER COLONIALISM WHICH CREATED
SOULARDARITY 21 HIGHLAND ST. HIGHLAND PARK, MI 48203	47-2733535		16,750.	0.			WORK DIRECTLY WITH MEJC AND OTHER ENERGY DEMOCRACY PARTNERS TO DEVELOP AND SHARE AN
SUGAR LAW CENTER FOR ECONOMIC AND SOCIAL JUSTICE - 4605 CASS AVENUE - DETROIT, MI 48201	38-2971968		50,000.	0.			TO HOST COMMUNITY GATHERING, PROVIDE PUBLIC POLICY RESEARCH, LEGAL RESEARCH, LEGAL
THE FORUM FOR URBAN DESIGN, INC. 114 BOWERY, STE 301 NEW YORK, NY 10013	11-3756463		50,000.	0.			THE \$50,000 WILL BE USED TO SUPPORT A NEW TWO-YEAR FELLOWSHIP PROGRAM CULTIVATING CRITICS OF
THE NEW YORK TIMES COMPANY 420 MONTGOMERY STREET SAN FRANCISCO, CA 94104	13-1102020		174,000.	0.			FOR THE NEW YORK TIMES DIVERSIFYING CULTURAL CRITICISM PROGRAM TO DEVELOP CULTURAL CRITICS
THICK PRESS 3126 ELLICOTT ST. NW WASHINGTON, DC 20008	82-2383376		10,000.	0.			FUNDS TO THICK PRESS HEALING JUSTICE BOOK EMERGING FOR THEIR PARTICIPATION IN THE ESII
VANTA MEDIA LLC 3136 GIDEON LN COLUMBUS, OH 43219	47-5639802		22,000.	0.			THE GRANT WILL BE USED TO SUPPORT BLACK NERD PROBLEMS, A PROJECT OF VANTA MEDIA LLC.
WE WANT GREEN, TOO 3007 PENNSYLVANIA STREET DETROIT, MI 48214	45-5324148		16,750.	0.			A. WORK DIRECTLY WITH MEJC AND OTHER ENERGY DEMOCRACY PARTNERS TO DEVELOP AND SHARE AN
YOUTH VOLUME LLC 220 WEST WASHINGTON SUITE 125 MARQUETTE, MI 49855	85-3684502		57,110.	0.			TO SUPPORT MUSICAL CHANGEMAKERS AGES 4-18 USING THE SUZUKI METHOD, IMPROVISING AND SOCIAL

Schedule I (Form 990)

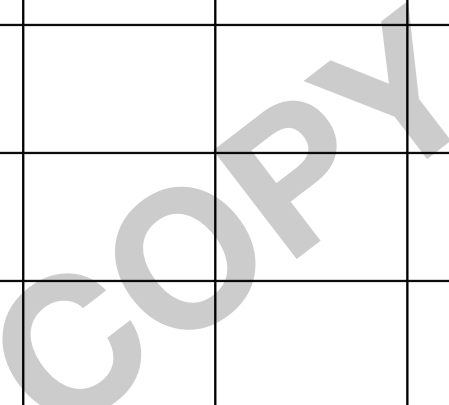
Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
BLACKSTAR FILM FESTIVAL 1901 S.9TH ST.SUITE 314 PHILADELPHIA, PA 19148	75-3129761		50,000.	0.			WE HOPE THAT THIS SUPPORT FROM CRITICAL MINDED WILL HELP ALLOW BLACKSTAR TO FOCUS ON THE TWO STATED
ASHLEY SPARKS 1709 N. AVE 56 LOS ANGELES, CA 90042	84-4470413		10,000.	0.			A PRAXIS COACH: YOU WILL HAVE ACCESS TO A DEDICATED COACH GROUNDED IN EMERAGENT STRATEGY ONCE
BKLYN BOIHOOD 1815 EASTERN PARKWAY, 4A BROOKLYN, NY 11233	82-1039850		10,000.	0.			TO CREATE SPACES WHERE BLACK, BROWN QUEER AND TRANS BOIS* AND OUR COMMUNITIES CAN CULTIVATE



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
GRANTED AWARDS	173	415,494.	0.		



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:

ALL GRANT EXPENDITURES ARE ACCOUNTED FOR, REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: 482FORWARD

(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE OF THIS GRANT IS TO SUPPORT MISTUDENTS DREAM IN ORGANIZING CAMPAIGNS FOR CONCRETE CHANGE AT THE INTERSECTION OF IMMIGRANT AND EDUCATION JUSTICE IN DETROIT PUBLIC AND

Part IV Supplemental Information

CHARTER SCHOOL.

NAME OF ORGANIZATION OR GOVERNMENT: CAKECUTTER INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: THESE TWO GRANTS SPECIFICALLY FURTHER CRITICAL MINDED EFFORTS TO: 1) INCREASE SUPPORT AND INVESTMENTS TO BIPOC-LED PUBLISHERS AND PLATFORMS TO CREATE ECONOMIC AND PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR CULTURAL CRITICS OF COLOR; AND 2) INVEST IN DOCUMENTING AND ARCHIVING THE HISTORY AND ROLE OF CRITICS OF COLOR TO ENSURE THAT THE EFFORTS OF CRITICAL MINDED LEAVE A FOOTPRINT AND REFERENCE POINT FOR FUTURE INITIATIVES WHILE ENSURING A FIRM FOUNDATION OF LEARNING.

NAME OF ORGANIZATION OR GOVERNMENT: COMEUNITY ONE STOP

(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE OF THIS GRANT IS TO SUPPORT COMEUNITY ONE STOP IN COLLABORATING WITH JOSIN'FOR CHANGE TO ESTABLISH THE EAST SIDE COMMUNITY LAND TRUST (ECLT) AND IMPLEMENT A COMMUNITY-LED VISIONING PROCESS FOR LAND USE AND RELATED PROGRAMMING.

