

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)
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.

2022

Open to Public Inspection

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

B Check if applicable: <input checked="" 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 OPERATION UNDERGROUND RAILROAD, INC.		D Employer identification number 46-3614979
	Doing business as		E Telephone number 818-850-6146
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	City or town, state or province, country, and ZIP or foreign postal code MURRAY, UT 84157		G Gross receipts \$ 56,673,885.
	F Name and address of principal officer: CARLOS BAUER SAME AS C ABOVE		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: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **WWW.OURRESCUE.ORG**

K Form of organization: Corporation Trust Association Other **L** Year of formation: **2013** **M** State of legal domicile: **UT**

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WE EXIST TO RESCUE CHILDREN FROM SEX TRAFFICKING AND SEXUAL EXPLOITATION.		
	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	7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	3
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	131
	6 Total number of volunteers (estimate if necessary)	6	61825
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	177,546.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	39,658,518.	27,637,158.
	9 Program service revenue (Part VIII, line 2g)	890,559.	1,340,239.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,426,574.	154,424.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	334,418.	230,903.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	42,310,069.	29,362,724.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	12,130,165.	9,533,809.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	7,723,644.	14,812,899.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	6,221,265.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	11,618,765.	20,134,511.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	31,472,574.	44,481,219.	
19 Revenue less expenses. Subtract line 18 from line 12	10,837,495.	-15,118,495.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 82,138,813.	End of Year 71,484,414.
	21 Total liabilities (Part X, line 26)	1,379,652.	10,852,345.
	22 Net assets or fund balances. Subtract line 21 from line 20	80,759,161.	60,632,069.

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 	Date 5/15/2023			
	CARLOS BAUER, TREASURER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name MARC A. METCALF	Preparer's signature MARC A. METCALF	Date 05/15/23	Check if self-employed <input type="checkbox"/>	PTIN P00170461
	Firm's name TANNER LLC	Firm's EIN 20-2253063	Phone no. 801-532-7444		
	Firm's address 36 S STATE STREET, SUITE 600 SALT LAKE CITY, UT 84111				

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: WE EXIST TO RESCUE CHILDREN FROM SEX TRAFFICKING AND SEXUAL EXPLOITATION.

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 No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 31,910,480. including grants of \$ 9,533,809.) (Revenue \$ 1,588,232.) RESCUING CHILDREN FROM SEX TRAFFICKING AND SEXUAL EXPLOITATION.

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 31,910,480.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

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

Table with 3 columns: Question ID, Yes, No. Rows 1a, 1b, 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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, 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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (7); 1b Enter the number of voting members included on line 1a, above, who are independent (3); 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: a The governing body? (X); b 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.)

Table with 3 columns: Question, Yes, No. Rows include: 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? a The organization's CEO, Executive Director, or top management official (X); b 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? (X).

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA, FL, ME, OH, OK, RI, SC, TN, UT, CO, HI, MS
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. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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
CARLOS BAUER - 818-850-6146
PO BOX 57338, MURRAY, UT 84157

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) BRAD DAMON PRESIDENT	40.00			X			546,050.	0.	20,500.	
(2) TIM BALLARD FOUNDER AND CEO	40.00	X		X			525,958.	0.	20,500.	
(3) SIMON BREWER CHIEF FINANCIAL OFFICER/CHIEF OPERAT	40.00			X			379,850.	0.	20,500.	
(4) NATHON LEWIS CHIEF DEVELOPMENT OFFICER	40.00					X	288,583.	0.	20,500.	
(5) EMILY EVANS CHIEF COMMUNICATIONS OFFICER	40.00					X	263,167.	0.	27,000.	
(6) JERRY GOWEN CHIEF EXPERIENCE OFFICER	40.00	X					263,183.	0.	18,523.	
(7) ALESSANDRA SERANO CHIEF LEGAL OFFICER	40.00					X	260,900.	0.	20,500.	
(8) JEFF CARTER CHIEF E-COMMERCE OFFICER	40.00					X	253,167.	0.	15,091.	
(9) MARC REYNOLDS BOARD OF DIRECTORS	2.00	X					4,800.	0.	0.	
(10) CRAIG ANDERSON BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(11) MARK BLAKE BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(12) WES MORTENSON BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(13) BENJAMIN PACK VICE PRESIDENT	7.00	X					0.	0.	0.	
(14) STEPHEN FAIRBANKS BOARD OF DIRECTORS	3.00	X					0.	0.	0.	

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	374,283.				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	27,262,875.				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 740,509.				
	h	Total. Add lines 1a-1f		27,637,158.				
Program Service Revenue	2 a	MERCHANDISE SALES	Business Code	458000	1,162,693.	1,162,693.		
	b	GYM MEMBERSHIPS		713940	177,546.	177,546.		
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			1,340,239.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			877,600.		877,600.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	(i) Real	136,667.				
			(ii) Personal					
	b	Less: rental expenses ...	6b	0.				
	c	Rental income or (loss)	6c	136,667.				
	d	Net rental income or (loss)			136,667.	136,667.		
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	25,442,043.				
			(ii) Other					
	b	Less: cost or other basis and sales expenses	7b	26,163,179.	2,040.			
	c	Gain or (loss)	7c	-721,136.	-2,040.			
d	Net gain or (loss)			-723,176.		-723,176.		
8 a	Gross income from fundraising events (not including \$ 374,283. of contributions reported on line 1c). See Part IV, line 18	8a	951,306.					
b	Less: direct expenses	8b	1,145,942.					
c	Net income or (loss) from fundraising events			-194,636.		-194,636.		
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							
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	OTHER REVENUE	Business Code	900001	288,872.	288,872.		
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d			288,872.			
12	Total revenue. See instructions			29,362,724.	1,588,232.	177,546.	-40,212.	

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 ...	5,975,419.	5,975,419.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	351,166.	351,166.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	3,207,224.	3,207,224.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,769,608.	1,922,865.	258,600.	588,143.
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	9,465,354.	6,571,545.	883,784.	2,010,025.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	1,751,520.	1,222,301.	107,750.	421,469.
10 Payroll taxes	826,417.	573,759.	77,163.	175,495.
11 Fees for services (nonemployees):				
a Management	293.		293.	
b Legal	1,757,650.	1,134,501.	576,290.	46,859.
c Accounting	408,529.	241,479.	157,076.	9,974.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	217,907.		217,907.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	6,016,644.	3,556,408.	2,313,343.	146,893.
12 Advertising and promotion	1,503,576.	721,342.	8,084.	774,150.
13 Office expenses	211,293.	56,728.	14,194.	140,371.
14 Information technology				
15 Royalties				
16 Occupancy	685,267.	358,498.	185,001.	141,768.
17 Travel	4,029,380.	3,346,246.	347,459.	335,675.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest	129,325.		129,325.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	560,510.	385,774.	123,557.	51,179.
23 Insurance	259,722.	144,060.	102,587.	13,075.
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 SUPPLIES AND EQUIPMENT	921,245.	524,942.	203,554.	192,749.
b COST OF MERCHANDISE SOLD	777,115.	571,435.	-3,240.	208,920.
c OTHER EXPENSE	775,575.	266,113.	354,136.	155,326.
d MERCHANT SERVICE FEES	628,694.	64,325.	0.	564,369.
e All other expenses	1,251,786.	714,350.	292,611.	244,825.
25 Total functional expenses. Add lines 1 through 24e	44,481,219.	31,910,480.	6,349,474.	6,221,265.
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	26,503,563.	1	4,951,220.
	2 Savings and temporary cash investments	30,863.	2	867.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	2,165,183.	4	1,032,939.
	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	446,413.	8	1,089,821.
	9 Prepaid expenses and deferred charges	1,683,113.	9	1,175,956.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 15,285,744.		
	b Less: accumulated depreciation	10b 1,147,919.	10c	14,137,825.
	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	39,914,760.	13	43,711,745.
	14 Intangible assets	2,156,117.	14	3,964,966.
	15 Other assets. See Part IV, line 11	6,752.	15	1,419,075.
16 Total assets. Add lines 1 through 15 (must equal line 33)	82,138,813.	16	71,484,414.	
Liabilities	17 Accounts payable and accrued expenses	1,172,483.	17	1,702,898.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		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	0.	23	7,249,978.
	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	207,169.	25	1,899,469.
	26 Total liabilities. Add lines 17 through 25	1,379,652.	26	10,852,345.
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	80,611,761.	27	60,022,537.
	28 Net assets with donor restrictions	147,400.	28	609,532.
	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	80,759,161.	32	60,632,069.
	33 Total liabilities and net assets/fund balances	82,138,813.	33	71,484,414.

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	29,362,724.
2	Total expenses (must equal Part IX, column (A), line 25)	2	44,481,219.
3	Revenue less expenses. Subtract line 2 from line 1	3	-15,118,495.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	80,759,161.
5	Net unrealized gains (losses) on investments	5	-5,008,883.
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	286.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	60,632,069.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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.
- 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?
- 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

	Yes	No
1		
2a		X
b	X	
c		X
3a		X
3b		

Form 990 (2022)

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.")	17505241.	21503403.	46233793.	40010350.	27637158.	152889945
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	17505241.	21503403.	46233793.	40010350.	27637158.	152889945
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)						280,933.
6 Public support. Subtract line 5 from line 4.						152609012

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	17505241.	21503403.	46233793.	40010350.	27637158.	152889945
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	278,615.	529,903.	528,763.	848,526.	877,600.	3063407.
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						155953352
12 Gross receipts from related activities, etc. (see instructions)					12	4,159,035.
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	97.86 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	97.96 %
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)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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		

Schedule A (Form 990) 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.)

