Name: LEWIS COUNTY OPPORTUNITIES, INC.

FEIN: \*\*\*\*\*6837 Tax Year: 2023

Accept Date: 05/21/2024

### Alert(s) applied to this return are as follows:

Form:

Code: R0000-232
Taxing Authority: Federal

### Explanation:

IRSResponsiblePrtyInfoCurrInd' in the Return Header does not have a choice of "Yes" indicated. Therefore, (1) 'Form8822BAttachedInd' must be checked in the Return Header and (2) a binary attachment with description containing "Form 8822-B" must be present in the return. This return does not satisfy both conditions (1) and (2). IRS regulations require any entity with an EIN to update the Responsible Party information within 60 days of any change by filing Form 8822-B, Change of Address or Responsible Party - Business. For additional information on Form 8822-B, visit the IRS website at: https://www.irs.gov/forms-pubs/about-form-8822-b. It is critical that the IRS have accurate Responsible Party information in cases of identity theft or other fraud issues related to EINs or business accounts. For additional information on Responsible Parties, visit the IRS website at: https://www.irs.gov/businesses/small-businesses-self-employed/responsible-parties-and-nominees.

Dependent Information:

/efile:Return/efile:ReturnHeader

### Solution:

This is an alert issued by the IRS. It is not a rejection. Per the business rule, IRS regulations require any entity with an EIN to update the Responsible Party information. The program will default to No for all returns and a Form 8822-B will need to be attached. For a return that has the Responsible Party information changed or updated, please select the option on:

Worksheet View:

Other > 8822-B - Change of Address or Responsible Party - Business > The IRS has the current responsible party information field

Interview Forms View:

Interview Form O-11, Box 37

## Form **8868**

(Rev. January 2024)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

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

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions. All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Type or Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) **Print** LEWIS COUNTY OPPORTUNITIES, INC. 16-6066837 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 8265 STATE ROUTE 812 City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions LOWVILLE, NY 13367 Enter the Return Code for the return that this application is for (file a separate application for each return) 01 **Application Is For** Return | Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) Form 8870 12 05 Form 990-T (trust other than above) Form 5330 (individual) 13 Form 990-T (corporation) 07 Form 5330 (other than individual) 14 Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of DEANNA FINSTER 8265 STATE ROUTE 812 - LOWVILLE, NY 13367 Telephone No. 315-376-8202 Fax No. If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN)
 . If this is for the whole group, check this . If it is for part of the group, check this box ............ and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15 , 20 24 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 23 or , 20 , and ending Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3b c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Зс

### Form 8879-TE

### **IRS E-file Signature Authorization** for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name and title of officer or person subject to tax

Do not send to the IRS. Keep for your records.

Name of filer

Go to www.irs.gov/Form8879TE for the latest information.

LEWIS COUNTY OPPORTUNITIES, INC.

JOSEPH HALL

16-6066837

EIN or SSN

CHAIRPERSON Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable blank (do not enter 0.) But if you entered 0 on the return then

than or	ne line in Part I.	enter o.j.	but, if you entered to off the return, then enter to off the applicable line	below. Do not complete more
1a	Form 990 check here	X	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b 3,136,604.
2a	Form 990-EZ check here		Total revenue, if any (Form 990-EZ, line 9)	
3a	Form 1120-POL check here		Total tax (Form 1120-POL, line 22)	
4a	Form 990-PF check here		Tax based on investment income (Form 990-PF, Part V, line 5)	
5a	Form 8868 check here		Balance due (Form 8868, line 3c)	5b
6a	Form 990-T check here		Total tax (Form 990-T, Part III, line 4)	6b
7a	Form 4720 check here		Total tax (Form 4720, Part III, line 1)	7b
8a	Form 5227 check here		FMV of assets at end of tax year (Form 5227, Item D)	
9a	Form 5330 check here		Tax due (Form 5330, Part II, line 19)	
10a	Form 8038-CP check here		Amount of credit payment requested (Form 8038-CP, Part III, line 22	
Part			re Authorization of Officer or Person Subject to Tax	
Under <sub>l</sub>	penalties of perjury, I declare th	at X I	am an officer of the above entity or I am a person subject to tax wit	h respect to (name
of entit	y)		, (EIN) and that	have examined a copy of the
comple	te. I further declare that the am	iount in Pa	dules and statements, and, to the best of my knowledge and belief, they art I above is the amount shown on the copy of the electronic return. I co	onsent to allow my

intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN:	check	one	box	only

X lauthorize BOWERS & COMPANY CPAS

to enter my PIN

66837

ERO firm name

Enter five numbers, but do not enter all zeros

as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

**Certification and Authentication** 

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

16075738062

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

**BOWERS & COMPANY CPAS** PLLC

**ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8879-TE (2023)

# Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Inter	nal Rev	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and t	the latest	information.	Inspection
Α	For th	e 2023 calend	ar year, or tax year beginning and	ending		
В	Check if applicat	C Name o	f organization		D Employer identific	ation number
	Addr	ge LTRMT	S COUNTY OPPORTUNITIES, INC.			
L	Name chan	ge Doing b	usiness as		16-606683	37
	returi Final returi	Number 8265	and street (or P.O. box if mail is not delivered to street address)  STATE ROUTE 812	Room/suite	E Telephone number 315-376-8	3202
	termi eted	City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,189,307.
	Amer	LOWV	ILLE, NY 13367		H(a) Is this a group ret	
	Appli ton pend	ina	nd address of principal officer: AS C ABOVE		for subordinates?  H(b) Are all subordinates inc	
1	Tax-ex	empt status:	X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) c	or 52		st. See instructions
	Websi		LEWISCOUNTYOPPORTUNITIES.COM		H(c) Group exemption	
		THE RESIDENCE OF THE PARTY OF T	X Corporation Trust Association Other	L Yea	r of formation: 1965 M	
Pa	art I	Summary				
Activities & Governance	1		e the organization's mission or most significant activities: $rac{V}{ ext{OTE}}$ A HIGHER QUALITY OF LIFE $\overline{ ext{IN}}$ $\overline{ ext{OT}}$	WORKI	NG WITH PEOPI MMUNITY.	E IN NEED
erns	2	Check this bo	x if the organization discontinued its operations or dispos	sed of mo	re than 25% of its net ass	sets.
300	3		ting members of the governing body (Part VI, line 1a)		3	12
ø	4	Number of ind	ependent voting members of the governing body (Part VI, line 1b) .		4	12
ties	5	Total number	of individuals employed in calendar year 2023 (Part V, line 2a)		5	41
ţ	6	Total number	of volunteers (estimate if necessary)		6	79
Ac	/a	Not unrelated	d business revenue from Part VIII, column (C), line 12		7a	0.
_		Net unrelated	business taxable income from Form 990-T, Part I, line 11	······	7b	0 . Current Year
4	8	Contributions	1,995,802.	1,631,660.		
Revenue	9	Program servi	and grants (Part VIII, line 1h) ce revenue (Part VIII, line 2g)		1,047,065.	1,462,948.
eve	10		come (Part VIII, column (A), lines 3, 4, and 7d)		13,111.	34,676.
<u>~</u>	11	Other revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7,200.	7,320.
	12	Total revenue	add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,063,178.	3,136,604.
	13	Grants and sir	nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other	compensation, employee benefits (Part IX, column (A), lines 5-10) .		1,439,732.	1,561,885.
ens	16a	Professional fu	undraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses			ng expenses (Part IX, column (D), line 25)	0.		
_	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		1,635,691.	1,568,918.
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,075,423.	3,130,803.
or es	19	Revenue less	expenses. Subtract line 18 from line 12		-12,245.	5,801.
Net Assets or Fund Balances	20	Total assets (F	Part X, line 16)	F	1,738,555.	End of Year 1,750,773.
Ass Ba	21	A compared to the compared to	(Part X, line 26)	·····	341,178.	333,341.
Net	22		fund balances. Subtract line 21 from line 20		1,397,377.	1,417,432.
Pa	art II					2/11//1024
Und	er pena	alties of perjury, I	declare that I have examined this return, including accompanying schedules	s and stater	ments, and to the best of my	knowledge and belief, it is
			Declaration of preparer (other than officer) is based on all information of wh			
		· Josep	k. W. How.		20 Mg	4505 v
Sig	n	Signature of of			Date	1
Her	е	JOSEPH				
		Type or print na			N-L	
Do:-		Print/Type prep		181	5/13/24 Check if	PTIN
Paid		ELIZABE	POWERS COMPANY CRES PLIC	-	Self-elliployed	P01264627
0.0000	oarer Only	Firm's name Firm's address	BOWERS & COMPANY CPAS PLLC 1120 COMMERCE PARK DRIVE EAST		Firm's EIN 20	-1317788
058	Unity	riiii s address	WATERTOWN, NY 13601		245	700 7600
140:	, the !!	PS discuss this			Phone no. 3 1 5	-788-7690
iviay	ure II	no discuss this	return with the preparer shown above? See instructions			X Yes No