NAME OF ORGANIZATION OR GOVERNMENT: NATIONAL BLACK TALK SHOW ASSOC

(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE OF THIS GRANT IS TO SUPPORT COMEUNITY ONE STOP IN COLLABORATING WITH JOSIN'FOR CHANGE TO ESTABLISH THE EAST SIDE COMMUNITY LAND TRUST (ECLT) AND IMPLEMENT A COMMUNITY-LED VISIONING PROCESS FOR LAND USE AND RELATED PROGRAMMING.

NAME OF ORGANIZATION OR GOVERNMENT: NYU TISCH SCHOOL OF ARTS

(H) PURPOSE OF GRANT OR ASSISTANCE: THIS GRANT IS FOR POP CONFERENCE 2023, A GATHERING DEDICATED TO MUSIC WRITERS OF ALL STRIPES: JOURNALISTS, CRITICS, SCHOLARS, ARTISTS AND FANS

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: SIDEWALK DETROIT

(H) PURPOSE OF GRANT OR ASSISTANCE: SIDEWALK DETROIT WILL IMPLEMENT WORK AS DETAILED IN THE ACCEPTED GRANT PROPOSAL, EXPLORING ISSUES OF SPATIAL EQUITY THAT THE ORGANIZATION HAS INTERSECTED WITH, AND SUBSEQUENTLY EXPANDING ITS PROGRAMMING AND ADDRESSING THE EFFECT OF THOSE ISSUES ON DETROIT'S CULTURAL HERITAGE AND RELATIONSHIPS TO PUBLIC SPACE MORE FULLY.

NAME OF ORGANIZATION OR GOVERNMENT: URBAN CORE COLLECTIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: A. WORK DIRECTLY WITH MEJC AND OTHER ENERGY DEMOCRACY PARTNERS TO DEVELOP AND SHARE AN ENERGY DEMOCRACY NARRATIVE

NAME OF ORGANIZATION OR GOVERNMENT: WARRIORS ON WHEELS OF METRO DETROIT

(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE OF THIS GRANT IS TO SUPPORT DISABILITY JUSTICE LEADERSHIP IN DETROIT, HIGHLAND PARK OR HAMTRAMCK

NAME OF ORGANIZATION OR GOVERNMENT: WE THE PEOPLE MI

(H) PURPOSE OF GRANT OR ASSISTANCE: WILL IMPLEMENT THE ADVANCING DETROIT'S "RIGHT RELATIONSHIP AESTHETIC PROJECT AS DETAILED IN THE ACCEPTED GRANT PROPOSAL, AND WILL SUPPORT A NETWORK OF CULTURAL ORGANIZERS TO DEVELOP RELATIONSHIPS AND CREATE A DETROIT BASED FESTIVAL TO UPLIFT CULTURE CREATION AS A FORM OF KNOWLEDGE PRODUCTION AND KNOWLEDGE TRANSFER.

NAME OF ORGANIZATION OR GOVERNMENT: WISDOM INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: THE WISDOM INSTITUTE WILL IMPLEMENT

Part IV Supplemental Information

THE PASSING THE TORCH & PRESERVING THE FLAME PROJECT AS DETAILED IN THE ACCEPTED GRANT PROPOSAL, AND WILL MODEL A HEALING AND GENDER JUSTICE PRACTICE, VISUALLY COMMUNICATED BY ART AND RITUAL IN ORDER TO ACTUALIZE WATER AFFORDABILITY IN DETROIT AND BUILD A BASE FOR ENFRANCHISED POWER.

NAME OF ORGANIZATION OR GOVERNMENT: ALLIANCE FOR GLOBAL JUSTICE

(H) PURPOSE OF GRANT OR ASSISTANCE: THESE FUNDS ARE TO BE USED FOR THE "TAKING BLACK PRIDE" EVENT AND ALL THE LOGISTICS THAT GO ALONG WITH IT

NAME OF ORGANIZATION OR GOVERNMENT:

AMALGAMATED CHARITABLE FOUNDATION, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO MOVE UNTETHERED RESOURCES TO HELP SHAPE A FUTURE IN WHICH WE CAN ALL HEAL FROM GENERATIONS OF COLONIAL TRAUMA AND THRIVE IN OUR CULTURES.

NAME OF ORGANIZATION OR GOVERNMENT: ADDIE TSAI

(H) PURPOSE OF GRANT OR ASSISTANCE: THE GRANT WILL BE USED TO SUPPORT JUST FEMME AND DANDY TO: PAY STIPENDS TO TEAM MEMBERS, PAY CONTRIBUTORS FOR VOLUME 3, AND PRINT THE FIRST THREE ISSUES OF THE JUST FEMME AND DANDY PUBLICATION.

NAME OF ORGANIZATION OR GOVERNMENT: ADELA NIEVES MARTINEZ

(H) PURPOSE OF GRANT OR ASSISTANCE: WILL IMPLEMENT THE 'CULTURE RECLAIM PROJECT' AS DETAILED IN THE ACCEPTED GRANT PROPOSAL, AND FOCUS ON BLACK, LATINX AND INDIGENOUS COMMUNITIES.

NAME OF ORGANIZATION OR GOVERNMENT: BASS INC

(H) PURPOSE OF GRANT OR ASSISTANCE: ENGAGING AND EMPOWERING RESIDENTS IN

Part IV Supplemental Information

ASSET MAPPING STRATEGY TO UNDERSTAND THE ISSUES WITHIN THE COMMUNITY AND TO ASSIST RESIDENTS TO ORGANIZE FOR PROACTIVE STRATEGIES THAT WILL BUILD COMMUNITY AND OPPOSE BARRIERS THAT RESTRICT THEIR ABILITY TO GOVERN AND SUSTAIN THE COMMUNITY THEY LIVE IN.