Horizontal lines for supplemental information input.

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 **OPERATION UNDERGROUND RAILROAD, INC.** Employer identification number **46-3614979**

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?

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)?

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		5,117,909.		5,117,909.
b Buildings		4,537,000.	130,840.	4,406,160.
c Leasehold improvements		2,471,561.	361,312.	2,110,249.
d Equipment		3,159,274.	655,767.	2,503,507.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				14,137,825.

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) FIDELITY INVESTMENTS	43,711,745.	END-OF-YEAR MARKET VALUE
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		43,711,745.

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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

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) EMPLOYEE REIMBURSEMENT PAYABLE	1,914.
(3) SALES TAX LIABILITY	14,855.
(4) PAYROLL LIABILITIES	189,948.
(5) CUSTOMER DEPOSITS	32,706.
(6) DEFERRED DONATIONS	261,392.
(7) LEASE LIABILITY	1,398,654.
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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	23,500,510.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-5,008,883.
b	Donated services and use of facilities	2b	161,671.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-334,964.
e	Add lines 2a through 2d	2e	-5,182,176.
3	Subtract line 2e from line 1	3	28,682,686.
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	217,907.
b	Other (Describe in Part XIII.)	4b	462,131.
c	Add lines 4a and 4b	4c	680,038.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	29,362,724.

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	44,090,313.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	161,671.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	-334,670.
e	Add lines 2a through 2d	2e	-172,999.
3	Subtract line 2e from line 1	3	44,263,312.
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	217,907.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	217,907.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	44,481,219.

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 X, LINE 2:

THE ORGANIZATION EVALUATES TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN TO DETERMINE WHETHER THE TAX POSITIONS WILL BE SUSTAINED BY TAX AUTHORITIES.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

ELIMINATION INCLUDED IN INCOME -334,964.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

CHANGE IN NET ASSET CONTRIBUTIONS WITH DONOR RESTRICTIONS 462,131.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES FROM DEACON 294.

Part XIII Supplemental Information (continued)

ELIMINATION INCLUDED IN INCOME -334,964.

TOTAL TO SCHEDULE D, PART XII, LINE 2D -334,670.

Multiple horizontal lines for supplemental information.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

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 OPERATION UNDERGROUND RAILROAD, INC.	Employer identification number 46-3614979
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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.)

(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) (such as, fundraising, program services, investments, grants to recipients located in the region)	(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
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	2	25	PROGRAM SERVICES	TO SHINE A LIGHT WORLDWIDE ON THE GLOBAL EPIDEMIC OF CHILD SEX TRAFFICKING, AND IN SO	3,570,607.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,			PROGRAM SERVICES	TO SHINE A LIGHT WORLDWIDE ON THE GLOBAL EPIDEMIC OF CHILD SEX TRAFFICKING, AND IN SO	3,553,209.
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,			PROGRAM SERVICES	TO SHINE A LIGHT WORLDWIDE ON THE GLOBAL EPIDEMIC OF CHILD SEX TRAFFICKING, AND IN SO	1,392,085.
MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,			PROGRAM SERVICES	TO SHINE A LIGHT WORLDWIDE ON THE GLOBAL EPIDEMIC OF CHILD SEX TRAFFICKING, AND IN SO	1,467,823.
EUROPE - EXCLUDING RUSSIA AND NEIGHBORING COUNTRIES			PROGRAM SERVICES	TO SHINE A LIGHT WORLDWIDE ON THE GLOBAL EPIDEMIC OF CHILD SEX TRAFFICKING, AND IN SO	1,964,350.
3 a Subtotal	2	25			11,948,074.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	2	25			11,948,074.

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

Schedule F (Form 990) 2022

SEE PART V FOR COLUMN (E) DESCRIPTIONS

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)
		MIDDLE EAST AND NORTH AFRICA	AFTERCARE SUPPORT	655,796.	WIRE/ACH	0.		CASH
		EAST ASIA AND THE PACIFIC	AFTERCARE SUPPORT	852,950.	WIRE/ACH	0.		CASH
		EUROPE (INCLUDING ICELAND & GREENLAND)	AFTERCARE SUPPORT	644,137.	WIRE/ACH	0.		CASH
		SOUTH AMERICA	AFTERCARE SUPPORT	678,784.	WIRE/ACH	0.		CASH
		CENTRAL AMERICA AND THE CARIBBEAN	AFTERCARE SUPPORT	232,521.	WIRE/ACH	0.		CASH
		NORTH AMERICA	AFTERCARE SUPPORT	143,037.	WIRE/ACH	0.		CASH

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 ▶ _____

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)
AFTERCARE SUPPORT	MIDDLE EAST AND NORTH AFRICA	7	126,342.	WIRE/ACH	0.		CASH
AFTERCARE SUPPORT	EAST ASIA AND THE PACIFIC	9	68,197.	WIRE/ACH	0.		CASH
AFTERCARE SUPPORT	EUROPE (INCLUDING ICELAND & GREENLAND)	1	35,925.	WIRE/ACH	0.		CASH
AFTERCARE SUPPORT	SOUTH AMERICA	19	377,330.	WIRE/ACH	0.		CASH
AFTERCARE SUPPORT	CENTRAL AMERICA AND THE CARIBBEAN	4	53,083.	WIRE/ACH	0.		CASH

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

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 I, LINE 2:

A MEMORANDUM OF UNDERSTANDING IS SIGNED FOR ALL ASSISTANCE OPERATION UNDERGROUND RAILROAD PROVIDES. OPERATIONAL REPORTS ARE REQUIRED QUARTERLY WHICH ARE USED TO VERIFY THAT FUNDS ARE PROPERLY BEING USED. REGIONAL DIRECTORS APPROVE INTERNATIONAL EXPENDITURES.

PART I, LINE 3:

ALL EXPENDITURES GO THROUGH THE BOARD OF DIRECTORS WHEN THEY ARE OUTSIDE OF THE UNITED STATES.

PART I, LINE 3, COLUMN (E):

REGION: EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA, (E) SPECIFIC TYPES OF SERVICES IN REGION: TO SHINE A LIGHT WORLDWIDE ON THE GLOBAL EPIDEMIC OF CHILD SEX TRAFFICKING, AND IN SO DOING RESCUE M

(A) REGION:

SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR, (E) SPECIFIC TYPES OF SERVICES IN REGION: TO SHINE A LIGHT WORLDWIDE ON THE GLOBAL EPIDEMIC OF CHILD SEX TRAFFICKING, AND IN SO DOING RESCUE M

(A) REGION:

CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS, (E) SPECIFIC TYPES OF SERVICES IN REGION: TO SHINE A LIGHT WORLDWIDE ON THE GLOBAL EPIDEMIC OF CHILD SEX TRAFFICKING, AND IN SO DOING RESCUE M

(A) REGION:

MIDDLE EAST AND NORTH AFRICA - ALGERIA, SAUDI ARABIA, DJIBOUTI, EGYPT,

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.

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO SHINE A LIGHT WORLDWIDE ON THE GLOBAL EPIDEMIC OF CHILD SEX TRAFFICKING, AND IN SO DOING RESCUE M

REGION: EUROPE - EXCLUDING RUSSIA AND NEIGHBORING COUNTRIES

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO SHINE A LIGHT WORLDWIDE ON THE GLOBAL EPIDEMIC OF CHILD SEX TRAFFICKING, AND IN SO DOING RESCUE M

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 (add col. (a) through col. (c))
		SPRING GALA (event type)	RISE TOGETHER (event type)	NONE (total number)	
Revenue	1	Gross receipts	715,918.	609,671.	1,325,589.
	2	Less: Contributions	136,097.	238,186.	374,283.
	3	Gross income (line 1 minus line 2)	579,821.	371,485.	951,306.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes	1,946.	21,250.	23,196.
	6	Rent/facility costs	312,289.	368,684.	680,973.
	7	Food and beverages			
	8	Entertainment	71,322.	44,350.	115,672.
	9	Other direct expenses	278,260.	47,841.	326,101.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			1,145,942.
11	Net income summary. Subtract line 10 from line 3, column (d)			-194,636.	

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: _____

**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 **OPERATION UNDERGROUND RAILROAD, INC.** Employer identification number **46-3614979**

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
31-8 PROJECT PO BOX 174 BISMARCK, ND 58502	83-2220563		10,000.	0.			SUPPORT AND SUPPLIES
ABERDEEN POLICE DEPARTMENT 210 E MARKET ST ABERDEEN, WA 98520			10,521.	0.			SOFTWARE FOR FORENSIC DISCOVERY
ABILENE POLICE DEPARTMENT 4565 S 1ST ST ABILENE, TX 79605			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
ADAMS COUNTY SHERIFF'S OFFICE 306 STATE ST NATCHEZ, MS 39120			8,171.	0.			SOFTWARE FOR FORENSIC DISCOVERY
AGAPE ADOPTIONS 15605 MAIN STREET E SUMNER, WA 98390	27-1947222	501(C)(3)	16,500.	0.			SUPPORT AND SUPPLIES
ANKENY POLICE DEPARTMENT 411 SW ORDNANCE RD ANKENY, IA 50023			19,377.	0.			SOFTWARE FOR FORENSIC DISCOVERY

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 50.
- 3** Enter total number of other organizations listed in the line 1 table 175.