Form	990 (2023) LEWIS COUNTY OPPORTUNITIES, INC. 16-6066837 Page 2
	t III   Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	WORKING WITH PEOPLE IN NEED TO PROMOTE A HIGHER QUALITY OF LIFE IN OUR
	COMMUNITY.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 394,793. including grants of \$) (Revenue \$ 36,433.)
	DOMESTIC VIOLENCE AND RAPE CRISIS SERVICES - PROVIDE A 24-HOUR CRISIS
	HOTLINE, CRIME VICTIMS ASSISTANCE, SAFE DWELLING, ADVOCACY, COUNSELING,
	THERAPY, INFORMATION AND REFERRALS, TRANSPORTATION, AND COMMUNITY
	EDUCATION AND OUTREACH.
	1 540 000 1 220 210
4b	(Code:) (Expenses \$ 1,548,029. HOUSING ASSSITANCE PROGRAM - PROVIDE RENT SUBSIDIES AND OTHER HOUSING
	HOUSING ASSSITANCE PROGRAM - PROVIDE RENT SUBSIDIES AND OTHER HOUSING ASSISTANCE TO QUALIFYING INDIVIDUALS AND FAMILIES.
	ASSISTANCE TO QUALIFITING INDIVIDUALS AND FAMILIES.
4c	(Code: ) (Expenses \$ 452,635 • including grants of \$ ) (Revenue \$ 25,614 • )
70	ENERGY CONSERVATION - EDUCATE CONSUMERS ON THE BENEFITS OF ENERGY
	CONSERVATION AND ASSIST IN PROVIDING NECESSARY REPAIRS OR IMPROVEMENTS
	AS DETERMINED BY AN ENERGY AUDIT.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 306,773 • including grants of \$ 170,703 •)
4e	Total program service expenses 2,702,230.
	2000/2000

## Form 990 (2023) LEWIS COUNTY 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)?		Х	
•	If "Yes," complete Schedule A	2	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Λ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
7	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			,,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			Х
9	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	8		- 25
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	3		
10	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
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,	.0		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			,,
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	Х	
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	Λ	
IZa	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	4	_	
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			,,
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			Х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		_^
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20</b> b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	64		Х
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	000	

X

Page 4 Part IV Checklist of Required Schedules (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х Schedule K. If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete X 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Х 26 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Х entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Х "Yes," complete Schedule L, Part IV 28a X **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If Х "Yes," complete Schedule L, Part IV X Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Х 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? X If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 144 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable **b** Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Page 5

Form 990 (2023) LEWIS COUNTY OPPORTUNITIES, INC.

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

		_		Yes	No
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	4.1			
	filed for the calendar year ending with or within the year covered by this return	41		v	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1	2b	Х	Х
	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Λ
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		4-		х
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		Λ
D	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCFN Form 114. Penert of Foreign Bank and Financial Accounts (FRAR)				
50	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization s		30		
ou	any contributions that were not tax deductible as charitable contributions?		6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		- Ou		
~	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to t	the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required				
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as requ	uired?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form	1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	, , , , , , , , , , , , , , , , , , , ,		9b		
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12 10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter:				
a b	Gross income from members or shareholders				
b	amounts due or received from them.)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		u		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans				
С	Enter the amount of reserves on hand				
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		X
_	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

Page 6

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	•		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY			
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	availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	ıd finar	ncial	
	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			
	DEANNA FINSTER - 315-376-8202			
	8265 STATE ROUTE 812, LOWVILLE, NY 13367			

## 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.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	itior	) than	one	Reportable	Reportable	Estimated
	hours per	(do not check more than one box, unless person is both an officer and a director/trustee)			is bot	h an	compensation	compensation	amount of	
	week	-	OGI GII		1	1	100)	from the	from related	other
	(list any hours for	direct						organization	organizations (W-2/1099-MISC/	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	nal tru		oyee	ompe		1099-NEC)	,	and related
	below	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	mer			organizations
_	line)	lр ц	Inst	Officer	Key	Hig	Pg.			
(1) SCOTT MATHYS	40.00	4								10 050
CHIEF EXECUTIVE OFFICER	40.00			Х				75,673.	0.	10,052.
(2) DEANNA FINSTER	40.00	1						F0 F40		0 005
FINANCE DIRECTOR	1 00			Х				52,548.	0.	8,895.
(3) DAINA DICOB	1.00	١								
DIRECTOR	1 00	Х			_			0.	0.	0.
(4) LOREN LYNDAKER	1.00	٠,							0	_
DIRECTOR	1 00	Х						0.	0.	0.
(5) JUDITH KARELUS	1.00	₩.						0.	0.	0
DIRECTOR (C) MARLINA PARTITION	1.00	Х						0.	0.	0.
(6) MARILYN PATTERSON DIRECTOR	1.00	X						0.	0.	0.
(7) SHERI SCHULZ	1.00	Δ				-		0.	0.	0.
VICE CHAIRPERSON	1.00	X		х				0.	0.	0.
(8) JANNET SEELMAN	1.00			^				0.	0.	
DIRECTOR	1.00	X						0.	0.	0.
(9) PAMELA STANLEY	1.00							0.	0.	•
SECRETARY	1.00	$\mathbf{x}$		Х				0.	0.	0.
(10) JEANNE WOODING	1.00					┢			•	<u> </u>
DIRECTOR	1.00	x						0.	0.	0.
(11) JOSEPH HALL	1.00	+						1	•	
CHAIRSPERSON		x		х				0.	0.	0.
(12) GENEVIEVE FIDLER	1.00									
DIRECTOR		x						0.	0.	0.
(13) JAKE MOSER	1.00							-		
TREASURER		Х		Х				0.	0.	0.
(14) JENNIFER JONES	1.00									
DIRECTOR		Х						0.	0.	0.
		1								
		L	L	L						
		1		1			l			

332007 12-21-23 Form **990** (2023)

Form 990 (2023) LEWIS COI	JNTY OPI	POE	RTU	JN]	[T]	IES	3,	INC.	16-6	066	837	Pa	ge <b>8</b>
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
<b>(A)</b> Name and title	(B) Average hours per week	box	not c , unle	ss pe	ition more rson i	than is bot or/trus	h an	( <b>D)</b> Reportable compensation from	(E)  Reportable  compensatio  from related	on	Est am	(F) imated ount o other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MIS 1099-NEC)	s SC/	comp fro orga and	ensat m the nizatio relate nizatio	on d
										$\dashv$			
										$\dashv$			
										$\dashv$			
										$\dashv$			—
1b Subtotal c Total from continuation sheets to Part Vi								128,221.		0.	18	, 94	17.
d Total (add lines 1b and 1c)  Total number of individuals (including but n								128,221. ecceived more than \$100	0,000 of reportab	0 •	18	3,94	.7.
compensation from the organization	_										,	Yes	0 <b>N</b> o
3 Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for s	such individual										3		Х
4 For any individual listed on line 1a, is the su and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J i	for such individual		[	4		Х
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	•				-		elat	ted organization or indiv	idual for services	·	5		X
Section B. Independent Contractors     Complete this table for your five highest contractors	•	•							•	npens	ation fr	om	
the organization. Report compensation for  (A)  Name and business			ONI		VILITI	Or W	ıuııı	(B)  Description of s		С	(C) ompen		
		110	2111										

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

\$100,000 of compensation from the organization

Form 990 (2023) LEWIS C

		Check if Schedule O con	tains a response	or note to anv lir	ne in this Part VIII			
				<u></u>	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt		Revenue excluded from tax under
						function revenue	business revenue	sections 512 - 514
<u> </u>	1 2	Federated campaigns	1a					
uni								
اع تي		Membership dues						
r A		•						
اءً'ج		Related organizations	1	E00 1E6				
Sin		Government grants (contribu	· -	589,156.				
e Hi	f	All other contributions, gifts, gran		40 E04				
활		similar amounts not included abo	··· <del>                                   </del>	42,504.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	s 1a-1f <b>1g</b> \$	15,590.	1 624 660			
<u>ā č</u>	h	Total. Add lines 1a-1f			1,631,660.			
				Business Code				
Se	2 a	FEES & CONTRACT	rs govt	624200	1,462,948.	1,462,948.		
Program Service Revenue	b							
<u>م تا</u>	С							
eve	d							
90E	е							
곱	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f			1,462,948.			
	3	Investment income (including						
			, , , , , , , , , , , , , , , , , , , ,		22,009.			22,009.
	4	Income from investment of ta			,			•
	5	Royalties						
	Ū	Tioyanico	(i) Real	(ii) Personal				
	6 2	Gross rents 6a	7 200	( )				
	b	Rental income or (loss)						
		,			7,200.			7,200.
		Net rental income or (loss) Gross amount from sales of	(i) Securities	(ii) Other	7,200.			7,200.
	<i>i</i> a		CE 200	(ii) Oti lei				
		assets other than inventory 7a	05,570.					
a	b	Less: cost or other basis	F2 702					
Š		and sales expenses <b>7</b> b						
ther Revenue		Gain or (loss) 70			10 667			10 667
۳.		Net gain or (loss)			12,667.			12,667.
the	8 a	Gross income from fundraising e	events (not					
0		including \$	of					
		contributions reported on line						
		Part IV, line 18						
	b	Less: direct expenses	8b					
		Net income or (loss) from fund						
	9 a	Gross income from gaming a						
		Part IV, line 19	9a					
	b	Less: direct expenses	9b					
	С	Net income or (loss) from gan	ning activities <u></u>					
	10 a	Gross sales of inventory, less	returns					
		and allowances	10a					
	b	Less: cost of goods sold						
		Net income or (loss) from sale						
s				<b>Business Code</b>				
Miscellaneous Revenue	11 a	MISCELLANEOUS		900099	120.	120.		
an ž	b							
	c							
ĨŠ.		All other revenue						
_		Total. Add lines 11a-11d			120.			
	12	Total revenue. See instructions			3,136,604.	1,463,068.	0.	41,876.