NAME OF ORGANIZATION OR GOVERNMENT: BLACK WOMXN FLOURISH LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: WE HAVE INVITED BLACK WOMXN FLOURISH A FORMATION OF FOLKS WHO HAVE ONGOING WORK USING EMERGENT STRATEGY, TO SUBMIT A SHORT PROPOSAL SHARING A BIT ABOUT YOUR WORK AND HOW EMERGENT STRATEGY COACHING AND CONNECTION WITH OTHER EMERGENT STRATEGISTS COULD SUPPORT YOUR WORK

NAME OF ORGANIZATION OR GOVERNMENT: BRANDON NORRIS

(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE OF THIS GRANT IS TO SUPPORT THE DETROIT PEOPLE'S ACTION IN IMPLEMENTING EDUCATIONAL PROGRAMMING AND CAMPAIGNS FOR CONCRETE CHANGE THAT IMPROVE THE SOCIOECONOMIC CONDITION OF AFRICAN-AMERICANS AND OTHER HISTORICALLY OPPRESSED PEOPLE

NAME OF ORGANIZATION OR GOVERNMENT: BRUJULAS INC

(H) PURPOSE OF GRANT OR ASSISTANCE: WE HAVE INVITED ESPEJOS CEMPAZUCHITL, A FORMATION OF FOLKS WHO HAVE ONGOING WORK USING EMERGENT STRATEGY, TO SUBMIT A SHORT PROPOSAL SHARING A BIT ABOUT YOUR WORK AND HOW EMERGENT STRATEGY COACHING AND CONNECTION WITH OTHER EMERGENT STRATEGISTS COULD SUPPORT YOUR WORK.

NAME OF ORGANIZATION OR GOVERNMENT: BRYCE DETROIT

(H) PURPOSE OF GRANT OR ASSISTANCE: WILL IMPLEMENT THE DETROIT DESIGN

Part IV Supplemental Information

DIPLOMACY PROJECT AS DETAILED IN THE ACCEPTED GRANT PROPOSAL, AND WILL USE ART INSTALLATIONS, MEDIA PRODUCTION, AND A RANGE OF PROGRAMMING TO HIGHLIGHT NEW MODELS OF 'BLACK-LED' NEIGHBORHOOD CULTURAL AND ECONOMIC DEVELOPMENT IN THE NORTH END.

NAME OF ORGANIZATION OR GOVERNMENT: CANOPY CANOPY CANOPY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: THE GRANT WILL BE USED TO SUPPORT THE TRIPLE CANOPY'S TWENTY- EIGHTH ISSUE, LIFE WRITING (JUNE 2022-JANUARY 2023)

NAME OF ORGANIZATION OR GOVERNMENT: CHANGE ELEMENTAL

(H) PURPOSE OF GRANT OR ASSISTANCE: WE HAVE INVITED FORMATION, A FORMATION OF FOLKS WHO HAVE ONGOING WORK USING EMERGENT STRATEGY, TO SUBMIT A SHORT PROPOSAL SHARING A BIT ABOUT YOUR WORK AND HOW EMERGENT STRATEGY COACHING AND CONNECTION WITH OTHER EMERGENT STRATEGISTS COULD SUPPORT YOUR WORK.

NAME OF ORGANIZATION OR GOVERNMENT: CRAFT TIMES

(H) PURPOSE OF GRANT OR ASSISTANCE: A. CRAFT WILL WORK DIRECTLY WITH MEJC AND OTHER ENERGY DEMOCRACY PARTNERS TO DEVELOP AND SHARE AN ENERGY DEMOCRACY NARRATIVE B. ATTEND THREE CORE MEETINGS ABOUT ENERGY JUSTICE AND DEMOCRACY COMMUNICATIONS FOR CO-DESIGN AND RESEARCH FINDINGS C. SHARE CREATED CONTENT AND UPLIFT NARRATIVES ON SOCIAL MEDIA NETWORKS, SHARE KEY NARRATIVES WITH CONSTITUENCY D. SUPPORT THE DEVELOPMENT OF MICHIGAN-BASED NETWORK OF ENERGY JUSTICE COMMUNICATIONS MATERIALS INCLUDING, BUT NOT LIMITED TO OP-EDS, VIDEOS, SOCIAL MEDIA CONTENT, AND TALKING POINTS.

NAME OF ORGANIZATION OR GOVERNMENT: CRISTINA ESCOBAR ANDRADE

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: THE \$27,000 GRANT FROM CRITICAL MINDED WILL SPECIFICALLY SUPPORT LATINAMEDIA.CO IN THEIR GENERAL OPERATING TO COVER SUCH THINGS AS: 1) COMMISSIONED ARTICLES: PAY WRITERS \$150 PER 600+ WORD PIECE, PUBLISHING EIGHT ARTICLES PER MONTH FOR A TWELVE-MONTH PERIOD; 2) WEBSITE REFRESH: FLAT FEE OF \$5,000 TO WORK WITH A VENDOR TO REVAMP LATINAMEDIA.CO'S WORDPRESS INSTANCE WITH LATINAMEDIA.CO CO-FOUNDER NICOLA SCHULZE SERVING AS PROJECT MANAGER; 3) \$5,000 EDITING AND MARKETING COSTS TO PAY LATINAMEDIA.CO CO-FOUNDERS A MONTHLY RETAINER TO EDIT AND MARKET 96 INDIVIDUAL PIECES AT A RATE OF \$75/PIECE AND UNDERWRITE SOME OF EDITORS' TIME TO THINK CREATIVELY ABOUT HOW TO GROW THE SITE. THE PROJECT IS ALIGNED WITH CRITICAL MINDED'S GOAL TO ENSURE INDIVIDUAL CRITICS OF COLOR AND BIPOC-LED PUBLISHERS ARE MORE RESILIENT AND CREATE ECONOMIC AND PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR CULTURAL CRITICS OF COLOR.