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

Schedule I (Form 990) 2022

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
ANNISTON POLICE DEPARTMENT 174 W 13TH ST ANNISTON, AL 36201			25,771.	0.			SOFTWARE FOR FORENSIC DISCOVERY
ARLINGTON POLICE DEPARTMENT 112 MYSTIC ST ARLINGTON, MA 02474			7,680.	0.			SOFTWARE FOR FORENSIC DISCOVERY
AUBURN POLICE DEPARTMENT 46 NORTH ST AUBURN, NY 13021			12,069.	0.			SOFTWARE FOR FORENSIC DISCOVERY
AURORA POLICE DEPARTMENT 15001 E ALAMEDA PKWY AURORA, CO 80012			26,548.	0.			SOFTWARE FOR FORENSIC DISCOVERY
BALDWIN COUNTY SHERIFF'S OFFICE 320 N. HOYLE AVE. BAY MINETTE, AL 36507			25,271.	0.			SOFTWARE FOR FORENSIC DISCOVERY
BAY CITY POLICE DEPARTMENT 2201 AVENUE H BAY CITY, TX 77414			6,680.	0.			SOFTWARE FOR FORENSIC DISCOVERY
BAZORIA COUNTY SHERIFF'S OFFICE 111 E. LOCUST ST. ANGLETON, TX 77515			15,000.	0.			SOFTWARE FOR FORENSIC DISCOVERY
BELKNAP COUNTY SHERIFF 42 COUNTY DR LACONIA, NH 03246			9,549.	0.			SOFTWARE FOR FORENSIC DISCOVERY
BOISE POLICE DEPARTMENT CITY HALL WEST, 333 N MARK STALL PL BOISE, ID 83704			41,090.	0.			SOFTWARE FOR FORENSIC DISCOVERY

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
BRANFORD POLICE DEPARTMENT 33 LAUREL ST. BRADFORD, CT 06405			9,855.	0.			SOFTWARE FOR FORENSIC DISCOVERY
BRAWLEY POLICE DEPARTMENT HENRY GRAHAM BUILDING, 351 MAIN ST BRAWLEY, CA 92227			12,598.	0.			SOFTWARE FOR FORENSIC DISCOVERY
BROKEN ARROW POLICE DEPARTMENT 1101 N 6TH ST BROKEN ARROW, OK 74012	73-6005109		25,271.	0.			SOFTWARE FOR FORENSIC DISCOVERY
BROOMFIELD POLICE DEPARTMENT 7 DESCOMBES DR BROOMFIELD, CO 80020			5,260.	0.			SOFTWARE FOR FORENSIC DISCOVERY
BRUNSWICK POLICE DEPARTMENT 85 PLEASANT ST BRUNSWICK, ME 04011			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
BUILDING ARIZONA FAMILIES 18355 W IVY LN SURPRISE, AZ 85388	20-1387297	501(C)(3)	12,000.	0.			SUPPORT AND SUPPLIES
BUSINESS BIBLICAL MINISTRIES WORLDWIDE (ALPINE BIBLE CHURCH) - PO BOX 281 - LEHI, UT 84043	46-1225303	501(C)(3)	13,000.	0.			SUPPORT AND SUPPLIES
BUTLER POLICE DEPARTMENT 120 WEST MAIN STREET BUTLER, IN 46721			7,495.	0.			SOFTWARE FOR FORENSIC DISCOVERY
CABARRUS COUNTY SHERIFFS OFFICE 30 CORBAN AVE SE CONCORD, NC 28025			15,205.	0.			SOFTWARE FOR FORENSIC DISCOVERY

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
CAROLINA BEACH POLICE DEPARTMENT 1121-B, 1121 N LAKE PARK BLVD CAROLINA BEACH, NC 28428			30,897.	0.			SOFTWARE FOR FORENSIC DISCOVERY
CARROLL COUNTY SHERIFF'S OFFICE 1000 NEWNAN ROAD CARROLLTON, GA 30116			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
CARVER COUNTY SHERIFF 606 E. FOURTH ST. CHASKA, MN 55318			9,896.	0.			SOFTWARE FOR FORENSIC DISCOVERY
CATAHOULA PARISH POLICE DEPARTMENT 15846 HIGHWAY 124 JONESVILLE, LA 71343			15,950.	0.			SOFTWARE FOR FORENSIC DISCOVERY
CATCH THE WAVE OF HOPE CHARITABLE ORGANIZATION INC. - PO BOX 1409 - PALM CITY, FL 34991	82-1506411		12,500.	0.			SUPPORT AND SUPPLIES
CDAIA PO BOX 6011 NAPA, CA 94581	95-6099539	501(C)(6)	15,000.	0.			SUPPORT AND SUPPLIES
CHESAPEAKE POLICE DEPARTMENT 304 ALBEMARLE DR CHESAPEAKE, VA 23322			17,540.	0.			SOFTWARE FOR FORENSIC DISCOVERY
CHILDREN OF ALL NATIONS 248 ADDIE ROY ROAD, SUITE A102 AUSTIN, TX 78746	74-2786077	501(C)(3)	118,000.	0.			SUPPORT AND SUPPLIES
CHILDREN'S HOUSE INTERNATIONAL PO BOX 447 506 GROVER ST #115 LYNDEN, WA 98264	94-2643021	501(C)(3)	15,000.	0.			SUPPORT AND SUPPLIES

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
CHINESE CHILDREN ADOPTIONS INTERNATIONAL, CCAI - 6920 S HOLLY CIR - CENTENNIAL, CO 80112	84-1208720	501(C)(3)	10,000.	0.			SUPPORT AND SUPPLIES
CITY OF ST. MARYS POLICE DEPARTMENT - 319 ERIE AVE - ST MARYS, PA 15857			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
CLEBURNE COUNTY SHERIFF 914 S 9TH ST HEBER SPRINGS, AR 72543			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
COCHISE COUNTY SHERIFF'S DEPARTMENT - 205 JUDD DRIVE - BISBEE, AZ 85603			25,771.	0.			SOFTWARE FOR FORENSIC DISCOVERY
COOK COUNTY SHERIFF'S OFFICE 50 W WASHINGTON RCHRD J DALEY CTR CHICAGO, IL 60602			18,102.	0.			SOFTWARE FOR FORENSIC DISCOVERY
CORPUS CHRISTI POLICE DEPARTMENT 321 JOHN SARTAIN ST CORPUS CHRISTI, TX 78401			25,771.	0.			SOFTWARE FOR FORENSIC DISCOVERY
CUMBERLAND COUNTY DISTRICT ATTORNEY - 1 COURTHOUSE SQUARE - CARLISLE, PA 17013			25,721.	0.			SOFTWARE FOR FORENSIC DISCOVERY
CURRITUCK COUNTY SHERIFF'S OFFICE 125 COLLEGE WAY BARCO, NC 27917			13,297.	0.			SOFTWARE FOR FORENSIC DISCOVERY
DALLAS POLICE DEPARTMENT 725 NORTH JIM MILLER RD. DALLAS, TX 75217			13,627.	0.			SOFTWARE FOR FORENSIC DISCOVERY

Schedule I (Form 990)

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

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DEERFIELD POLICE DEPARTMENT 850 WAUKEGAN RD DEERFIELD, IL 60015			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
DEFENDERS FOR CHILDREN 20 SUGARBERRY DRIVE GREENVILLE, SC 29615	27-3388956	501(C)(3)	10,200.	0.			SUPPORT AND SUPPLIES
DERRY TOWNSHIP POLICE DEPARTMENT 620 CLEARWATER RD HERSHEY, PA 17033			6,481.	0.			SOFTWARE FOR FORENSIC DISCOVERY
DESOTO COUNTY SHERIFFS OFFICE 3091 INDUSTRIAL DR W HERNANDO, MS 38632			18,318.	0.			SOFTWARE FOR FORENSIC DISCOVERY
DOWNERS GROVE POLICE DEPARTMENT 825 BURLINGTON AVE DOWNERS GROVE, IL 60515			15,339.	0.			SOFTWARE FOR FORENSIC DISCOVERY
DRESSEMBER FOUNDATION PO BOX 7116 BELLEVUE, WA 98008	46-4704743		23,000.	0.			SUPPORT AND SUPPLIES
DUBLIN POLICE DEPARTMENT 6565 COMMERCE PKWY DUBLIN, OH 43017			16,536.	0.			SOFTWARE FOR FORENSIC DISCOVERY
DUPAGE COUNTY SHERIFF'S OFFICE 501 N. COUNTY FARM RD WHEATON, IL 60187			33,782.	0.			SOFTWARE FOR FORENSIC DISCOVERY
DURANGO POLICE DEPARTMENT 990 E 2ND AVE DURANGO, CO 81301			25,271.	0.			SOFTWARE FOR FORENSIC DISCOVERY

Schedule I (Form 990)