### 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).

0001	Check if Schedule O contains a respor	•		, ,	
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		'		'
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	128,221.		128,221.	
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	1,180,671.	1,016,416.	164,255.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	64,904.	55,168.	9,736.	
9	Other employee benefits	104,671.	85,192.	19,479.	
10	Payroll taxes	83,418.	70,791.	12,627.	
11	Fees for services (nonemployees):				
а	Management				
	Legal				
	Accounting	17,300.		17,300.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	52,181.	39,557.	12,624.	
12	Advertising and promotion	11,202.	10,566.	636.	
13	Office expenses	31,237.	29,751.	1,486.	
14	Information technology				
15	Royalties				
16	Occupancy	974,396.	974,396.		
17	Travel	9,344.	9,344.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			251	
19	Conferences, conventions, and meetings	7,505.	7,254.	251.	
20	Interest				
21	Payments to affiliates	17 101	40 400	C 17.CF	
22	Depreciation, depletion, and amortization	47,191.	40,426.	6,765.	_
23	Insurance	24,414.	16,611.	7,803.	
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 0.)	172 704	160 262	2 / 21	
a	PROGRAM SUPPLIES AND EX	172,794. 67,617.	169,363. 59,206.	3,431. 8,411.	
b	OCCUPANCY POOLED COSTS CONTRACTED SERVICES	41,156.	38,802.	2,354.	
C	REPAIRS & MAINTENANCE	25,392.	20,699.	4,693.	
d		25,392. 87,189.	58,688.	28,501.	
	All other expenses	3,130,803.	2,702,230.	428,501.	^
25	Total functional expenses. Add lines 1 through 24e	3,130,003.	4,104,430.	440,3/3.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720)				
	Check nere if following SOP 98-2 (ASC 958-720)				F 000 (0000)

Form 990 (2023)
Part X Balance Sheet

art X	Balance Sheet								
	Check if Schedule O contains a response or no	te to any	/ line in this Part X						
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year			
1	Cash - non-interest-bearing			114,050.	1	79,900			
2	Savings and temporary cash investments			778,686.	2	816,024			
3	Pledges and grants receivable, net			235,878.	3	192,310			
4	Accounts receivable, net			61,951.	4	100,342			
5	Loans and other receivables from any current								
	trustee, key employee, creator or founder, sub-	stantial c	ontributor, or 35%						
	controlled entity or family member of any of the	ese perso	ons		5				
6	Loans and other receivables from other disqua	lified per	sons (as defined						
	under section 4958(f)(1)), and persons describe	ed in sec	tion 4958(c)(3)(B)		6				
7	Notes and loans receivable, net				7				
8	Inventories for sale or use				8				
9	Prepaid expenses and deferred charges			821.	9	2,945			
10	a Land, buildings, and equipment: cost or other		4 04 6 000						
	basis. Complete Part VI of Schedule D		1,216,230.	207 600		202 261			
	b Less: accumulated depreciation		922,269.	307,699.	10c	293,961			
11	Investments - publicly traded securities		200,138.	11	228,907				
12	Investments - other securities. See Part IV, line		12						
13	Investments - program-related. See Part IV, line			13 14					
14		Intangible assets							
15	Other assets. See Part IV, line 11			39,332.	15	36,384			
16	Total assets. Add lines 1 through 15 (must eq			1,738,555. 194,610.	16	1,750,773 208,223			
17	Accounts payable and accrued expenses		194,010.	17 18	200,223				
18		Grants payable							
19	Deferred revenue			109,928.	19	90,805			
20 21	Tax-exempt bond liabilities				20 21				
	Escrow or custodial account liability. Complete								
22	Loans and other payables to any current or for trustee, key employee, creator or founder, sub-								
	controlled entity or family member of any of the				22				
23	Secured mortgages and notes payable to unre	-			23				
24	Unsecured notes and loans payable to unrelate		<b>_</b>		24				
25	Other liabilities (including federal income tax, p								
	parties, and other liabilities not included on line								
	of Schedule D		oomploto rait x	36,640.	25	34,313			
26	Total liabilities. Add lines 17 through 25			341,178.	26	333,341			
	Organizations that follow FASB ASC 958, ch	eck here	X	·		·			
3	and complete lines 27, 28, 32, and 33.								
27				1,397,377.	27	1,417,432			
28	Net assets with donor restrictions		28						
	Organizations that do not follow FASB ASC								
	and complete lines 29 through 33.								
27 28 29 30 31 32	Capital stock or trust principal, or current fund	s			29				
30	Paid-in or capital surplus, or land, building, or e				30				
31	Retained earnings, endowment, accumulated i	ncome, c	or other funds		31				
32	Total net assets or fund balances			1,397,377.	32	1,417,432			
33	Total liabilities and net assets/fund balances		· · · · · · · · · · · · · · · · · · ·	1,738,555.	33	1,750,773			

Form **990** (2023)

Pa	rt 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	3,13	6,6	04.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,13	0,8	03.
3	Revenue less expenses. Subtract line 2 from line 1	3			01.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,39		
5	Net unrealized gains (losses) on investments	5	1	4,2	54.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,41	7,4	32.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3h	Х	

Form **990** (2023)

### **SCHEDULE A**

(Form 990)

Total

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

LEWIS COUNTY OPPORTUNITIES. INC.

Employer identification number 16-6066837

			<del>2 0001111 0</del>		,	•					
Pa	rt I	Reason for Public	Charity Status.	All organizations must o	omplete tl	nis part.) S	See instructions.				
The	orgar	nization is not a private found	lation because it is: (	For lines 1 through 12, o	heck only	one box.)					
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)									
3		A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii)</b> .									
4	$\overline{\Box}$	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,									
7											
_	city, and state:										
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
		section 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, state, or local go	vernment or governn	nental unit described in s	section 17	70(b)(1)(A)	(v).				
7	X	An organization that norma	ılly receives a substa	ntial part of its support f	rom a gov	ernmental	unit or from the general	public described in			
		section 170(b)(1)(A)(vi). (C	omplete Part II.)								
8		A community trust describe	ed in <b>section 170(b)</b> (	1)(A)(vi). (Complete Par	t II.)						
9		An agricultural research org			•	ed in coniu	unction with a land-grant	college			
-		or university or a non-land-				-		~			
			grant conege or agric	altare (see instructions).	Litter tile	riarric, oit	y, and state of the coneg	JC 01			
40		university:	Illy receives (1) mare	than 22 1/20/ of its our	nort from	oontributie	na mambarabin face a	nd areas ressints from			
10		An organization that norma									
		activities related to its exer		· ·				-			
		income and unrelated busin		(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.			
	$\overline{}$	See <b>section 509(a)(2).</b> (Co	mplete Part III.)								
11	Щ	An organization organized	and operated exclus	ively to test for public sa	ıfety. See	section 50	09(a)(4).				
12		An organization organized	and operated exclus	ively for the benefit of, to	perform	the functio	ons of, or to carry out the	e purposes of one or			
		more publicly supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r <b>section</b> :	509(a)(2).	See section 509(a)(3).	Check the box on			
		lines 12a through 12d that	describes the type of	f supporting organizatio	n and con	nplete lines	s 12e, 12f, and 12g.				
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its sup	ported ord	ganization(s), typically by	/ giving			
		the supported organization	· · · · · · · · · · · · · · · · · · ·		•						
		organization. You must o				oo ao		-app = g			
h		¬ ~			tion with it	to oupport	ad arganization(a) by ba	vina			
b		☐ Type II. A supporting org  ☐ Type III. A supporting org  ☐ Type II. A supporting org  ☐ Type III. A supporting org  ☐ Type II. A supporting org  ☐ Type I						-			
		control or management of			ame perso	ons that co	ontrol or manage the sup	рропеа			
		organization(s). <b>You mus</b>									
С		☐ Type III functionally integrated in the property of th	egrated. A supporting	g organization operated	in connec	tion with,	and functionally integrat	ed with,			
		its supported organizatio	n(s) (see instructions	). You must complete I	Part IV, Se	ections A,	D, and E.				
d		☐ Type III non-functionally	y integrated. A supp	orting organization oper	ated in co	nnection v	with its supported organ	ization(s)			
		that is not functionally int	tegrated. The organiz	zation generally must sat	tisfy a dist	ribution re	quirement and an attent	tiveness			
		requirement (see instruct	ions). <b>You must con</b>	nplete Part IV, Sections	A and D	and Part	V.				
е		Check this box if the orga	•								
_		functionally integrated, o					, po ., . , po, . , po				
f	Ent	er the number of supported	• •		ing organi	Lation.					
,		ovide the following information		ad organization(s)							
9		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other			
		organization	(11) 2.111	(described on lines 1-10	in your governi	ng document?	support (see instructions)	support (see instructions)			
		organization		above (see instructions))	Yes	No	capport (coe mondono)	capport (coo mondenono)			
			1		1	1	I	1			