NAME OF ORGANIZATION OR GOVERNMENT:

DET. BLACK COMMUNITY FOOD SECURITY NET

(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE OF THIS GRANT IS TO SUPPORT DETROIT PEOPLE'S FOOD CO-OP IN INCREASING DETROIT COMMUNITIES' ACCESS TO NUTRITIOUS FOOD, PROGRAMMING, AND INFORMATION ABOUT COOPERATIVE ECONOMICS, NUTRITION, FOOD AND ECONOMIC JUSTICE, AND OTHER ISSUES THAT IMPACT THE BLACK COMMUNITY.

NAME OF ORGANIZATION OR GOVERNMENT: DETROIT IS DIFFERENT INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE AND CREATE SPACES FOR NARRATIVE BUILDING TO SHIFT THE NARRATIVE THAT CONSISTENTLY CREATES ECONOMIC, SOCIAL AND COMMUNITY INJUSTICES FOR RESIDENTS IN THE CITY OF DETROIT AND SURROUNDING CITIES.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: EL PUENTE DE WILLIASMBURG, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: FACILITATE COMMUNITY WORKSHOPS TO FORMALIZE PRINCIPALS AND DEMANDS, SURVEY AND MAP NEIGHBORHOODS, AND CONDUCT A SERIES OF SHORT, ENGAGING TECHNOLOGY TRAINING EVENTS.

NAME OF ORGANIZATION OR GOVERNMENT:

ENVIRONMENTAL TRANSFORMATION MOVEMENT OF FLINT

(H) PURPOSE OF GRANT OR ASSISTANCE: A. WORK DIRECTLY WITH MEJC AND OTHER ENERGY DEMOCRACY PARTNERS TO DEVELOP AND SHARE AN ENERGY DEMOCRACY NARRATIVE B. ATTEND CORE MEETINGS ABOUT ENERGY JUSTICE AND DEMOCRACY COMMUNICATIONS FOR CO-DESIGN AND RESEARCH FINDINGS C.SHARE CREATED CONTENT AND UPLIFT NARRATIVES ON SOCIAL MEDIA NETWORKS, SHARE KEY NARRATIVES WITH CONSTITUENCY D. SUPPORT THE DEVELOPMENT OF MICHIGAN-BASED NETWORK OF ENERGY JUSTICE COMMUNICATIONS MATERIALS INCLUDING, BUT NOT LIMITED TO OP-EDS, VIDEOS, SOCIAL MEDIA CONTENT, AND TALKING POINTS.

NAME OF ORGANIZATION OR GOVERNMENT: FORCE DETROIT

(H) PURPOSE OF GRANT OR ASSISTANCE: CREATE BOTH IN-PERSON AND VIRTUAL ORGANIZING MATERIALS, HIRE A PHOTOGRAPHER, PAY RESIDENTS STIPENDS FOR SHARING THEIR EXPERIENCES, PARTNER WITH BOTH TECHNICAL AND COMMUNITY-BASED PARTNERS, AND EXECUTE POWER MAPPING AND ORGANIZING LEADERSHIP WORKSHOPS EDUCATING RESIDENTS ON THE RESPONSIBILITY DIFERENCES IN WATER BETWEEN RESIDENTS, GLWA, AND DWSO, AND THE BASICS OF ORGANIZING, TO EMPOWER 200 FAMILIES WITH INFORMATION TO SPEAK OUT TOGETHER.

NAME OF ORGANIZATION OR GOVERNMENT: GENRE: URBAN ARTS, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: THE GRANT FOR \$19,750 FROM CRITICAL

Part IV Supplemental Information

MINDED WILL SUPPORT GENRE URBAN ARTS: REVOLUTIONARY ART CRITICISM RESIDENCY TO PROVIDE PARTICIPANTS RESOURCES THAT HELP THEM: 1) DECOLONIZE ART SPACES; 2) CENTER BIPOC CRITICISM AND ANALYSIS OF ART; 3) MENTOR AND DEVELOP BIPOC WRITERS IN ART CRITICISM; 4) PROVIDE A PLATFORM FOR DIVERSE WRITTEN PERSPECTIVES OF ART; AND 5) DEVELOP A CULTURE OF BELONGING FOR BIPOC COMMUNITY MEMBERS IN THE ART SPACES IN THEIR COMMUNITIES. ADDITIONALLY, IN ITS SECOND YEAR, THE PROJECT WILL INCREASE ACCESS TO CONTENT BY INCLUDING A PODCAST AND VIDEO COMPONENT; CONDUCT MORE IN DEPTH ARTIST INTERVIEWS FOR A BEHIND THE SCENES LOOK INTO THE PROCESS ARTIST UNDERTAKE IN THEIR WORK; PUBLISH A BOOK OF ESSAYS; AND DEVELOP LEARNING REFLECTIONS TO SHARE BACK WITH THE BROADER COMMUNITY OF CRITICS. THE SUPPORT OF THIS GRANT FURTHERS CRITICAL MINDED'S KEY OUTCOME AND GOAL OF SUPPORTING INDIVIDUAL CRITICS OF COLOR AND BIPOC-LED PUBLISHERS TO ENSURE THEY ARE MORE RESILIENT.

NAME OF ORGANIZATION OR GOVERNMENT: GODDESS GREAT

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE EDUCATION AWARENESS, LEADERSHIP TRAINING AND DEVELOPMENT ON INFANT AND MATERNAL MORTALITY.