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

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ELKO POLICE DEPARTMENT 1448 SILVER ST ELKO, NV 89801			9,521.	0.			SOFTWARE FOR FORENSIC DISCOVERY
END EXPLOITATION MONTANA 3031 GRAND AVE SUITE 160 BILLINGS, MT 59102	84-3086711	501(C)(3)	10,000.	0.			SUPPORT AND SUPPLIES
ENGEDI REFUGE MINISTRIES INC PO BOX 950 LYNDEN, WA 98264	80-0717952	501(C)(3)	40,000.	0.			SUPPORT AND SUPPLIES
EXODUS CRY 638 CAMINO DE LOS MARES, SUITE H130 SAN CLEMENTE, CA 92673	26-2317116		20,000.	0.			SUPPORT AND SUPPLIES
FAMILIES MENTORING FAMILIES 2527 W STATEHOOD DRIVE SALT LAKE CITY, UT 84107	81-4082657	501(C)(3)	26,937.	0.			SUPPORT AND SUPPLIES
FARGO POLICE DEPARTMENT 105 25TH ST N FARGO, ND 58102			10,395.	0.			SOFTWARE FOR FORENSIC DISCOVERY
FLORIDA DEPARTMENT OF LAW ENFORCEMENT (FORT MEYERS) - 4700 TERMINAL DR UNIT #1 - FORT MYERS, FL 33907			16,249.	0.			SOFTWARE FOR FORENSIC DISCOVERY
FLORIDA DEPARTMENT OF LAW ENFORCEMENT (TALLAHASSEE) - P.O. BOX 1489 - TALLAHASSEE, FL 32302			12,846.	0.			SOFTWARE FOR FORENSIC DISCOVERY
FOND DU LAC COUNTY SHERIFF'S OFFICE - 180 S MACY ST - FOND DU LAC, WI 54935			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY

Schedule I (Form 990)

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

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FORT MORGAN POLICE DEPARTMENT 901 E BEAVER AVE FORT MORGAN, CO 80701			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
FOUNTAIN VALLEY POLICE DEPARTMENT 10200 SLATER AVE FOUNTAIN VALLEY, CA 92708			9,350.	0.			SOFTWARE FOR FORENSIC DISCOVERY
FREDERICK COUNTY STATES ATTORNEYS OFFICE - 100 W PATRICK ST - FREDERICK, MD 21701			15,000.	0.			SOFTWARE FOR FORENSIC DISCOVERY
FREDERICK POLICE DEPARTMENT 100 W PATRICK ST FREDERICK, MD 21701			22,065.	0.			SOFTWARE FOR FORENSIC DISCOVERY
FREMONT COUNTY SHERIFF 100 JUSTICE CENTER RD CANON CITY, CO 81212			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
FRIDLEY POLICE DEPARTMENT 7071 UNIVERSITY AVE NE FRIDLEY, MN 55432			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
GARFIELD HEIGHTS POLICE DEPARTMENT 5555 TURNEY RD CLEVELAND, OH 44125			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
GARVIN COUNTY SHERIFF'S OFFICE 201 W GRANT AVE # 4 PAULS VALLEY, OK 73075			22,031.	0.			SOFTWARE FOR FORENSIC DISCOVERY
GLADNEY CENTER FOR ADOPTION 6300 JOHN RYAN DRIVE FORT WORTH, TX 76132	75-0917409	501(C)(3)	25,000.	0.			SUPPORT AND SUPPLIES

Schedule I (Form 990)

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GLOBAL CENTURION FOUNDATION, INC. 5746 UNION MILL ROAD, SUITE 514 CLIFTON, VA 20124	27-1985417	501(C)(3)	25,000.	0.			SUPPORT AND SUPPLIES
GLOBE POLICE DEPARTMENT 175 N PINE ST GLOBE, AZ 85501			6,680.	0.			SOFTWARE FOR FORENSIC DISCOVERY
GLOUCESTER COUNTY SHERIFF 7502 JUSTICE DR GLOUCESTER, VA 23061			8,000.	0.			SOFTWARE FOR FORENSIC DISCOVERY
GRANT PARRISH SHERIFFS OFFICE 205 CYPRESS ST COLFAX, LA 71417			18,470.	0.			SOFTWARE FOR FORENSIC DISCOVERY
GRAYS HARBOR COUNTY SHERIFF 100 W BROADWAY AVE #3 MONTESANO, WA 98563			10,861.	0.			SOFTWARE FOR FORENSIC DISCOVERY
GREAT BARRINGTON POLICE DEPARTMENT 465 MAIN ST GREAT BARRINGTON, MA 01230			9,549.	0.			SOFTWARE FOR FORENSIC DISCOVERY
GREEN COUNTY SHERIFF'S DEPARTMENT 528 EDGEFIELD ST GREENWOOD, SC 29646			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
GUNNISON POLICE DEPARTMENT 38 W CENTER STREET GUNNISON, UT 84634			6,960.	0.			SOFTWARE FOR FORENSIC DISCOVERY
HAMILTON COUNTY SHERIFF'S OFFICE 11021 HAMILTON AVE CINCINNATI, OH 45231			18,857.	0.			SOFTWARE FOR FORENSIC DISCOVERY

Schedule I (Form 990)

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

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HAND IN HAND INTERNATIONAL ADOPTIONS - 10602 RAINBOW BRIDGE DRIVE - PEYTON, CO 80831	74-1951461	501(C)(3)	180,000.	0.			SUPPORT AND SUPPLIES
HANDS ACROSS THE WATER, INC 781 AVIS DRIVE, SUITE 200 ANN ARBOR, MI 48108	38-3167509	501(C)(3)	10,000.	0.			SUPPORT AND SUPPLIES
HARDEMAN COUNTY SHERIFF'S OFFICE 505 S MAIN ST BOLIVAR, TN 38008			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
HAVRE POLICE DEPARTMENT 520 4TH ST HAVRE, MT 59501			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
HEARTSENT ADOPTIONS INC 1801 OAKLAND BLVD SUITE 110 WALNUT CREEK, CA 94596	68-0367353	501(C)(3)	11,000.	0.			ADOPTION EXPENSES
HERMISTON POLICE DEPARTMENT 330 S 1ST ST HERMISTON, OR 97838			26,756.	0.			SOFTWARE FOR FORENSIC DISCOVERY
HIBBING POLICE DEPARTMENT 1810 12TH AVE E HIBBING, MN 55746			16,170.	0.			SOFTWARE FOR FORENSIC DISCOVERY
HIDALGO POLICE DEPARTMENT 211 E ESPERANZA AVE HIDALGO, TX 78557			36,496.	0.			SOFTWARE FOR FORENSIC DISCOVERY
HINSDALE POLICE DEPARTMENT 121 SYMONDS DR HINSDALE, IL 60521			9,714.	0.			SOFTWARE FOR FORENSIC DISCOVERY

Schedule I (Form 990)

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HOLT INTERNATIONAL CHILDREN'S SERVICES - PO BOX 2880 - EUGENE, OR 97402	23-7257390	501(C)(3)	45,000.	0.			SUPPORT AND SUPPLIES
HOPE CENTER INDY 11850 BROOKVILLE RD INDIANAPOLIS, IN 46239	81-2027077	501(C)(3)	43,575.	0.			SUPPORT AND SUPPLIES
HOPE FOR JUSTICE INC PO BOX 280365 NASHVILLE, TN 37228	75-3179471	501(C)(3)	24,000.	0.			SUPPORT AND SUPPLIES
HOPSCOTCH ADOPTIONS, INC 1208 EASTCHESTER DRIVE, STE 120 HIGH POINT, NC 27265	20-8066676	501(C)(3)	30,000.	0.			ADOPTION EXPENSES
HUMAN TRAFFICKING TRAINING CENTER LLC - P.O. BOX 244 - CHADWICK, MO 65629	87-2154805		48,110.	0.			SUPPORT AND SUPPLIES
IDAHO FALLS POLICE DEPARTMENT 605 N CAPITAL AVE IDAHO FALLS, ID 83402			14,701.	0.			SOFTWARE FOR FORENSIC DISCOVERY
IOWA DEPARTMENT OF PUBLIC SAFETY 502 E 9TH ST DES MOINES, IA 50319			23,025.	0.			SOFTWARE FOR FORENSIC DISCOVERY
ISLE OF WIGHT COUNTY SHERIFFS OFFICE - 17110 MONUMENT CIR - WINDSOR, VA 23487			20,454.	0.			SOFTWARE FOR FORENSIC DISCOVERY
JACKSON POLICE DEPARTMENT 350 COMMERCE ST JACKSON, AL 36545			8,171.	0.			SOFTWARE FOR FORENSIC DISCOVERY