332021 12-21-23

### 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.)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	1710177.	1745410.	1829309.	1995802.	1631660.	8912358.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge	4540455	4545440	100000	1005000	1.601.660	0010050	
	Total. Add lines 1 through 3	1710177.	1745410.	1829309.	1995802.	1631660.	8912358.	
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)						0010250	
	Public support, Subtract line 5 from line 4.						8912358.	
	ction B. Total Support	( ) 0040	#12000	( ) 0004	/ N 0000	( ) 0000	(A T + 1	
	ndar year (or fiscal year beginning in)	(a) 2019 1710177.	(b) 2020 1745410.	(c) 2021 1829309.	(d) 2022 1995802.	(e) 2023 1631660.	(f) Total 8912358.	
	Amounts from line 4	1/101//•	1/45410.	1049309.	1995002.	1031000.	0912330.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,	30,166.	13,323.	24,118.	20,311.	29,209.	117,127.	
_	and income from similar sources	30,100.	13,343.	24,110.	20,311.	49,409.	11/,12/•	
9	Net income from unrelated business							
	activities, whether or not the							
40	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
44	assets (Explain in Part VI.)						9029485.	
	Gross receipts from related activities,	oto (soo instructio	one)			12 4	,981,766.	
	First 5 years. If the Form 990 is for the			fourth or fifth tax			730177000	
10	organization, check this box and stor	~						
Sec	ction C. Computation of Publ							
	Public support percentage for 2023 (			column (fl)		14	98.70 %	
						15	98.80 %	
	Public support percentage from 2022 Schedule A, Part II, line 14							
	stop here. The organization qualifies as a publicly supported organization							
b	33 1/3% support test - 2022. If the							
	and <b>stop here.</b> The organization qual							
17a	10% -facts-and-circumstances tes							
	and if the organization meets the fact	_						
	meets the facts-and-circumstances to			-				
b	10% -facts-and-circumstances tes	•			•			
	more, and if the organization meets the							
	organization meets the facts-and-circ	umstances test. Th	ne organization qu	alifies as a publicly	/ supported organ	ization		
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							

## Schedule A (Form 990) 2023 LEWIS COUNTY OPPORTUNITIES, IN 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.)

Sact	ion A. Public Support	clow, picase com	picte r art ii.j				
		(a) 2010	(b) 0000	(6) 2001	(4) 2000	(c) 2000	(6) Total
	dar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and nembership fees received. (Do not					1	
	nembership tees received. (Do not nclude any "unusual grants.")						
r f	Gross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
á	Gross receipts from activities that are not an unrelated trade or busness under section 513						
	Tax revenues levied for the organ-						
i	zation's benefit and either paid to or expended on its behalf						
	The value of services or facilities						
	urnished by a governmental unit to he organization without charge						
6	Fotal. Add lines 1 through 5						
	Amounts included on lines 1, 2, and B received from disqualified persons						
<b>b</b> A	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						
	Add lines 7a and 7b						
8 F	Public support. (Subtract line 7c from line 6.)						
Sect	ion B. Total Support						
	dar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
9	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	Inrelated business taxable income						
,	less section 511 taxes) from businesses acquired after June 30, 1975						
c A	Add lines 10a and 10b						
۶ ۱	Net income from unrelated business activities not included on line 10b, whether or not the business is egularly carried on						
(	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.)						
	First 5 years. If the Form 990 is for the	-			-		ion,
(	check this box and stop here	o Cuprost D	veente				L
	ion C. Computation of Public computation of Public computation of Public computers for 6000 (f			l (5)		145	
	Public support percentage for 2023 (I						<u>%</u>
	Public support percentage from 2022 ion D. Computation of Inves		<u> </u>			16	%
	nvestment income percentage for 20					17	%
	nvestment income percentage from 2						
	33 1/3% support tests - 2023. If the						
	nore than 33 1/3%, check this box a						
b 3	33 1/3% support tests - 2022. If the	organization did	not check a box or	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	
	ine 18 is not more than 33 1/3%, che						
∠∪ ŀ	Private foundation. If the organizatio	n dia not check a	DOX ON TIME 14. 19	a. Ur 190. Check f	nis dox and see if	เรเสนตนเดทร	_ L I

### Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

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

	Yes	No
1		
2		
_		
За		
3b		
3с		
4a		
4b		
4c		
4C		
5a		
5b		
5с		
6		
J		
7		
'		
8		
9a		
9b		
9с		
10a		
10b		

Pai	rt IV Supporting Organizations (continued)			
ı uı	Continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		162	NO
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
а	11c below, the governing body of a supported organization?	11a		
h				
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	44-		
800	detail in Part VI. tion B. Type I Supporting Organizations	11c		
360	tion b. Type i Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	_		
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
0	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)	١.		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b				
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Support	ting Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualif	ying trust on	Nov. 20, 1970 (explain in l	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations m	ust complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for 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		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	nally integrat	ed Type III supporting org	anization (see

Schedule A (Form 990) 2023

instructions).

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continu</sub>	ued)	· ·
Sect	ion D - Distributions			•	Current Year
_1_	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	IS	3	
_ 4	Amounts paid to acquire exempt-use assets			4	
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		5	
_6	Other distributions (describe in Part VI). See instructions.			6	
7	<b>Total annual distributions.</b> Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
_3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
c	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
<u> </u>	Carryover from 2018 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.  Remaining underdistributions for years prior to 2023, if				
5	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
U	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
•	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				
					hadria A (Farm 000) 0000

Schedule A (Form 990) 2023

Part VI	Supplemental Information, Devide the explanations required by Part II like 40, Part II like 47, and 7h, Part III like 40.
T dit 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 1 c, 2a, 2b, 3a, and 3b; Part V, Ine 1; Part V, Section B, line 1e; Part V, Section B,
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

### **SCHEDULE D**

(Form 990)

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.

Open to Public Inspection

Name of the organization

LEWIS COUNTY OPPORTUNITIES, INC. **Employer identification number** 16-6066837

	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin	e 6.		· 
		(a) Donor advised	I 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			
	are the organization's property, subject to the organization's	exclusive legal control?		Yes L
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor of	er donor advisor, or for an	y other purpose c	
D-	impermissible private benefit?			
Ра	rt II Conservation Easements. Complete if the org		" on Form 990, Pa	urt IV, line 7.
1	Purpose(s) of conservation easements held by the organizati	` <del></del>		
	Preservation of land for public use (for example, recrea	tion or education)		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 qualif	ied conservation contribu	ution in the form of	
	day of the tax year.			Held at the End of the Tax Ye
а	Total number of conservation easements			
b	Total acreage restricted by conservation easements			
С	Number of conservation easements on a certified historic str			2c
d	•			
	on a historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or t	erminated by the o	organization during the tax
	year			
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the per		ion, handling of	
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, an	d enforcing conse	rvation easements during the year
_	<del></del>			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and ent	orcing conservation	on easements during the year
_				4) (7) (7)
8	Does each conservation easement reported on line 2d above	•		
_	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservati		•	
	balance sheet, and include, if applicable, the text of the footr	note to the organization's	financial statemer	nts that describes the
Da	organization's accounting for conservation easements.  rt III   Organizations Maintaining Collections or	f Art Historical Tro	acurae or Oth	or Similar Assats
Га	Complete if the organization answered "Yes" on Form	•	asures, or Oti	iei Siiililai Assets.
				d balance also structure
ıa	If the organization elected, as permitted under FASB ASC 95	•		
	of art, historical treasures, or other similar assets held for put			•
	service, provide in Part XIII the text of the footnote to its finar			
b	If the organization elected, as permitted under FASB ASC 95	· · · · · · · · · · · · · · · · · · ·		
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furthe	rance 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 tre	,	`	gain, provide
	the following amounts required to be reported under FASB A	~		
a	Revenue included on Form 990, Part VIII, line 1			•
h	Assets included in Form 900 Part Y			<b>\$</b>