NAME OF ORGANIZATION OR GOVERNMENT: GRACE IN ACTION

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE INTERNET ACCESS IN UNDERSERVED NEIGHBORHOODS. INCREASE INTERNET ADOPTION THROUGH DIGITAL LITERACY PROGRAMMING. TRAIN AND DEVELOP RESIDENTS AS DIGITAL STEWARDS. STRENGTHEN NEIGHBORHOODS THROUGH COMMUNITY ORGANIZING, PARTICIPATION, COLLABORATION, AND RESILIENCY

NAME OF ORGANIZATION OR GOVERNMENT: GREATER DAYTON UNION COOP INITIATIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: WE HAVE INVITED FORMATION, A

Part IV Supplemental Information

FORMATION OF FOLKS WHO HAVE ONGOING WORK USING EMERGENT STRATEGY, TO
SUBMIT A SHORT PROPOSAL SHARING A BIT ABOUT YOUR WORK AND HOW EMERGENT
STRATEGY COACHING AND CONNECTION WITH OTHER EMERGENT STRATEGISTS COULD
SUPPORT YOUR WORK.

NAME OF ORGANIZATION OR GOVERNMENT: ITSINSCOPE LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO GAIN AN UNDERSTANDING ABOUT THE
LEGACY OF SLAVERY AND SETTLER COLONIALISM WHICH CREATED THE FOUNDATION OF
ENDURING CONDITIONS FOR HOW WE DEFINE CREATIVE WORK IN TRADITIONAL
CULTURAL INSTITUTIONS AND HOW IT PLAYS OUT WITHIN A CAPITALIST ECONOMIC
SYSTEM.TO CREATE A ROADMAP FOR WHAT A REPARATIVE PROCESS WOULD ENTAIL TO
DEVELOP COMMUNITY REINVESTMENT STRATEGIES FOR THE ORGANIZATIONS,
BUSINESSES, AND INSTITUTIONS THAT ARE MARGINALIZED FROM CREATING MUTUAL
BENEFITS FROM THEIR CULTURAL WORK ACROSS THE CREATIVE VALUE CHAIN.TO PLAN
AND IMPLEMENT A STRATEGY FOR HOW STAKEHOLDERS CAN COLLABORATE ACROSS THE
ARTS AND CULTURE ECOSYSTEM IN THEIR LOCAL COMMUNITY THAT BUILDS REVENUE
GENERATING MODELS BUILDING COMMUNITY WEALTH THROUGH CREATIVE PLACEMAKING.

NAME OF ORGANIZATION OR GOVERNMENT: JAMIE BROADNAX

(H) PURPOSE OF GRANT OR ASSISTANCE: THE \$14,960 GRANT FROM CRITICAL
MINDED WILL SPECIFICALLY SUPPORT BLACK GIRL NERDS IN GENERAL OPERATING TO
UNDERWRITE THE FOLLOWING: STREAMING SOFTWARE EXPENSES; SEO UPGRADE;
SETTING UP ACCOUNTING SERVICES THROUGH BILL.COM TO PAY FREELANCERS;
INCREASING TRAVEL BUDGET FOR EVENTS COVERAGE; INCREASING PAY FOR CURRENT
WRITERS AND EDITORS; HIRING MORE WRITERS; AND CREATING BUDGET TO PAY
PODCASTERS.

NAME OF ORGANIZATION OR GOVERNMENT: JAPANESE AMERICAN NATIONAL MUSEUM

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: THE GRANT WILL BE USED TO SUPPORT THE JAPANESE AMERICAN NATIONAL MUSEUM. THE \$8,000 FROM CRITICAL MINDED TO THE JAPANESE AMERICAN NATIONAL MUSEUM WILL SPECIFICALLY GO TOWARDS THE IRENE YAMAMOTO ARTS WRITERS FELLOWSHIP

NAME OF ORGANIZATION OR GOVERNMENT: JOURNEY TO HEALING

(H) PURPOSE OF GRANT OR ASSISTANCE: PROVIDE TRAINING AND EDUCATION TO COMMUNITY MEMBERS WITHIN THE CITY OF DETROIT, HAMTRAMCK AND HIGHLAND PARK.

NAME OF ORGANIZATION OR GOVERNMENT: LAWRENCE N BURNEY III

(H) PURPOSE OF GRANT OR ASSISTANCE: THE \$15,200 GRANT FROM CRITICAL MINDED TO TRUE LAURELS' WILL GO TOWARDS THE NEXT ISSUE SCHEDULED FOR PUBLICATION IN 2023.

NAME OF ORGANIZATION OR GOVERNMENT: LEVELS AND BOSSES LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: WE HAVE INVITED OTRO INVENTARIO, A FORMATION OF FOLKS WHO HAVE ONGOING WORK USING EMERGENT STRATEGY, TO SUBMIT A SHORT PROPOSAL SHARING A BIT ABOUT YOUR WORK AND HOW EMERGENT STRATEGY COACHING AND CONNECTION WITH OTHER EMERGENT STRATEGISTS COULD SUPPORT YOUR WORK.

NAME OF ORGANIZATION OR GOVERNMENT: LINKE FLIGL LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: THE LAND-BASED CULTURAL WORK AS CRITICAL PRACTICE TO BUILD A MORE JUST WORLD. WE CREATED SPACE TO RECLAIM OUR INHERENT CONNECTION TO LAND, TRADITION AND EACH OTHER WHILE CONFRONTING LEGACIES OF COLONIALISM, ANTISEMITISM AND ASSIMILATION.

NAME OF ORGANIZATION OR GOVERNMENT: LUIS ALEJANDRO TAPIA

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: WE HAVE INVITED FORMATION, A FORMATION OF FOLKS WHO HAVE ONGOING WORK USING EMERGENT STRATEGY, TO SUBMIT A SHORT PROPOSAL SHARING A BIT ABOUT YOUR WORK AND HOW EMERGENT STRATEGY COACHING AND CONNECTION WITH OTHER EMERGENT STRATEGISTS COULD SUPPORT YOUR WORK.