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JOHNSON COUNTY SHERIFF 639 FORT ST BUFFALO, WY 82834			31,491.	0.			SOFTWARE FOR FORENSIC DISCOVERY
JUAB COUNTY SHERIFF DEPARTMENT 425 SHEEP LN DR, NEPHI, UT 84648			14,236.	0.			SOFTWARE FOR FORENSIC DISCOVERY
JUPITER POLICE DEPARTMENT JUPITER MUNICIPAL BUILDING, 210 MIL JUPITER, FL 33458			20,316.	0.			SOFTWARE FOR FORENSIC DISCOVERY
KENNEWICK POLICE DEPARTMENT 211 W 6TH AVE KENNEWICK, WA 99336			25,271.	0.			SOFTWARE FOR FORENSIC DISCOVERY
KENTUCKY STATE POLICE 919 VERSAILLES RD FRANKFORT, KY 40601			20,490.	0.			SOFTWARE FOR FORENSIC DISCOVERY
KERR COUNTY SHERIFF'S OFFICE 400 CLEARWATER PASEO KERRVILLE, TX 78028			25,771.	0.			SOFTWARE FOR FORENSIC DISCOVERY
KIMBERLY HANSEN POLICE DEPARTMENT 242 HIGHWAY 30 KIMBERLY, ID 83341			6,113.	0.			SOFTWARE FOR FORENSIC DISCOVERY
KNOX COUNTY HIGH TECH CRIME UNIT 501 BUSSEY ST VINCENNES, IN 47591			11,000.	0.			SOFTWARE FOR FORENSIC DISCOVERY
KOMITE INC. 9972 PUOPOLO LN BONITA SPRINGS, FL 34135	87-4290346	501(C)(3)	20,000.	0.			SUPPORT AND SUPPLIES

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LA HABRA POLICE DEPARTMENT 150 N EUCLID ST LA HABRA, CA 90631			12,150.	0.			SOFTWARE FOR FORENSIC DISCOVERY
LAKE COUNTY SHERIFFS OFFICE 25 S M.L.K. JR AVE WAUKEGAN, IL 60085			19,578.	0.			SOFTWARE FOR FORENSIC DISCOVERY
LANE COUNTY SHERIFF'S OFFICE 125 E 8TH AVE EUGENE, OR 97401			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
LEGACY OF HOPE INTERNATIONAL INC PO BOX 3145 IRMO, SC 29063	55-0850360	501(C)(3)	10,000.	0.			SUPPORT AND SUPPLIES
LITTLE ROCK POLICE DEPARTMENT 615 W. MARKHAM ST. LITTLE ROCK, AR 72201			55,303.	0.			SOFTWARE FOR FORENSIC DISCOVERY
LOS ANGELES COUNTY SHERIFFS OFFICE 4700 RAMONA BLVD. MONTEREY PARK, CA 91754	95-3777596		21,302.	0.			SOFTWARE FOR FORENSIC DISCOVERY
LOVE JUSTICE INTERNATIONAL PO BOX 67195 LINCOLN, NE 68506	71-0982808	501(C)(3)	20,000.	0.			SUPPORT AND SUPPLIES
LOVE NEVER FAILS 6937 VILLAGE PKWY #2074 DUBLIN, CA 94568	45-5551029	501(C)(3)	20,000.	0.			SUPPORT AND SUPPLIES
LOVELAND POLICE DEPARTMENT 810 E 10TH ST LOVELAND, CO 80537			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY

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LOWNDES COUNTY SHERIFF'S OFFICE 120 PRISON-FARM RD VALDOSTA, GA 31601			25,271.	0.			SOFTWARE FOR FORENSIC DISCOVERY
LUZERNE COUNTY DISTRICT ATTORNEYS OFFICE - 200 N RIVER ST - WILKES-BARRE, PA 18711			5,588.	0.			SOFTWARE FOR FORENSIC DISCOVERY
LYCOMING COUNTY DISTRICT ATTORNEY'S OFFICE - 48 W 3RD ST - WILLIAMSPORT, PA 17701			9,521.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MADISON ADOPTION ASSOCIATES 1102 SOCIETY DRIVE CLAYMONT, DE 19703	51-0399000	501(C)(3)	120,000.	0.			ADOPTION EXPENSES
MARATHON COUNTY SHERIFF'S DEPARTMENT - 2173 RIFLE RD - MOSINEE, WI 54455			50,000.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MAUSTON POLICE DEPARTMENT CITY OF MAUSTON MUNICIPAL BUILDING, 303 MANSION ST - MAUSTON, WI 53948			6,680.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MEMPHIS POLICE DEPARTMENT 170 NORTH MAIN ST. 7TH FLOOR, SUITE MEMPHIS, TN 38103			16,608.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MENDOCINO COUNTY SHERIFF 951 LOW GAP ROAD UKIAH, CA 95482			13,485.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MIDDLETON POLICE DEPARTMENT 7341 DONNA DR MIDDLETON, WI 53562			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY

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MIDDLETOWN POLICE DEPARTMENT DE 130 HAMPDEN RD MIDDLETOWN, DE 19709			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MIDDLETOWN POLICE DEPARTMENT NY 2 JAMES ST MIDDLETOWN, NY 10940			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MIDDLETOWN POLICE DEPARTMENT RI 123 VALLEY RD MIDDLETOWN, RI 02842			14,719.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MILLEDGEVILLE POLICE DEPARTMENT 125 W MCINTOSH ST MILLEDGEVILLE, GA 31061			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MONROE COUNTY SHERIFF'S OFFICE 100 E 2ND ST #1 MONROE, MI 48161			15,973.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MONROE POLICE DEPARTMENT 140 BLAINE STREET MONROE, GA 30655			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MONTAGUE COUNTY SHERIFF'S OFFICE 100 GRAND ST MONTAGUE, TX 76251			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MONTANA DEPARTMENT OF JUSTICE SCOTT HART BUILDING, 302 N ROBERTS HELENA, MT 59601			17,599.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MONTANA DIVISION OF CRIMINAL INVESTIGATION - PO BOX 201417 - HELENA, MT 59620			15,771.	0.			SOFTWARE FOR FORENSIC DISCOVERY

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MONTEZUMA COUNTY SHERIFF'S OFFICE 730 E DRISCOLL ST CORTEZ, CO 81321			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MORRISTOWN POLICE DEPARTMENT VT 121 LOWER MAIN ST MORRISTOWN, VT 05661			9,841.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MOSES LAKE POLICE DEPARTMENT PO BOX 1579 MOSES LAKE, WA 98837			10,000.	0.			SOFTWARE FOR FORENSIC DISCOVERY
MOSHEIM POLICE DEPARTMENT 230 MAIN ST MOSHEIM, TN 37818			6,680.	0.			SOFTWARE FOR FORENSIC DISCOVERY
NATIONAL ALLIANCE FOR DRUG ENDANGERED CHILDREN - 9101 HARLAN STREET, SUITE 245 - WESTMINSTER, CO 80031	20-4199303	501(C)(3)	29,000.	0.			SUPPORT AND SUPPLIES
NAZARENE FUND, INC. 565 WEST 465 NORTH SUITE 150 PROVIDENCE, UT 84332	85-0535397	501(C)(3)	50,000.	0.			SUPPORT AND SUPPLIES
NEVADA COUNTY DISTRICT ATTORNEY 10075 LEVON AVE #101 TRUCKEE, CA 96161			25,000.	0.			SOFTWARE FOR FORENSIC DISCOVERY
NEVADA DEPARTMENT OF PUBLIC SAFETY 555WRIGHT WAY CARSON CITY, NV 89711			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
NEW HOPE FOR CHILDREN 130 CENTRAL AVENUE DOVER, NH 03820	02-0491267	501(C)(3)	126,000.	0.			SUPPORT AND SUPPLIES

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NEW HORIZONS ADOPTION AGENCY, INC. 302 S. GROVE STREET BLUE EARTH, MN 56013	06-1236459	501(C)(3)	156,000.	0.			SUPPORT AND SUPPLIES
NEWBURG-DUNDEE POLICE DEPARTMENT 401 E 3RD ST NEWBERG, OR 97132			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
NIGHTLIGHT CHRISTIAN ADOPTIONS 1528 BROOKHOLLOW DR. STE 100 SANTA ANA, CA 92705	95-2254634	501(C)(3)	20,000.	0.			SUPPORT AND SUPPLIES
NOMI NETWORK INC. - AVERY CENTER PO BOX 42 NEW YORK, NY 10156	80-0290896	501(C)(3)	5,090.	0.			SUPPORT AND SUPPLIES
NORTH DAKOTA ATTORNEY GENERAL 600 E BOULEVARD AVE # 125 BISMARCK, ND 58505			25,771.	0.			SOFTWARE FOR FORENSIC DISCOVERY
NORTH DAKOTA BUREAU OF CRIMINAL INVESTIGATION - 4205 STATE ST - BISMARCK, ND 58503			5,252.	0.			SOFTWARE FOR FORENSIC DISCOVERY
NORTH PORT POLICE DEPARTMENT 4980 CITY HALL BLVD NORTH PORT, FL 34286			8,901.	0.			SOFTWARE FOR FORENSIC DISCOVERY
OKLAHOMA CITY POLICE DEPARTMENT 701 COLCORD DR OKLAHOMA CITY, OK 73102			25,771.	0.			SOFTWARE FOR FORENSIC DISCOVERY
OSAGE COUNTY SHERIFF'S OFFICE 131 14TH ST LYNDON, KS 66451			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY

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OTTER TAIL SHERIFF'S OFFICE 417 S COURT ST FERGUS FALLS, MN 56537			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
OUACHITA PARISH SHERIFF'S OFFICE 400 ST JOHN ST MONROE, LA 71201			25,271.	0.			SOFTWARE FOR FORENSIC DISCOVERY
PALM BAY POLICE DEPARTMENT 130 MALABAR RD PALM BAY, FL 32907			25,271.	0.			SOFTWARE FOR FORENSIC DISCOVERY
PARKERSBURG POLICE DEPARTMENT MUNICIPAL BUILDING, 1 GOVERNMENT SQ PARKERSBURG, WV 26101			16,015.	0.			SOFTWARE FOR FORENSIC DISCOVERY
PASCO COUNTY SHERIFFS OFFICE 8700 CITIZENS DR. NEW PORT RICHEY, FL 34654			18,976.	0.			SOFTWARE FOR FORENSIC DISCOVERY
PATHFINDERS JUSTICE INITIATIVE, INC. - 333 HENRY HUDSON PARKWAY 17B - BRONX, NY 10465	46-5601806	501(C)(3)	24,000.	0.			SUPPORT AND SUPPLIES
PENNSYLVANIA OFFICE OF ATTORNEY GENERAL - STRAWBERRY SQUARE, 16TH FLOOR - HARRISBURG, PA 17120			18,431.	0.			SOFTWARE FOR FORENSIC DISCOVERY
PENSACOLA POLICE DEPARTMENT 711 N HAYNE ST PENSACOLA, FL 32501			6,880.	0.			SOFTWARE FOR FORENSIC DISCOVERY
PERRYSBURG POLICE DEPARTMENT 330 WALNUT ST PERRYSBURG, OH 43551			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY

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
PHELPS COUNTY SHERIFF'S OFFICE 500 W 2ND ST ROLLA, MO 65401			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
PHOENIXVILLE POLICE DEPARTMENT 351 BRIDGE ST PHOENIXVILLE, PA 19460			6,680.	0.			SOFTWARE FOR FORENSIC DISCOVERY
PINE BLUFF POLICE DEPARTMENT 200 E 8TH AVE PINE BLUFF, AR 71601			26,041.	0.			SOFTWARE FOR FORENSIC DISCOVERY
PITTSFIELD POLICE DEPARTMENT 39 ALLEN ST PITTSFIELD, MA 01201			30,740.	0.			SOFTWARE FOR FORENSIC DISCOVERY
POCATELLO POLICE DEPARTMENT 911 N 7TH AVE POCATELLO, ID 83201			11,015.	0.			SOFTWARE FOR FORENSIC DISCOVERY
POLK COUNTY SHERIFF'S OFFICE 1891 JIM KEENE BLVD WINTER HAVEN, FL 33880			10,242.	0.			SOFTWARE FOR FORENSIC DISCOVERY
PROVO POLICE DEPARTMENT 445 W CENTER ST PROVO, UT 84601			10,520.	0.			SOFTWARE FOR FORENSIC DISCOVERY
QUEEN CREEK POLICE DEPARTMENT 20727 CIVIC PKWY QUEEN CREEK, AZ 85142			18,370.	0.			SOFTWARE FOR FORENSIC DISCOVERY
RADICAL EMPATHY EDUCATION FOUNDATION INCORPORATED - 7213 APPERSON STREET - DEL VALLE, TX 78617	82-0704070	501(C)(3)	10,000.	0.			SUPPORT AND SUPPLIES

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
ROGERS COUNTY SHERIFF'S OFFICE 114 S MISSOURI AVE CLAREMORE, OK 74017			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
ROWAN COUNTY SHERIFF'S OFFICE 232 N MAIN ST SALISBURY, NC 28144			25,771.	0.			SOFTWARE FOR FORENSIC DISCOVERY
RUPERT POLICE DEPARTMENT 633 FREMONT AVE RUPERT, ID 83350			41,418.	0.			SOFTWARE FOR FORENSIC DISCOVERY
SAINT MARTIN PARISH SHERIFF'S OFFICE - 400 ST MARTIN ST - ST MARTINVILLE, LA 70582			25,771.	0.			SOFTWARE FOR FORENSIC DISCOVERY
SAN DIEGO COUNTY PROBATION OFFICERS ASSOCIATION - 8388 VICKERS ST - SAN DIEGO, CA 92111	27-1477881	501 C 5	8,972.	0.			SUPPORT AND SUPPLIES
SANTA CLARA-IVINS POLICE DEPARTMENT - 2603 SANTA CLARA DR - SANTA CLARA, UT 84765			16,743.	0.			SOFTWARE FOR FORENSIC DISCOVERY
SHIAWASSEE COUNTY SHERIFF 201 E MCARTHUR ST CORUNNA, MI 48817			10,512.	0.			SOFTWARE FOR FORENSIC DISCOVERY
SHINER POLICE DEPARTMENT 810 AVENUE E SHINER, TX 77984			6,480.	0.			SOFTWARE FOR FORENSIC DISCOVERY
SIERRA CARES FOUNDATION PO BOX 4642 PARKER, CO 80138	85-2963683	501(C)(3)	10,000.	0.			SUPPORT AND SUPPLIES

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
SMALL WORLD, INC P.O. BOX 1109 MOUNT JULIET, TN 37121	58-1661474	501(C)(3)	50,000.	0.			SUPPORT AND SUPPLIES
SOCIAL MEDICINE INTERNATIONAL 50 E SOUTH TEMPLE, STE 400 SALT LAKE CITY, UT 84111	87-1805716	501(C)(3)	20,000.	0.			SUPPORT AND SUPPLIES
SOUTH PORTLAND POLICE DEPARTMENT 30 ANTHOINE ST SOUTH PORTLAND, ME 04106			13,345.	0.			SOFTWARE FOR FORENSIC DISCOVERY
SOUTHAMPTON TOWN POLICE DEPARTMENT 10 OLD RIVERHEAD RD HAMPTON BAYS, NY 11946			25,771.	0.			SOFTWARE FOR FORENSIC DISCOVERY
SPRINGFIELD POLICE DEPARTMENT 230 4TH STREET SPRINGFIELD, OR 97477			11,031.	0.			SOFTWARE FOR FORENSIC DISCOVERY
ST CLOUD POLICE DEPARTMENT 4700 NEPTUNE ROAD ST. CLOUD, FL 34769			9,950.	0.			SOFTWARE FOR FORENSIC DISCOVERY
STATE OF HAWAII DEPARTMENT OF PUBLIC SAFETY - SHERIFF DIVISION - 240 KEAWE ST - HONOLULU, HI 96813			25,520.	0.			SOFTWARE FOR FORENSIC DISCOVERY
STREET GRACE, INC. 5995 FINANCIAL DR. STE 180 NORCROSS, GA 30071	26-4335907	501(C)(3)	25,000.	0.			SUPPORT AND SUPPLIES
SUSSEX POLICE DEPARTMENT 46 HARRISON ST SUSSEX, NJ 07461			22,136.	0.			SOFTWARE FOR FORENSIC DISCOVERY

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
SWITCH, INC 135 EDINGBURGH CT #103 GREENVILLE, SC 29607	90-0905775		15,000.	0.			SUPPORT AND SUPPLIES
THE FAMILY NETWORK, INC 126 GROVE STREET ROSEVILLE, CA 95678	43-1185310	501(C)(3)	30,000.	0.			SUPPORT AND SUPPLIES
THE FOUNDATION UNITED PO BOX 5576 SARASOTA, FL 34277	83-0572687	501(C)(3)	20,000.	0.			SUPPORT AND SUPPLIES
THE OPEN DOOR ADOPTION AGENCY, INC 218 E. JACKSON STREET THOMASVILLE, GA 31792	58-1703392	501(C)(3)	228,496.	0.			ADOPTION EXPENSES
THE PLAYING FOR CHANGE FOUNDATION 171 PIER AVENUE NO 271 SANTA MONICA, CA 90405	20-8568061	501(C)(3)	10,000.	0.			SUPPORT AND SUPPLIES
THE THIRD TALK INC 825C MERRIMON AVE SUITE 304 ASHEVILLE, NC 28804	81-3994612	501(C)(3)	15,500.	0.			SUPPORT AND SUPPLIES
TIPPECANOE CITY PROSECUTOR'S OFFICE - 111 N 4TH ST #3 - LAFAYETTE, IN 47901			11,985.	0.			SOFTWARE FOR FORENSIC DISCOVERY
TULSA COUNTY SHERIFF'S OFFICE 303 W 1ST ST TULSA, OK 74103			29,850.	0.			SOFTWARE FOR FORENSIC DISCOVERY
TWELFTH JUDICIAL DISTRICT ATTORNEY'S OFFICE - 1000 N NEW YORK AVE # 101 - ALAMOGORDO, NM 88310			23,251.	0.			SOFTWARE FOR FORENSIC DISCOVERY