Par	t III Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, d	or Othe	r Similar A	ssets(conti	nued)
3	Using the organization's acquisition, accession	on, and other record	ls, checl	any of the	following tha	t make s	ignificant use o	of its	
	collection items (check all that apply).								
а	Public exhibition d Loan or exchange program								
b									
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	he organizati	on's exer	mpt purpose in	Part XIII.	
5	During the year, did the organization solicit or								
	to be sold to raise funds rather than to be ma				•			Yes	☐ No
Par	t IV Escrow and Custodial Arrang							IV, line 9, or	
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodi	an, or other interme	diary for	contributio	ns or other as	ssets not	included		
	on Form 990, Part X?							Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII								
	· · ·	•	_					Amoun	t
С	Beginning balance						1c		
	Additions during the year								
	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on Fo							Yes	□ No
	If "Yes," explain the arrangement in Part XIII.								
Par							0.		
		(a) Current year		rior year			(d) Three years b	ack (e) Fou	r years back
1a	Beginning of year balance			-					
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
e	Other expenditures for facilities								
·	and programs								
f	Administrative expenses								
g g	End of year balance								
2	Provide the estimated percentage of the curr	ent vear end haland	e (line 1	a column (:	a)) held as:	L			
a	Board designated or quasi-endowment		%	g, oolanin (c	ajj ficia as.				
h	Permanent endowment	%	_′°						
C									
·	The percentages on lines 2a, 2b, and 2c sho	-							
32	Are there endowment funds not in the posse	•	ation the	at are held a	and administs	ared for th	20		
Ja	organization by:	331011 Of the organiza	ation the	it are rielu a	ina administe	neu ioi ti	10		Yes No
	(i) Unrelated organizations?								100 110
h	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi							
4	Describe in Part XIII the intended uses of the							<u>30</u>	
	t VI Land, Buildings, and Equipm		willelit	iurius.					
ı uı	Complete if the organization answered		) Part I\	/ line 11a 9	See Form 990	) Part X	line 10		
		Î			i		cumulated	(d) Boo	le value
	Description of property	(a) Cost or o basis (investr		. ,	or other (other)	٠,	reciation	( <b>a)</b> 600	k value
	Land	,	110111)		0,550.	uep	A COIGIOIT	1	0,550.
	Land				7,121.	-	79,515.		7,606.
	Buildings			0 /	1,141.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 19	7,000.
	Leasehold improvements			3 2	8,559.	7	242,754.	Ω	5,805.
	Equipment			J 4	0,0000		174,174.	- 0	5,005.
	Other		Y line 1	Oc. column	(R))			20	3,961.
iotal	. AUU IIIIES TA LITOUUTI TE. (COIUITIII (U) TITUSLE(	yuarı urri əəu, Fdil	л, III IU I	oo, colullill	וושו			. 49	-, - U + •

Schedule D (Form 990) 2023

(H)

Part VII	Investments -	Other	<b>Securities</b>
----------	---------------	-------	-------------------

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 valu		
(1) Financial derivatives				

(2) Closely held equity interests (A) (B) (C)

(D) (E) (F) (G)

Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))

| Part VIII | Investments - Program Related.

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

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

### 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, line 15, col. (B))	

### Other Liabilities Part X

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

1.	1. (a) Description of liability		
(1)	Federal income taxes		
(2)	DEPOSITS HELD IN TRUST	34,313.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	34,313.	

<sup>2.</sup> 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.

ORGANIZATION SHOULD PREVAIL UPON EXAMINATION BY THE TAXING AUTHORITIES.

### 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

2023
Open to Public Inspection

Name of the organization

LEWIS COUNTY OPPORTUNITIES, INC.

Employer identification number 16-6066837

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

FAMILY SERVICES - PROVIDE OUTREACH REFERRALS, EDUCATIONAL SERVICES, AND ASSISTANCE IN RENT, UTILITIES, TRANSPORTATION AND FOOD SUPPLY.

EXPENSES \$ 306,773. INCLUDING GRANTS OF \$ 0. REVENUE \$ 170,703.

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

LINE 11A EXPLANATION - THE FINAL FORM 990 WAS PROVIDED TO THE FINANCE

COMMITTEE OF THE BOARD AND REVIEWED BY MANAGEMENT AND THE TREASURER WITH

THE COMMITTEE MEMBERS AT A MEETING. AFTER THE ABOVE REVIEW WAS

COMPLETED, AN ELECTRONIC COPY OF THE FINAL FORM 990 WAS SENT TO EACH BOARD

MEMBER FOR THEIR REVIEW. THE ABOVE REVIEW PROCESS WAS CONDUCTED PRIOR TO

THE FILING WITH THE IRS.

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

THE BOARD OF DIRECTORS ARE REQUIRED TO SIGN AN ANNUAL CONFLICT OF INTEREST STATEMENT. IF THERE IS A CONFLICT, THE BOARD MEMBER SHALL EXCUSE HIMSELF FROM ANY VOTE, ACTION OR RESOLUTION.

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

EXECUTIVE COMMITTEE OF THE GOVERNING BOARD CONDUCTS AN ANNUAL CEO

EVALUATION. THE CEO PROVIDES THE EXECUTIVE COMMITTEE WITH A PROGRESS

NARRATIVE FOR THE YEAR.EACH MEMBER OF THE EXECUTIVE COMMITTEE COMPLETES AN

INDEPENDENT EVALUATION. THE EVALUATIONS ARE COLLECTED AND SUMMARIZED. THE

EXECUTIVE COMMITTEE RECOMMENDS THE SALARY TO THE FULL BOARD FOR REVIEW,

DISCUSSION AND ACTION.

JOB PRICING ANALYSIS OF OTHER CAP AGENCIES VIA THE PUBLIC ACCESS TO 990

Schedule O (Form 990) 2023 Page 2 **Employer identification number** Name of the organization LEWIS COUNTY OPPORTUNITIES, INC. 16-6066837 FORMS ARE USED BY THE EXECUTIVE COMMITTEE FOR THE EVALUATION IN 2023. FORM 990, PART VI, SECTION C, LINE 19: OWN WEBSITE, GUIDESTAR WEBSITE AND AVAILABLE UPON REQUEST. FORM 990, PART XII, LINE 2C THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

### CHAR500 Online

For new annual filings, and amendments

### **Annual Filing for Charitable Organizations**

New York State Office of the Attorney General Charities Bureau - Registration Section 28 Liberty Street New York, NY 10005 charitiesnys.com Open to Public Inspection

Filing Year: 2023 New Filing OAmendment Filing Type: **General Information** N/A Current Organization Name: LEWIS COUNTY OPPORTUNITIES INC **Updated Name:** DUAL Registration Category: NY Registration Number: 01-13-49 166066837 Corporation EIN: Organization Type: 12/31 Updated Fiscal Year End: N/A **Current Fiscal Year End:** financedirector@lcopps.org Organization's Phone: 315-376-8202 Organization Email: 501(c)(3) Website: Tax Exempt Status: www.lewiscountyopportunities.com **Organization Address** Mailing Address NY State Address Principal Address 8265 STATE RTE 812 8265 STATE RTE 812 NA LOWVILLE LOWVILLE NY NY 13367-0000 13367-0000 UNITED STATES **UNITED STATES Primary Contact Information** \_\_\_\_\_Title: Chief Executive Officer First Name: Scott Last Name: Mathys Email: financedirector@lcopps.org Phone: 315-376-8202 **Organization Type** Organization Type: Public IRS990 Type of IRS document filed with IRS: **Third Party Preparer Information** First Name: N/A Last Name: N/A Title: N/A Firm Name: N/A Phone: N/A Email: N/A **Third Party Address** Street: N/A City: N/A State: N/A N/A Country: N/A Zip:

Re	egistration Category
1.	Does the organization conduct activity in New York State other than soliciting? This may include, but is <b>not limited</b>
	to, maintaining an office, having employees or staff, or running a program.  ● Yes ○ No
2.	Does the organization have assets in New York State?  • Yes O No
3.	Is the organization incorporated or formed in New York State?    O Yes  O No
4.	Has the organization received more than \$25,000 in total contributions from New York State residents,
	foundations, corporations or government agencies or other entities in the period covered by this filing?  • Yes ONo
5.	Does the organization plan to receive more than \$25,000 annually in total contributions from New York State residents
	foundations, corporations, government agencies or other entities?
6.	Does the organization use a professional fundraiser or fundraising counsel?  OYes   No
Ва	sed on your responses to the above questions, this organization's registration category remains as DUAL
Co	ontribution Information
1.	Did the organization solicit or receive contributions during the fiscal year in New York State?  • Yes • O No
3.	Choose the total contributions in New York State this fiscal year: \$1,000,000-\$4,999,999
Ar	nnual Exemptions
1.	Were the total contributions from New York State, including residents, foundations, government agencies, etc. unde \$25,000 during the fiscal year?  OYes ONO N/A
2.	Did the organization use a professional fundraiser or fundraising counsel during the fiscal year? $\bigcirc$ Yes $\bigcirc$ No $N/A$
3.	Were the organization's gross receipts under \$25,000 and the market value of its assets under \$25,000 during the fiscal year?  OYes   No
	sed on your responses to annual exemption questions, this organization is required to file under <u>DUAL</u> during this

Name of Firm: N/A

Contract Start: N/A

Amount Paid: N/A

Mailing Address: N/A

Type: N/A

Financial Information			
Type of IRS document filed with IRS	IRS990	Organization's total revenu	e: 3,136,604
Organization's total contributions:	1,631,660	Organization's total assets:	N/A
Organization's net assets:	1,417,732	Organization's total revenu	e N/A
Organization's total liabilities:	N/A	<ul><li>and contributions:</li><li>Organization's total assets/</li></ul>	/ N/A
Organization's total income:	N/A	worth:	IVA
For this filing year, does your organi	zation plan to comple	ete any of the following with the Ne	ew York State Charities Bureau
☐Closing ☐ Withdrawing  Is this your final filing with New Yor	J	☑ None  ONo N/A	
Filing Information			ativita in Nove Vorde State 2
Oyes   No	onai fundraiser or fun	idraising counsel for fundraising ac	tivity in New York State?
General Informa	tion	•	Description of Compensation
Name of Firm: N/A		_ N/A N	I/A
	Number: <u>N/A</u>	_	
Contract Start: N/A Contract Start: N/A	ract End: N/A	_	
Mailing Address: N/A	Phone : <u>N/A</u>		
Name of Firm: N/A		N/A N	I/A
Type: N/A Registr	ation ID: <u>N/A</u>		
Contract Start: N/A Contr	act End: <u>N/A</u>		
Amount Paid: N/A	Phone : N/A		
Mailing Address: N/A			

N/A

Registration ID: N/A

Contract End: N/A

Phone : N/A

N/A

Did the organization receive government grants during this fiscal year?