NAME OF ORGANIZATION OR GOVERNMENT: MARCH 13 FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: THESE FUNDS WILL GO TOWARDS LOVE & PROTECT TO SUPPORT CRIMINALIZED SURVIVORS OF ABUSE IN THE FORM OF COMMISSARY, CARE PACKAGES, DIRECT SUPPORT, AND FAMILY SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT:

MICHIGAN ENVIRONMENTAL JUSTICE COALITION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO ACHIEVE A CLEAN, HEALTHY, AND SAFE ENVIRONMENT FOR MICHIGAN RESIDENTS MOST AFFECTED BY INADEQUATE POLICIES. WE WORK IN ALIGNMENT WITH THE PRINCIPLES OF ENVIRONMENTAL JUSTICE, AND CULTIVATE RELATIONSHIPS BASED ON THE JEMEZ PRINCIPLES. WE BUILD POWER AND UNITY WITHIN OUR COMMUNITY, SO WE ALL CAN THRIVE.

NAME OF ORGANIZATION OR GOVERNMENT: MUSLIM ANTI RACISM COLLABORATIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO ADDRESS THE INTERSECTIONS OF ANTI-BLACK RACISM AND ISLAMOPHOBIA THROUGH REGULAR PROGRAMMING IN DETROIT AND SOUTHERN CALIFORNIA AND PROVIDING REGULAR VIRTUAL BUILDING SPACES AND MEMBER-LED GATHERINGS.

NAME OF ORGANIZATION OR GOVERNMENT: MUSLIMARC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO ADDRESS THE INTERSECTIONS OF ANTI-BLACK RACISM AND ISLAMOPHOBIA THROUGH REGULAR PROGRAMMING IN DETROIT

Part IV Supplemental Information

AND SOUTHERN CALIFORNIA AND PROVIDING REGULAR VIRTUAL BUILDING SPACES AND MEMBER-LED GATHERINGS.

NAME OF ORGANIZATION OR GOVERNMENT: RESIDENCY ART GALLERY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO GAIN AN UNDERSTANDING ABOUT THE LEGACY OF SLAVERY AND SETTLER COLONIALISM WHICH CREATED THE FOUNDATION OF ENDURING CONDITIONS FOR HOW WE DEFINE CREATIVE WORK IN TRADITIONAL CULTURAL INSTITUTIONS AND HOW IT PLAYS OUT WITHIN A CAPITALIST ECONOMIC SYSTEM.

NAME OF ORGANIZATION OR GOVERNMENT:

ROCKAWAY DEVELOPMENT AND REVITALIZATION CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: FACILITATE COMMUNITY WORKSHOPS TO FORMALIZE PRINCIPALS AND DEMANDS, SURVEY AND MAP NEIGHBORHOODS, AND CONDUCT A SERIES OF SHORT, ENGAGING TECHNOLOGY TRAINING EVENTS. DIGITAL EQUITY PLAN

NAME OF ORGANIZATION OR GOVERNMENT: ROSA MARIA ZAMARRON

(H) PURPOSE OF GRANT OR ASSISTANCE: WILL IMPLEMENT WORK AS DETAILED IN THE ACCEPTED GRANT PROPOSAL, CREATING A VISUAL NARRATIVE THAT HIGHLIGHTS THE IMPORTANCE OF DECOLONIZING SPACES AS WELL AS DETROIT'S CHANGING NEIGHBORHOODS. IN ADDITION, THE GRANTEE WILL PARTICIPATE IN A LEARNING COMMUNITY OF RADICAL IMAGINATION FUND AWARDEES.

NAME OF ORGANIZATION OR GOVERNMENT: SOCIAL AND ENVIRONMENTAL ENTREPRENEUR

(H) PURPOSE OF GRANT OR ASSISTANCE: THESE FUNDS WILL GO TOWARDS SUPPORTING CRIMINALIZED SUVIVORS OF ABUSE IN THE FORM OF COMMISSARY, CARE PACKAGES, AND FAMILY SUPPORT.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: SOCIAL GOOD FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: TO MOVE UNTETHERED RESOURCES TO HELP SHAPE A FUTURE IN WHICH WE CAN ALL HEAL FROM GENERATIONS OF COLONIAL TRAUMA AND THRIVE IN OUR CULTURES.

NAME OF ORGANIZATION OR GOVERNMENT: SOLA CONTEMPORARY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO GAIN AN UNDERSTANDING ABOUT THE LEGACY OF SLAVERY AND SETTLER COLONIALISM WHICH CREATED THE FOUNDATION OF ENDURING CONDITIONS FOR HOW WE DEFINE CREATIVE WORK IN TRADITIONAL CULTURAL INSTITUTIONS AND HOW IT PLAYS OUT WITHIN A CAPITALIST ECONOMIC SYSTEM.