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
TWIN FALLS POLICE DEPARTMENT 321 2ND AVE E TWIN FALLS, ID 83301			25,771.	0.			SOFTWARE FOR FORENSIC DISCOVERY
UNIFIED POLICE DEPARTMENT 3365 S 900 W ROOM 121 SALT LAKE CITY, UT 84119			10,522.	0.			SOFTWARE FOR FORENSIC DISCOVERY
UNIFIED POLICE DEPARTMENT OF GREATER SALT LAKE - 3365 S 900 W - SOUTH SALT LAKE, UT 84119			8,835.	0.			SOFTWARE FOR FORENSIC DISCOVERY
UNITAS NORTH AMERICA 1177 AVENUE OF THE AMERICAS 5TH FKL NEW YORK, NY 10036	61-1661747	501(C)(3)	20,000.	0.			SUPPORT AND SUPPLIES
UNIVERSITY OF CALIFORNIA IRVINE CAMPUS DR IRVINE, CA 92697			23,155.	0.			SUPPORT AND SUPPLIES
UPPER PENINSULA HUMAN TRAFFICKING TASK FORCE - PO BOX 232 - MARQUETTE, MI 49985	83-1831010	501(C)(3)	7,400.	0.			SUPPORT AND SUPPLIES
UPPER PROVIDENCE POLICE DEPARTMENT 1286 BLACK ROCK RD PHOENIXVILLE, PA 19460			5,280.	0.			SOFTWARE FOR FORENSIC DISCOVERY
UTAH CRIME VICTIM LEGAL CLINIC INC 404 E 4500 S, SUITE B24 SALT LAKE CITY, UT 84107	81-0676973		42,702.	0.			SOFTWARE FOR FORENSIC DISCOVERY
UTAH TECH UNIVERSITY 225 S UNIVERSITY AVE. ST GEORGE, UT 84770	87-6000488		86,678.	0.			SUPPORT AND SUPPLIES

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
VENICE POLICE DEPARTMENT 1575 E. VENICE AVE. VENICE, FL 34292			9,021.	0.			SOFTWARE FOR FORENSIC DISCOVERY
VIENNA POLICE DEPARTMENT 604 29TH ST. VIENNA, WV 26105			12,640.	0.			SOFTWARE FOR FORENSIC DISCOVERY
WARREN COUNTY SHERIFF'S OFFICE 1400 STATE ROUTE 9 LAKE GEORGE, NY 12845			6,680.	0.			SOFTWARE FOR FORENSIC DISCOVERY
WASATCH INTERNATIONAL ADOPTIONS 1140 36TH ST. STE. 204 OGDEN, UT 84403	84-1411933	501(C)(3)	40,000.	0.			ADOPTION EXPENSES
WASHINGTON COUNTY SHERIFF 620 5300 W HURRICANE, UT 84737			17,121.	0.			SOFTWARE FOR FORENSIC DISCOVERY
WATERTOWN POLICE DEPARTMENT 128 N MAPLE WATERTOWN, SD 57201			8,996.	0.			SOFTWARE FOR FORENSIC DISCOVERY
WEST CHESTER POLICE DEPARTMENT 9577 BECKETT RD WEST CHESTER TOWNSHIP, OH 45069			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY
WEST HAZLETON POLICE DEPARTMENT 122 E BROAD ST WEST HAZLETON, PA 18202			10,150.	0.			SOFTWARE FOR FORENSIC DISCOVERY
WHITE COUNTY SHERIFF 1600 E BOOTH RD SEARCY, AR 72143			9,571.	0.			SOFTWARE FOR FORENSIC DISCOVERY

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
WIDE HORIZONS FOR CHILDREN, INC. 391 TOTTEN POND ROAD SUITE #303 WALTHAM, MA 02451	04-2564960	501(C)(3)	35,000.	0.			SUPPORT AND SUPPLIES
WILLISTON POLICE DEPARTMENT 223 E BROADWAY # 201 WILLISTON, ND 58801			9,071.	0.			SOFTWARE FOR FORENSIC DISCOVERY
WILLOUGHBY POLICE DEPARTMENT 36700 EUCLID AVE WILLOUGHBY, OH 44094			10,521.	0.			SOFTWARE FOR FORENSIC DISCOVERY
WILLOWBEND FARMS, INC. 3757 GEORGETOWN ROAD NW CLEVELAND, TN 37312	82-0834802	501(C)(3)	15,200.	0.			SUPPORT AND SUPPLIES
WOOD COUNTY SHERIFF 402 S. STEPHENS ST QUITMAN, TX 75783			6,680.	0.			SOFTWARE FOR FORENSIC DISCOVERY
WORLD LINKS ASSOCIATION, INC. 418 JEFFERSON AVENUE SCRANTON, PA 18510	23-2864048	501(C)(3)	92,000.	0.			SUPPORT AND SUPPLIES
YAKIMA POLICE DEPARTMENT 200 S 3RD ST #2 YAKIMA, WA 98901			25,271.	0.			SOFTWARE FOR FORENSIC DISCOVERY
YORK POLICE DEPARTMENT 186 YORK STREET YORK, ME 03909			10,791.	0.			SOFTWARE FOR FORENSIC DISCOVERY
YUBA CITY POLICE DEPARTMENT 1545 POOLE BLVD YUBA CITY, CA 95993			25,271.	0.			SOFTWARE FOR FORENSIC DISCOVERY

Schedule I (Form 990)

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
AFTERCARE	12	57,333.	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:

OPERATIONS ASSISTANT CONTACTS RECIPIENTS WHO ARE REQUIRED TO SUBMIT REGULAR
REPORTS ON THE USE OF GRANTED FUNDS.

**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

OPERATION UNDERGROUND RAILROAD, INC.

Employer identification number

46-3614979

Part I Questions Regarding Compensation

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"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" 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?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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?
- b** Any related organization?
- 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?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
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) BRAD DAMON PRESIDENT	(i)	541,675.	0.	4,375.	20,500.	0.	566,550.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TIM BALLARD FOUNDER AND CEO	(i)	521,833.	0.	4,125.	20,500.	0.	546,458.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SIMON BREWER CHIEF FINANCIAL OFFICER/CHIEF OPERAT	(i)	375,225.	0.	4,625.	20,500.	0.	400,350.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) NATHON LEWIS CHIEF DEVELOPMENT OFFICER	(i)	288,583.	0.	0.	20,500.	0.	309,083.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) EMILY EVANS CHIEF COMMUNICATIONS OFFICER	(i)	263,167.	0.	0.	27,000.	0.	290,167.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JERRY GOWEN CHIEF EXPERIENCE OFFICER	(i)	260,258.	0.	2,925.	18,523.	0.	281,706.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ALESSANDRA SERANO CHIEF LEGAL OFFICER	(i)	260,900.	0.	0.	20,500.	0.	281,400.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JEFF CARTER CHIEF E-COMMERCE OFFICER	(i)	253,167.	0.	0.	15,091.	0.	268,258.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization: **OPERATION UNDERGROUND RAILROAD, INC.**
Employer identification number: **46-3614979**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	7,720	414,597.	FAIR MARKET VALUE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (<u>VARIOUS ITEMS</u>)	X	1	391,674.	RETAIL VALUE
26	Other (_____)				
27	Other (_____)				
28	Other (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

**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

OPERATION UNDERGROUND RAILROAD, INC.

Employer identification number

46-3614979

FORM 990, PART VI, SECTION A, LINE 2:

MARK BLAKE (DIRECTOR) IS TIM BALLARD'S (DIRECTOR) BROTHER-IN-LAW.

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

RETURN IS PROVIDED TO THE BOARD FOR REVIEW PRIOR TO FILING.

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

TIME IS GIVEN AT QUARTERLY MEETING TO DISCUSS AND MONITOR CONFLICT OF
INTEREST.

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

THE PROCESS FOR DETERMINING COMPENSATION OF THE ORGANIZATION'S OFFICERS OR
KEY EMPLOYEES INCLUDES A REVIEW AND APPROVAL BY USING COMPARABILITY DATA
AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION, AND
INTERESTED PERSONS, IF ANY, RECUSE THEMSELVES FROM THE DECISION, ALL
CONSISTENT WITH TREAS. REG. SECTION 53.4968-6.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

CA, FL, ME, OH, OK, RI, SC, TN, UT, CO, HI, MS, NM, NC, NV, CT, AL, AK, AR, GA, IL, KS, KY, MD, MA
MI, MN, NH, NJ, NY, ND, OR, PA, VA, WA, WV, WI, MO, LA, DC

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

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

Name of the organization OPERATION UNDERGROUND RAILROAD, INC.	Employer identification number 46-3614979
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FORM 990, PART VII, SECTION A, LINE 1A:

ANY COMPENSATION PAID TO A DIRECTOR IS FOR SERVICES RENDERED AS A CONTRACTOR OR OTHERWISE AND NOT IN HIS OR HER CAPACITY AS A DIRECTOR.

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

CONTRACT LABOR:

PROGRAM SERVICE EXPENSES	3,556,408.
MANAGEMENT AND GENERAL EXPENSES	2,313,343.
FUNDRAISING EXPENSES	146,893.
TOTAL EXPENSES	6,016,644.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	6,016,644.

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

ELIMINATED DEACON ACTIVITY	286.
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**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 **OPERATION UNDERGROUND RAILROAD, INC.** Employer identification number **46-3614979**

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
THE UNDERGROUND XFIT, LLC 5121 MURRAY BLVD MURRAY, UT 84123	FITNESS CENTER	UTAH	212,520.	268,468.	OPERATION UNDERGROUND RAILROAD, INC.
O.U.R. AFTERCARE GROUP, LLC 5121 MURRAY BLVD MURRAY, UT 84123	AFTERCARE	UTAH	0.	0.	OPERATION UNDERGROUND RAILROAD, INC.
O.U.R. THERAPEUTIC SERVICES, LLC 5121 MURRAY BLVD MURRAY, UT 84123	AFTERCARE SUPPORT	UTAH	0.	0.	OPERATION UNDERGROUND RAILROAD, INC.
O.U.R. STORE, LLC 5121 MURRAY BLVD MURRAY, UT 84123	MERCHANDISE	UTAH	0.	0.	OPERATION UNDERGROUND RAILROAD, 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

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
DEACON, INC. - 47-1928325 1950 CORPORATE WAY ANAHEIM, CA 92801	OPERATIONAL SUPPORT	NV	OPERATION UNDERGROUND RAILROAD, INC.	C CORP	0.	0.	100%		X

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)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

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

Multiple horizontal lines for supplemental information.