Yes O No

Government Grant Agency	Grant Amount
NYS DIVISION OF HOUSING AND COMMUNITY RENEWAL	\$466,251.00
NYS DEPT OF STATE	\$248,168.00
NYS OFFICE OF VICTIM SERVICES	\$77,952.00
NYS DEPT OF CHILDREN AND FAMILY SERVICES	\$121,226.00
	To be continued in Appendix page 2

					_
				_	4
•		m	-		

Attached	organization'	's required	documents:
$\neg$ ttatiicu	OI garnization	3 1 Cquii Cu	aucuments.

- ☑ IRS document
- ☑ Certified Public Accountant's Audit Report
- ☐ Certified Public Accountant's Review Report

lyle J. Moser

- ☐ Complete Certificate of Amendment or other document amending the name
- □ Other documents

## **Signatures**

Treasurer

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

Role	First Name	Last Name	Email	
Chair	Joseph	Hall	joehall@northnet.org	
Treasurer	Jake	Moser	jakemoser@lewiscountyny.gov	
Signature of Chair	Docusigned by:  Joseph Hall  SONTTONEEDDAFS		Date: 5/22/2024	
Signature of	DocuSigned by:		Date:	

5/22/2024

## Filing Information

General Information	Description of Services	Description of Compensation
Name of Firm: N/A	N/A	N/A
Type: N/A Registration ID: N/A		
Contract Start: N/A Contract End: N/A		
Amount Paid: N/A Phone : N/A		
Mailing Address: N/A		
Name of Firm: N/A	N/A	N/A
Type: N/A Registration ID: N/A		
Contract Start: N/A Contract End: N/A		
Amount Paid: N/A Phone : N/A		
Mailing Address: N/A		
Name of Firm: N/A	N/A	N/A
Type: N/A Registration ID: N/A		
Contract Start: N/A Contract End: N/A		
Amount Paid: N/A Phone : N/A		
Mailing Address: N/A		
Name of Firm: N/A	N/A	N/A
Type: N/A Registration ID: N/A		
Contract Start: N/A Contract End: N/A		
Amount Paid: N/A Phone : N/A		
Mailing Address: N/A		

Government Grant Agency	Grant Amount
JEFFERSON COUNTY DEPT SOCIAL SERVICES	\$344,128.00
NYS DIV. OF CRIMINAL JUSTICE	\$145,255.00
NYS TRAFFIC SAFETY	\$5,023.00
COUNTY OF LEWIS	\$149,137.00
EMERGENCY FOOD & SHELTER BOARD PROGRAM	\$15,997.00
NYS DEPARTMENT OF HEALTH	\$16,019.00
N/A	N/A

# Return of Organization Exempt From Income Tax

Form **990** 

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

Α	For the 2023 calendar year, or tax year beginning and ending						
B Check if applicable:		C Name of organization		D Employer identification number			
	Addre chang Name	e   LEWIS COUNTY OPPORTUNITIES, INC.					
	chang	Doing business as	16-60668	337			
	Initial returr Final returr	Number and street (or P.O. box if mail is not delivered to street address)  Room/s	uite E Telephone numbe				
	termin eted		G Gross receipts \$	3,189,307.			
	Amen	LOWVILLE, NY 13367	H(a) Is this a group r	eturn			
_	Applie ton pendi	ng l	for subordinate	s? Yes X No			
		SAME AS C ABOVE	H(b) Are all subordinates	included? Yes No			
1	Tax-ex	empt status: X 501(c)(3) 501(c)( ) (insert no.) 4947(a)(1) or	527 If "No," attach a	list. See instructions			
J Website: WWW.LEWISCOUNTYOPPORTUNITIES.COM H(c) Group exemption number							
K Form of organization: X Corporation Trust Association Other L Year of formation: 1965 M State of legal domici							
P	art I	Summary		or rogal dollinolo, - r -			
ø	1	riefly describe the organization's mission or most significant activities: WORKING WITH PEOPLE IN NEED					
anc		O PROMOTE A HIGHER QUALITY OF LIFE IN OUR COMMUNITY.					
r a	2	Check this box if the organization discontinued its operations or disposed of n					
ove	3	Number of voting members of the sevenies bed (D-1)(III)	3	12			
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	12			
80	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	41			
iţie	6	Total number of volunteers (estimate if necessary)	6	79			
Activities & Governance	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		0.			
V	h	Net unrelated business taxable income from Form 990-T, Part I, line 11					
_	~	The trifficated business taxable income norm offit 950-1, Part I, life 11	7b	Current Year			
1921	8	Contributions and grants (Port VIII line 1h)	1,995,802.				
ηne	200	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)					
Revenue			1,047,065.	1,462,948.			
Re	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13,111.	34,676.			
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	7,200.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,063,178.	3,136,604.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.			
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,439,732.	1,561,885.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.			
ďx		Total fundraising expenses (Part IX, column (D), line 25)					
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,635,691.	1,568,918.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,075,423.	3,130,803.			
02:	19	Revenue less expenses. Subtract line 18 from line 12	-12,245.	5,801.			
or			Beginning of Current Year	End of Year			
Net Assets Fund Baland	20	Total assets (Part X, line 16)	1,738,555.	1,750,773.			
t As	21	Total liabilities (Part X, line 26)	341,178.	333,341.			
FILE	22	Net assets or fund balances. Subtract line 21 from line 20	1,397,377.	1,417,432.			
Pa	art II	Signature Block					
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of m	v knowledge and belief, it is			
true	, ccrrec	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	y me mongo ana bonon, ic io			
		Assepte W. How.		4505 42			
Sig	n	Signature of officer	Date	4 2004			
Her		OSEPH HALL, CHAIRPERSON					
1101	C	Type or print name and title					
-		Print/Type preparer's name	Date Check	II PTIN			
Annual Control of the		Print/Type preparer's name ELIZABETH BUSH	5/13/24 If	D0106460F			
1990		Firm's name BOWERS & COMPANY CPAS PLLC	Self-elliploy				
Preparer Use Only		Firm's address 1120 COMMERCE PARK DRIVE EAST	Firm's EIN 2	0-1317788			
096	Jilly			F 700 7600			
WATERTOWN, NY 13601 Phone no.315-788-7690							
May the IRS discuss this return with the preparer shown above? See instructions  X Yes No							

Form	990 (2023) LEWIS COUNTY OPPORTUNITIES, IN	NC. 1	6-6066837 Page <b>2</b>
Pai	t III   Statement of Program Service Accomplishments		<u> </u>
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
-	WORKING WITH PEOPLE IN NEED TO PROMOTE A H	IGHER OUALITY O	F LIFE IN OUR
	COMMUNITY.	~	
	<del></del>		
2	Did the organization undertake any significant program services during the year which	h wore not listed on the	
2			Yes X No
	prior Form 990 or 990-EZ?		L Yes A NO
_	If "Yes," describe these new services on Schedule O.		Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducting	ts, any program services?	Yes 🔼 No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three lar		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of gra	ints and allocations to others,	the total expenses, and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 394,793. including grants of \$	) (Revenue \$	
	DOMESTIC VIOLENCE AND RAPE CRISIS SERVICES		
	HOTLINE, CRIME VICTIMS ASSISTANCE, SAFE DWI		
	THERAPY, INFORMATION AND REFERRALS, TRANSPO	ORTATION, AND C	OMMUNITY
	EDUCATION AND OUTREACH.		
	1 540 000		1 220 210
4b	(Code: ) (Expenses \$ 1,548,029 · including grants of \$	(Revenue \$	
	HOUSING ASSSITANCE PROGRAM - PROVIDE RENT S		THER HOUSING
	ASSISTANCE TO QUALIFYING INDIVIDUALS AND FA	AMILIES.	
4c	(Code: ) (Expenses \$ 452,635 • including grants of \$	) (Revenue \$	25,614.)
	ENERGY CONSERVATION - EDUCATE CONSUMERS ON		
	CONSERVATION AND ASSIST IN PROVIDING NECESS	SARY REPAIRS OR	IMPROVEMENTS
	AS DETERMINED BY AN ENERGY AUDIT.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ 306,773 • including grants of \$	) (Revenue \$ 17	0,703.)
4e	Total program service expenses 2,702,230.		

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	-		
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	•		
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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?  If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		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? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

Part IV | Checklist of Required Schedules (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х Schedule K. If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete X 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II X 26 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Х entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Х "Yes," complete Schedule L, Part IV 28a X **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If Х "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Х 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? X If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 144 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable **b** Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners?