NAME OF ORGANIZATION OR GOVERNMENT: SOULARDARITY

(H) PURPOSE OF GRANT OR ASSISTANCE: WORK DIRECTLY WITH MEJC AND OTHER ENERGY DEMOCRACY PARTNERS TO DEVELOP AND SHARE AN ENERGY DEMOCRACY NARRATIVE B. ATTEND THREE CORE MEETINGS ABOUT ENERGY JUSTICE AND DEMOCRACY COMMUNICATIONS FOR CO-DESIGN AND RESEARCH FINDINGS C. SHARE CREATED CONTENT AND UPLIFT NARRATIVES ON SOCIAL MEDIA NETWORKS, SHARE KEY NARRATIVES WITH CONSTITUENCY D. SUPPORT THE DEVELOPMENT OF MICHIGAN-BASED NETWORK OF ENERGY JUSTICE COMMUNICATIONS MATERIALS INCLUDING, BUT NOT LIMITED TO OP-EDS, VIDEOS, SOCIAL MEDIA CONTENT, AND TALKING POINTS

NAME OF ORGANIZATION OR GOVERNMENT:

SUGAR LAW CENTER FOR ECONOMIC AND SOCIAL JUSTICE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO HOST COMMUNITY GATHERING, PROVIDE PUBLIC POLICY RESEARCH, LEGAL RESEARCH, LEGAL REPRESENTATION AND ADVOCACY, COMMUNITY OUTREACH TO RESIDENTS IN DETROIT.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: THE FORUM FOR URBAN DESIGN, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: THE \$50,000 WILL BE USED TO SUPPORT A NEW TWO-YEAR FELLOWSHIP PROGRAM CULTIVATING CRITICS OF COLOR ON ISSUES OF ARCHITECTURE, PLANNING, DEVELOPMENT, AND URBANISM.

NAME OF ORGANIZATION OR GOVERNMENT: THE NEW YORK TIMES COMPANY

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR THE NEW YORK TIMES DIVERSIFYING CULTURAL CRITICISM PROGRAM TO DEVELOP CULTURAL CRITICS FROM UNDERREPRESENTED BACKGROUNDS.

NAME OF ORGANIZATION OR GOVERNMENT: THICK PRESS

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDS TO THICK PRESS HEALING JUSTICE BOOK EMERGING FOR THEIR PARTICIPATION IN THE ESII PRAXIS PROJECTS.

NAME OF ORGANIZATION OR GOVERNMENT: VANTA MEDIA LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: THE GRANT WILL BE USED TO SUPPORT BLACK NERD PROBLEMS, A PROJECT OF VANTA MEDIA LLC. SPECIFICALLY, FUNDS WILL BE USED FOR MONTHLY MAINTENANCE ON THE BLACK NERD PROBLEMS' SITE, WHICH INCLUDES WEBSITE HOSTING / MONITORING, MAILCHIMP FOR WEEKLY NEWSLETTER AND PODCAST HOSTING; FOUR (4) STAFF WRITERS AND TWO (2) COPYEDITORS (ONE PRIMARY, ONE HANDLING SOCIAL MEDIA AND AS A SECONDARY EDITOR).

NAME OF ORGANIZATION OR GOVERNMENT: WE WANT GREEN, TOO

(H) PURPOSE OF GRANT OR ASSISTANCE: A. WORK DIRECTLY WITH MEJC AND OTHER ENERGY DEMOCRACY PARTNERS TO DEVELOP AND SHARE AN ENERGY DEMOCRACY NARRATIVE B. ATTEND THREE CORE MEETINGS ABOUT ENERGY JUSTICE AND

Part IV Supplemental Information

DEMOCRACY COMMUNICATIONS FOR CO-DESIGN AND RESEARCH FINDINGS C. CO-HOST A REGIONAL ENERGY DEMOCRACY OPEN HOUSE WITH MEJC ABOUT LOCAL ENERGY IMPACTS ON EJ (LOW-INCOME AND PEOPLE OF COLOR) COMMUNITIES D. SHARE CREATED CONTENT AND UPLIFT NARRATIVES ON SOCIAL MEDIA NETWORKS, SHARE KEY NARRATIVES WITH CONSTITUENCY E. SUPPORT THE DEVELOPMENT OF MICHIGAN-BASED NETWORK OF ENERGY JUSTICE COMMUNICATIONS MATERIALS INCLUDING, BUT NOT LIMITED TO OP-EDS, VIDEOS, SOCIAL MEDIA CONTENT, AND TALKING POINTS."

NAME OF ORGANIZATION OR GOVERNMENT: YOUTH VOLUME LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT MUSICAL CHANGEMAKERS AGES 4-18 USING THE SUZUKI METHOD, IMPROVISING AND SOCIAL JUSTICE TEACHING PRACTICES. VIOLIN AND CELLO STUDENTS ENJOY PRIVATE LESSONS, GROUP CLASSES, COMMUNITY PERFORMANCES, AND WORKSHOPS WITH LOCAL MUSICIANS.

NAME OF ORGANIZATION OR GOVERNMENT: BLACKSTAR FILM FESTIVAL

(H) PURPOSE OF GRANT OR ASSISTANCE: WE HOPE THAT THIS SUPPORT FROM CRITICAL MINDED WILL HELP ALLOW BLACKSTAR TO FOCUS ON THE TWO STATED VITAL NEXT STEPS IN THEIR PROPOSAL--CREATING MORE OPPORTUNITIES FOR AUDIENCE ENGAGEMENT AND INCREASING STANG.

NAME OF ORGANIZATION OR GOVERNMENT: ASHLEY SPARKS

(H) PURPOSE OF GRANT OR ASSISTANCE: A PRAXIS COACH: YOU WILL HAVE ACCESS TO A DEDICATED COACH GROUNDED IN EMERGENT STRATEGY ONCE EVERY 4-6 WEEKS FOR 6 MONTHS

NAME OF ORGANIZATION OR GOVERNMENT: BKLYN BOIHOOD

(H) PURPOSE OF GRANT OR ASSISTANCE: TO CREATE SPACES WHERE BLACK, BROWN

Part IV Supplemental Information

QUEER AND TRANS BOIS* AND OUR COMMUNITIES CAN CULTIVATE STORIES, DREAMS
AND CREATIVE WORK."