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2022

Department of the Treasury
Internal Revenue Service

For calendar year 2022 or other tax year beginning _____, and ending _____

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

Open to Public Inspection for
501(c)(3) Organizations Only

<p>A <input checked="" type="checkbox"/> Check box if address changed.</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A</p>	Print or Type	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) OPERATION UNDERGROUND RAILROAD, INC.</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 57338</p> <p>City or town, state or province, country, and ZIP or foreign postal code MURRAY, UT 84157</p>	<p>D Employer identification number 46-3614979</p> <p>E Group exemption number (see instructions)</p> <p>F <input type="checkbox"/> Check box if an amended return.</p>
<p>C Book value of all assets at end of year 268,468.</p>			
<p>G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> State college/university</p>			
<p>H Check if filing only to <input type="checkbox"/> Claim credit from Form 8941 <input type="checkbox"/> Claim a refund shown on Form 2439</p>			
<p>I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation <input type="checkbox"/></p>			
<p>J Enter the number of attached Schedules A (Form 990-T) 1</p>			
<p>K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation.</p>			
<p>L The books are in care of CARLOS BAUER</p>		<p>Telephone number 818-850-6146</p>	

Part I Total Unrelated Business Taxable Income		
1	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	0.
2	Reserved	
3	Add lines 1 and 2	
4	Charitable contributions (see instructions for limitation rules)	0.
5	Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	
6	Deduction for net operating loss. See instructions	
7	Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	
8	Specific deduction (generally \$1,000, but see instructions for exceptions)	1,000.
9	Trusts. Section 199A deduction. See instructions	
10	Total deductions. Add lines 8 and 9	1,000.
11	Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	0.

Part II Tax Computation		
1	Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	0.
2	Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	
3	Proxy tax. See instructions	
4	Other tax amounts. See instructions	
5	Alternative minimum tax (trusts only)	
6	Tax on noncompliant facility income. See instructions	
7	Total. Add lines 3 through 6 to line 1 or 2, whichever applies	0.

LHA For Paperwork Reduction Act Notice, see instructions.

Part III Tax and Payments			
1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b Other credits (see instructions)	1b		
c General business credit. Attach Form 3800 (see instructions)	1c		
d Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e Total credits. Add lines 1a through 1d		1e	
2 Subtract line 1e from Part II, line 7		2	0.
3 Other amounts due. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)		3	
4 Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here		4	0.
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k)		5	0.
6a Payments: A 2021 overpayment credited to 2022	6a		
b 2022 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c Tax deposited with Form 8868	6c		
d Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e Backup withholding (see instructions)	6e		
f Credit for small employer health insurance premiums (attach Form 8941)	6f		
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total	6g		
7 Total payments. Add lines 6a through 6g		7	
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>		8	
9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed		9	
10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid		10	
11 Enter the amount of line 10 you want: Credited to 2023 estimated tax Refunded		11	

Part IV Statements Regarding Certain Activities and Other Information (see instructions)			
1 At any time during the 2022 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here CANADA		Yes	No
		X	
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?			X
If "Yes," see instructions for other forms the organization may have to file.			
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____			
4 Enter available pre-2018 NOL carryovers here \$ _____ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.			
5 Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.			
Business Activity Code	Available post-2017 NOL carryover		
713940	\$ 70,109.		
	\$		
6a Did the organization change its method of accounting? (see instructions)			X
b If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V			

Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.				
		Date	Title		
			TREASURER		May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	MARC A. METCALF	MARC A. METCALF	05/15/23		P00170461
	Firm's name TANNER LLC	Firm's EIN 20-2253063			
Firm's address	36 S STATE STREET, SUITE 600 SALT LAKE CITY, UT 84111			Phone no. 801-532-7444	

**SCHEDULE A
(Form 990-T)**

Department of the Treasury
Internal Revenue Service

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

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

1
OMB No. 1545-0047

2022

Open to Public Inspection for
501(c)(3) Organizations Only

A Name of the organization OPERATION UNDERGROUND RAILROAD, INC.	B Employer identification number 46-3614979
C Unrelated business activity code (see instructions) 713940	D Sequence: 1 of 1

E Describe the unrelated trade or business **FITNESS CENTER**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales <u>209,369.</u>				
b Less returns and allowances _____ c Balance	1c	209,369.		
2 Cost of goods sold (Part III, line 8)	2	12,318.		
3 Gross profit. Subtract line 2 from line 1c	3	197,051.		197,051.
4 a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a			
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b			
c Capital loss deduction for trusts	4c			
5 Income (loss) from a partnership or an S corporation (attach statement)	5			
6 Rent income (Part IV)	6			
7 Unrelated debt-financed income (Part V)	7			
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8			
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9			
10 Exploited exempt activity income (Part VIII)	10			
11 Advertising income (Part IX)	11			
12 Other income (see instructions; attach statement) <u>STMT 1</u>	12	3,151.		3,151.
13 Total. Combine lines 3 through 12	13	200,202.		200,202.

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1 Compensation of officers, directors, and trustees (Part X)				
2 Salaries and wages	2			174,465.
3 Repairs and maintenance	3			26,291.
4 Bad debts	4			
5 Interest (attach statement). See instructions	5			
6 Taxes and licenses	6			18,217.
7 Depreciation (attach Form 4562). See instructions	7	18,217.		
8 Less depreciation claimed in Part III and elsewhere on return	8a			18,217.
9 Depletion	9			
10 Contributions to deferred compensation plans	10			
11 Employee benefit programs	11			
12 Excess exempt expenses (Part VIII)	12			
13 Excess readership costs (Part IX)	13			
14 Other deductions (attach statement) <u>SEE STATEMENT 2</u>	14			159,096.
15 Total deductions. Add lines 1 through 14	15			396,286.
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16			-196,084.
17 Deduction for net operating loss. See instructions	17			0.
18 Unrelated business taxable income. Subtract line 17 from line 16	18			-196,084.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

Part III Cost of Goods Sold		Enter method of inventory valuation	COST
1	Inventory at beginning of year		1,202.
2	Purchases		12,318.
3	Cost of labor		0.
4	Additional section 263A costs (attach statement)		0.
5	Other costs (attach statement)		0.
6	Total. Add lines 1 through 5		13,520.
7	Inventory at end of year		1,202.
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2		12,318.
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)					
1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.					
A	<input type="checkbox"/>				
B	<input type="checkbox"/>				
C	<input type="checkbox"/>				
D	<input type="checkbox"/>				
		A	B	C	D
2	Rent received or accrued				
a	From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)				0.
4	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)				0.

Part V Unrelated Debt-Financed Income (see instructions)					
1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.					
A	<input type="checkbox"/>				
B	<input type="checkbox"/>				
C	<input type="checkbox"/>				
D	<input type="checkbox"/>				
		A	B	C	D
2	Gross income from or allocable to debt-financed property				
3	Deductions directly connected with or allocable to debt-financed property				
a	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
c	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)				0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)				0.
11	Total dividends-received deductions included in line 10				0.

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

		Exempt Controlled Organizations			
1. Name of controlled organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)	
Totals			0.	0.	

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals		0.		0.

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity: _____		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4	
5	Gross income from activity that is not unrelated business income	5	
6	Expenses attributable to income entered on line 5	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7	

FORM 990-T (A)	OTHER INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
OTHER INCOME		3,151.
TOTAL TO SCHEDULE A, PART I, LINE 12		3,151.

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
GENERAL & ADMINISTRATIVE		45,343.
RENT EXPENSE		81,275.
UTILITIES		11,657.
LEGAL & PROFESSIONAL		7,908.
INSURANCE		4,238.
TRAVEL		8,675.
TOTAL TO SCHEDULE A, PART II, LINE 14		159,096.

990-T SCH A	POST-2017 NET OPERATING LOSS DEDUCTION			STATEMENT 3
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/20	53,930.	0.	53,930.	53,930.
12/31/21	16,179.	0.	16,179.	16,179.
NOL CARRYOVER AVAILABLE THIS YEAR			70,109.	70,109.

Depreciation and Amortization
(Including Information on Listed Property) A PG1 1

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form4562 for instructions and the latest information.

Attach to your tax return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

OPERATION UNDERGROUND RAILROAD, INC.

FITNESS CENTER

46-3614979

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,080,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,700,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2021 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2022	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2022 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year	/	30 yrs.	MM	S/L	
d	40-year	/	40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	18,217.
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	18,217.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost. Includes rows 25-29.

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table with 6 columns: (a) Vehicle, (b) Vehicle, (c) Vehicle, (d) Vehicle, (e) Vehicle, (f) Vehicle. Includes rows 30-36.

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

Table with 2 columns: Yes, No. Includes rows 37-41.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year. Includes rows 42-44.