Form 990 (2023) Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

		_		Yes	No			
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	4.1						
	filed for the calendar year ending with or within the year covered by this return	41		77				
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Х	37			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a				v			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X			
b	If "Yes," enter the name of the foreign country							
E	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		E-		Х			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a 5b		X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	1	5c		21			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization so		30					
oa	any contributions that were not tax deductible as charitable contributions?		6a		Х			
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		ou					
	were not tax deductible?		6b					
7	Organizations that may receive deductible contributions under section 170(c).		0.0					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the	e payor?	7a		Х			
			7b					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?		7c		Х			
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e					
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?		8					
9	Sponsoring organizations maintaining donor advised funds.							
a Did the sponsoring organization make any taxable distributions under section 4966?								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b					
10	Section 501(c)(7) organizations. Enter:							
a	Initiation fees and capital contributions included on Part VIII, line 12							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter:							
a	Gross income from members or shareholders 11a							
D	Gross income from other sources. (Do not net amounts due or paid to other sources against							
120	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		120					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		12a					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?		13a					
-	Note: See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans							
С	Enter the amount of reserves on hand							
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
	excess parachute payment(s) during the year?		15		Х			
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		X			
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17					
	If "Yes," complete Form 6069.							

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ane 6

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

Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 12 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 12 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8a a The governing body? **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο X 10a Did the organization have local chapters, branches, or affiliates? 10a b 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? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, 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 Х 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х on Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 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? Х a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY 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 Upon request X Own website X Another's website 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. State the name, address, and telephone number of the person who possesses the organization's books and records DEANNA FINSTER - 315-376-8202

13367

8265 STATE ROUTE 812, LOWVILLE, NY

Form 990 (2023)

#### LEWIS COUNTY OPPORTUNITIES, INC.

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

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

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

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 n		orga	aniza			npei	nsat			
(A)	(B)	(C) Position					(D)	(E)	(F)	
Name and title	Average		not c	heck	more	than		Reportable	Reportable	Estimated
	hours per week					is bot or/trus		compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	rdire				ted		organization	(W-2/1099-MISC/	from the
	related	stee o	rustee			ensat		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al tru	onal tı		oloyee	comb		1099-NEC)		and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) SCOTT MATHYS	40.00	드	드	0	호	工员	꾼			
CHIEF EXECUTIVE OFFICER		1		х				75,673.	0.	10,052.
(2) DEANNA FINSTER	40.00							,		-
FINANCE DIRECTOR				Х				52,548.	0.	8,895.
(3) DAINA DICOB	1.00									
DIRECTOR		Х						0.	0.	0.
(4) LOREN LYNDAKER	1.00	]								
DIRECTOR	1 00	Х						0.	0.	0.
(5) JUDITH KARELUS	1.00	١								•
DIRECTOR	1 00	Х						0.	0.	0.
(6) MARILYN PATTERSON	1.00	٠,,							0	0
DIRECTOR	1.00	Х						0.	0.	0.
(7) SHERI SCHULZ	1.00	х		х				0.	0.	0.
VICE CHAIRPERSON (8) JANNET SEELMAN	1.00	Λ		Λ				0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(9) PAMELA STANLEY	1.00							0.	0.	0.
SECRETARY	1100	x		х				0.	0.	0.
(10) JEANNE WOODING	1.00							•		•
DIRECTOR		Х						0.	0.	0.
(11) JOSEPH HALL	1.00									
CHAIRSPERSON		Х		Х				0.	0.	0.
(12) GENEVIEVE FIDLER	1.00									
DIRECTOR		Х						0.	0.	0.
(13) JAKE MOSER	1.00									
TREASURER		Х		Х				0.	0.	0.
(14) JENNIFER JONES	1.00	۱								•
DIRECTOR		Х						0.	0.	0.
		ł								
	-	<del>                                     </del>	-			$\vdash$	<u> </u>			
		1								
-			$\vdash$							
		1								
1								i .		

332007 12-21-23 Form **990** (2023)

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

Form **990** (2023)

\$100,000 of compensation from the organization

Form 990 (2023) LEWIS COPART VIII Statement of Revenue

LEWIS COUNTY OPPORTUNITIES, INC.

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		Check if Schedule O contains a response	or note to any lir	ne in this Part VIII			
		Officer if deficable of contains a response	or note to arry in	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt		Revenuè excluded
					function revenue	business revenue	from tax under sections 512 - 514
10 10							Sections 512 - 514
ints		Federated campaigns 1a					
Gra		Membership dues 1b					
ts, An	C	Fundraising events					
Contributions, Gifts, Grants and Other Similar Amounts	c	Related organizations 1d					
ini	6	Government grants (contributions) 1e 1,	589,156.				
tior r S	f	All other contributions, gifts, grants, and					
the		similar amounts not included above   1f	42,504.				
n d		Noncash contributions included in lines 1a-1f	15,590.				
Col		Total. Add lines 1a-1f		1,631,660.			
_		Totally local lines for the first section of the fi	Business Code	, ,			
ø.	2 a	FEES & CONTRACTS GOVT		1,462,948.	1 462 948.		
ķ			021200	1,102,3100	<u> </u>		
Ser	k						
wer ver	C						
gra Re	(	·					
Program Service Revenue	•	•					
-	f	All other program service revenue		1 460 040			
		Total. Add lines 2a-2f		1,462,948.			
	3	Investment income (including dividends, intere	est, and	00 000			00 000
		other similar amounts)		22,009.			22,009.
	4	Income from investment of tax-exempt bond p					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a 7,200.					
	k	Less: rental expenses 6b 0 •					
	c	Rental income or (loss) 6c 7,200.					
	(	Net rental income or (loss)		7,200.			7,200.
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 65,370.					
	k	Less: cost or other basis					
ne		and sales expenses 7b 52,703.					
/en		Gain or (loss) 7c 12,667.					
Re		Net gain or (loss)		12,667.			12,667.
ther Revenue		Gross income from fundraising events (not		,			
₹	-	including \$ of					
_		contributions reported on line 1c). See					
		Part IV, line 188a					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
		Gross income from gaming activities. See					
	5.6	Part IV, line 19 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
	10 6	and allowances10a					
	L						
_		Net income or (loss) from sales of inventory	Business Code				
Sno	44 -	MISCELLANEOUS	900099	120.	120.		
nec			700077	120.	120.		
el e	k						
Miscellaneous Revenue							
Σ		All other revenue		120.			
		Total. Add lines 11a-11d		3,136,604.	1 463 068	0.	41,876.
	12	I UTAT I CACHING. OCC HISH MCHOHS		J, 130,004.	<del></del>	1 0.	±1,0/0•

16-6066837 Page **10** 

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).

Secu	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									
Da		(A)	this Part IX	(C)	(D)					
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments. See Part IV, line 21									
2	Grants and other assistance to domestic									
	individuals. See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,	100 001		100 001						
	trustees, and key employees	128,221.		128,221.						
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	1,180,671.	1,016,416.	164,255.						
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)	64,904.	55,168.	9,736.						
9	Other employee benefits	104,671.	85,192.	19,479.						
10	Payroll taxes	83,418.	70,791.	12,627.						
11	Fees for services (nonemployees):									
а	Management									
b	Legal									
С	Accounting	17,300.		17,300.						
d	Lobbying									
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25,									
	column (A), amount, list line 11g expenses on Sch 0.)	52,181.	39,557.	12,624.						
12	Advertising and promotion	11,202.	10,566.	636.						
13	Office expenses	31,237.	29,751.	1,486.						
14	Information technology									
15	Royalties	0.5.4	0.54 0.06							
16	Occupancy	974,396.	974,396.							
17	Travel	9,344.	9,344.							
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials			254						
19	Conferences, conventions, and meetings	7,505.	7,254.	251.						
20	Interest									
21	Payments to affiliates	17 101	40 400	C 77.CF						
22	Depreciation, depletion, and amortization	47,191.	40,426.	6,765.	_					
23	Insurance	24,414.	16,611.	7,803.						
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 0.)	4=4=								
а	PROGRAM SUPPLIES AND EX	172,794.	169,363.	3,431.						
b	OCCUPANCY POOLED COSTS	67,617.	59,206.	8,411.						
С	CONTRACTED SERVICES	41,156.	38,802.	2,354.						
d	REPAIRS & MAINTENANCE	25,392.	20,699.	4,693.						
е	All other expenses	87,189.	58,688.	28,501.						
25	Total functional expenses. Add lines 1 through 24e	3,130,803.	2,702,230.	428,573.	0.					
26	<b>Joint costs</b> . Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									
	Check here if following SOP 98-2 (ASC 958-720)				Earm <b>990</b> (2023)					
00001	0 10 01 02									

Form 990 (2023)

Part X Balance Sheet LEWIS COUNTY OPPORTUNITIES, INC. 16-6066837 Page **11** 

Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			114,050.	1	79,900.
	2	Savings and temporary cash investments			778,686.	2	816,024.
	3	Pledges and grants receivable, net			235,878.	3	192,310.
	4	Accounts receivable, net	61,951.	4	100,342.		
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	tantial c	contributor, or 35%			
		controlled entity or family member of any of the	se perso	ons		5	
	6	Loans and other receivables from other disquali					
		under section 4958(f)(1)), and persons describe		6			
ţ	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges			821.	9	2,945.
	10a	Land, buildings, and equipment: cost or other					
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  Less: accumulated depreciation	10a	1,216,230.			
	b	Less: accumulated depreciation	10b	922,269.	307,699.	10c	293,961.
	11	Investments - publicly traded securities	200,138.	11	228,907.		
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			39,332.	15	36,384.
	16	Total assets. Add lines 1 through 15 (must equ			1,738,555.	16	1,750,773.
	17	Accounts payable and accrued expenses			194,610.	17	208,223.
	18	Grants payable		100	18		
	19	Deferred revenue	109,928.	19	90,805.		
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete			21		
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subs					
iak-		controlled entity or family member of any of the				22	
-	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa	•				
		parties, and other liabilities not included on lines	3 17-24)	. Complete Part X	26 640		2/ 212
		of Schedule D			36,640. 341,178.		34,313. 333,341.
	26	Total liabilities. Add lines 17 through 25	·····	e X	341,170.	26	333,341.
es		Organizations that follow FASB ASC 958, che	ck ner	e 🕰			
anc		and complete lines 27, 28, 32, and 33.			1,397,377.	07	1,417,432.
3ala	27	Net assets with depart restrictions			1,331,311.	27 28	1,411,402.
β	28	Net assets with donor restrictions				20	
Fui		Organizations that do not follow FASB ASC 9 and complete lines 29 through 33.	36, CHE	ck fiere			
ō	20					29	
ets	29	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or ed				30	
Ass	30 31					31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			1,397,377.	32	1,417,432.
Z		Total liabilities and not assets/fund balances		1,738,555.	33	1,750,773.	
	33	Total liabilities and net assets/fund balances			±,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	აა	T, 750, 775.