COPY

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization **ALLIED MEDIA PROJECTS, INC.** Employer identification number **01-0559608**

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate 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. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (such as maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment?	4a	X
b Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X
c Participate in or receive payment from an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?	5a	X
b Any related organization?	5b	X
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?	6a	X
b Any related organization?	6b	X
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) 2022

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-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) RASHID SHABAZZ CRITICAL MINDED EXECUTIVE DIRECTOR	(i)	173,259.	0.	0.	0.	5,929.	179,188.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARIANNE RUIZ KAIROS EXECUTIVE DIRECTOR	(i)	147,085.	0.	0.	0.	6,645.	153,730.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JEANETTE L. LEE FORMER EXECUTIVE DIRECTOR	(i)	97,033.	0.	0.	0.	2,502.	99,535.	0.
	(ii)	0.	0.	52,000.	0.	0.	52,000.	0.
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

COPY

SCHEDULE L
(Form 990)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open To Public Inspection

Name of the organization

ALLIED MEDIA PROJECTS, INC.

Employer identification number

01-0559608

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
			Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No

Total \$ _____

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
NATHANIEL MULLEN, III	FAMILY RELATIONSHIP	44,778.	EMPLOYEE		X

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: NATHANIEL MULLEN, III

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

FAMILY RELATIONSHIP - HUSBAND OF THE EXECUTIVE DIRECTOR, JEANETTE LEE

(C) AMOUNT OF TRANSACTION \$ 44,778.

(D) DESCRIPTION OF TRANSACTION: EMPLOYEE THE ORGANIZATION PAYS WAGES TO NATHANIEL MULLEN, III.

(E) SHARING OF ORGANIZATION REVENUES? = NO

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

ALLIED MEDIA PROJECTS, INC.

Employer identification number

01-0559608

FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION DOES NOT HAVE ANY COMMITTEES WITH AUTHORITY TO MAKE
DECISIONS INDEPENDENT OF THE BOARD OF DIRECTORS.

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

THE BOARD OF DIRECTORS ENGAGES AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTING
FIRM TO PREPARE THE FORM 990. UPON COMPLETION, IT IS REVIEWED BY THE
ORGANIZATION'S EXECUTIVE DIRECTOR AND TREASURER. A COPY OF FORM 990 IS
PROVIDED TO ALL BOARD MEMBERS PRIOR TO BEING FILED WITH THE INTERNAL
REVENUE SERVICE.

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

MEMBERS ARE PROVIDED A COPY OF THE ORGANIZATION'S BYLAWS WHICH REQUIRES
THEM TO DISCLOSE ANY CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

A COMPENSATION COMMITTEE MAKES RECOMMENDATIONS TO THE BOARD OF DIRECTORS
WHO REVIEW AND APPROVE THE EXECUTIVE DIRECTOR'S SALARY.

FORM 990, PART VI, SECTION C, LINE 19:

REQUESTS FOR ACCESS TO DOCUMENTS, WHICH BY LAW ARE OPEN TO PUBLIC ACCESS,
MAY BE MADE BY APPLICATION TO THE ORGANIZATION.

FORM 990, PART IX, LINE 11G, OTHER FEES:

PROFESSIONAL SERVICES:

PROGRAM SERVICE EXPENSES

1,119,866.

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

Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization ALLIED MEDIA PROJECTS, INC.	Employer identification number 01-0559608
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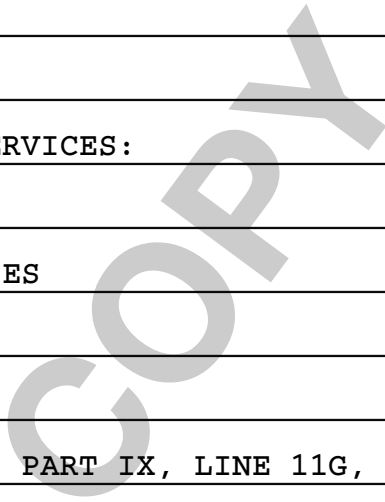
MANAGEMENT AND GENERAL EXPENSES	598,329.
FUNDRAISING EXPENSES	4,000.
TOTAL EXPENSES	1,722,195.

PROJECT COORDINATORS:

PROGRAM SERVICE EXPENSES	4,694,292.
MANAGEMENT AND GENERAL EXPENSES	35,379.
FUNDRAISING EXPENSES	15,367.
TOTAL EXPENSES	4,745,038.

SPEAKERS, TRAINERS & EVENT SERVICES:

PROGRAM SERVICE EXPENSES	2,290,623.
MANAGEMENT AND GENERAL EXPENSES	29,449.
FUNDRAISING EXPENSES	2,296.
TOTAL EXPENSES	2,322,368.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	8,789,601.



**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **ALLIED MEDIA PROJECTS, INC.** Employer identification number **01-0559608**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
LOVE BUILDING LLC - 86-2163555 4126 THIRD STREET DETROIT, MI 48201	MANAGEMENT OF REAL PROPERTY OWNED BY ALLIED MEDIA PROJECTS, INC.	MICHIGAN	22,880.	5,262,467.	ALLIED MEDIA PROJECTS, INC.

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
ALLIED MEDIA ACTION FUND - 85-0895977 4126 3RD ST. DETROIT, MI 48201	TO EDUCATE LEGISLATORS AND THE GENERAL PUBLIC ON ISSUES FACING MICHIGAN AND	MICHIGAN	501(C)(4)		ALLIED MEDIA PROJECTS, INC.	X	
LOVE BLDG, INCORPORATED - 86-2120563 4126 3RD ST. DETROIT, MI 48201	PUBLIC SUPPORTING ORGANIZATION	MICHIGAN	501(C)(3)	LINE 12 TYPE 1	ALLIED MEDIA PROJECTS, INC.	X	

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

Schedule R (Form 990) 2022

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ALLIED MEDIA ACTION FUND	O	60,811.	ACTUAL CASH TRANSFERS
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

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