Form **990** (2023)

	1 990 (2023) LEWIS COUNTY OPPORTUNITIES, INC.	16-606	6837	Pag	ge <b>12</b>
Paı	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,13	5,6	04.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,130	),8	03.
3	Revenue less expenses. Subtract line 2 from line 1	3			01.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,39		
5	Net unrealized gains (losses) on investments	5	1	<u>4,2</u>	54.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,41	7,4	<u>32.</u>
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				LX.
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		_X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	

Form **990** (2023)

332012 12-21-23

# **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

lame	of t	he organization							identification number		
				PPORTUNITIES					6-6066837		
Part	: [	Reason for Public	Charity Status.	(All organizations must c	omplete tl	his part.) S	ee instruction	ıs.			
1 [	gan	ization is not a private found A church, convention of ch	urches, or association	on of churches described	d in <b>sectio</b>	•	I)(A)(i).				
2 L 3 [ 4 [		A school described in <b>sect</b> A hospital or a cooperative A medical research organiz	hospital service org	anization described in <b>s</b> e	ection 170			)(iii). Enter	the hospital's name,		
<b>5</b> [		city, and state:  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
_		section 170(b)(1)(A)(iv). (Complete Part II.)									
6 L 7 L	X	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b> An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in									
_	_	section 170(b)(1)(A)(vi). (C									
8	_	A community trust describe			•						
9 ∟		An agricultural research orgor university or a non-land-	-			-		-	-		
40 F	$\neg$	university:	II	H 00 4 /00/ -f H				latin da ana	- d		
10 ∟		An organization that norma	•						*		
		activities related to its exen		•	٠,				•		
		income and unrelated business social F00(a)(2)		e (less section on rax) in	JIII DUSINE	sses acqu	illed by the o	ryanization	arter June 30, 1975.		
11 [	$\neg$	See <b>section 509(a)(2).</b> (Con An organization organized a	-	sively to test for public sa	foty Soo	saction 50	10(2)(4)				
12		An organization organized a	•	•	•			arny out the	nurnoses of one or		
12		more publicly supported or	·	•	•			-			
		lines 12a through 12d that	•						THEOR THE BOX OFF		
а		Type I. A supporting orga				-		-	, aivina		
u		the supported organization	•	•		•		• • •			
		organization. <b>You must o</b>			Thajonty	or tric dire	otors or trust	JOS OF THE S	apporting		
b	Г	Type II. A supporting org	-		tion with it	ts sunnort	ed organizatio	nn(s) hy ha	vina		
-		control or management of	· ·				_	• • • •	-		
		organization(s). You mus			arrio poroc	3110 11141 01	or ar	ago tiro oup	portod		
С		Type III functionally inte	-		in connec	tion with.	and functions	Illy integrate	ed with		
-		its supported organizatio	•			•		,	<b>54</b> ,		
d		Type III non-functionally		•	•	•	•	rted organi	zation(s)		
		that is not functionally int						_			
		requirement (see instruct		• ,	•		•				
е		Check this box if the orga	,	•	•			II, Type III			
		functionally integrated, or									
f	Ente	r the number of supported	organizations								
g	Prov	ride the following information	about the supporte	ed organization(s).					•		
	(i	) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the orga in your governi <b>Yes</b>	nization listed ing document?	(v) Amount of support (see in	•	(vi) Amount of other support (see instructions)		

332021 12-21-23

Schedule A (Form 990) 2023 LEWIS COUNTY OPPORTUNITIES, INC. 16-6066837 Page 2

# 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1710177.	1745410.	1829309.	1995802.	1631660.	8912358.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1710177.	1745410.	1829309.	1995802.	1631660.	8912358.
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)						
6	Public support. Subtract line 5 from line 4.						8912358.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	1710177.	1745410.	1829309.	1995802.	1631660.	8912358.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	30,166.	13,323.	24,118.	20,311.	29,209.	117,127.
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	<b>Total support.</b> Add lines 7 through 10						9029485.
	Gross receipts from related activities,						,981,766.
13	First 5 years. If the Form 990 is for the	-					
	organization, check this box and stor						
	tion C. Computation of Publ						00 70
	Public support percentage for 2023 (					14	98.70 %
	Public support percentage from 2022					15	98.80 %
16a	33 1/3% support test - 2023. If the c						
	stop here. The organization qualifies						
D	33 1/3% support test - 2022. If the constitution was						
170	and <b>stop here.</b> The organization qual						
1/a	10% -facts-and-circumstances tes	-					
	and if the organization meets the fact		•	-		•	
L	meets the facts-and-circumstances to	•			•	70 and line 15 is	
a	10% -facts-and-circumstances tes						1070 UI
	more, and if the organization meets the				-		
10	organization meets the facts-and-circ						
ΙÓ	Private foundation. If the organization	л ан посспеск а	box on line 13, 16a	a, 100, 17a, or 17b	, check this box a	nu see instruction	<u> </u>

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 LEWIS COUNTY OPPORTUNITIES, INC.

16-6066837 Page 3

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.)

Se	qualify under the tests listed b	elow, please com	plete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(a) 2019	(b) 2020	(6) 2021	(u) 2022	(e) 2023	(I) TOTAL
'	membership fees received. (Do not						
	include any "unusual grants.")						
^							
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
	endar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(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						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for th	e organization's f	irst second third	fourth, or fifth tax	vear as a section	501(c)(3) organizat	ion.
•	check this box and stop here	· ·		•	•		· —
Se	ction C. Computation of Publ	ic Support Pe	ercentage				
	Public support percentage for 2023 (I			column (f))		15	%
	Public support percentage from 2022					16	<del>/</del> 6
	ction D. Computation of Inves					1 .0 1	70
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2023. If the					-	
	more than 33 1/3%, check this box a	-					
ŀ	33 1/3% support tests - 2022. If the						and
•	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

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# Schedule A (Form 990) 2023 Part IV | Supporting Organia

Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	За		
	3b		
	3c		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	90		
	10a		
	10h		
dule	10b A (Forr	n 990)	2023

16-6066837 Page 5 LEWIS COUNTY OPPORTUNITIES, INC. Schedule A (Form 990) 2023 Part IV | Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI 110 Section B. Type I Supporting Organizations Yes No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeafsee instructions). а ☐ The organization satisfied the Activities Test. Complete line 2 below. b The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b 3 Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI. За b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

LEWIS COUNTY OPPORTUNITIES, INC. 16-6066837 Page 6 Schedule A (Form 990) 2023 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 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. (B) Current Year (A) Prior Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions Other gross income (see instructions) 3 Add lines 1 through 3. 4 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) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year **Section B - Minimum Asset Amount** (A) Prior Year (optional) 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): Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 see instructions). 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035. 6 Recoveries of prior-year distributions 7 7 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year

emergency temporary reduction (see instructions).

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

1 2

3 4

5

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

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

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

Schedule A (Form 990) 2023

1

3

5

Enter 0.85 of line 1.

Enter greater of line 2 or line 3.

Income tax imposed in prior year

Schedule A (Form 990) 2023 LEWIS COUNTY OPPORTUNITIES, INC. 16-6066837 Page 7

Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)										
Sect	ion D - Distributions		•		Current Year						
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1							
2	Amounts paid to perform activity that directly furthers exempt	pt purposes of supported									
	organizations, in excess of income from activity			2							
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	IS	3							
4	Amounts paid to acquire exempt-use assets			4							
5	Qualified set-aside amounts (prior IRS approval required - pro		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 t	he organization is responsive	e								
	(provide details in Part VI). See instructions.			8							
9	Distributable amount for 2023 from Section C, line 6			9							
10	Line 8 amount divided by line 9 amount			10							
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	าร	(iii) Distributable Amount for 2023						
1	Distributable amount for 2023 from Section C, line 6										
2	Underdistributions, if any, for years prior to 2023 (reason-										
	able cause required - explain in Part VI). See instructions.										
3	Excess distributions carryover, if any, to 2023										
a	From 2018										
b	From 2019										
С	From 2020										
d	From 2021										
е	From 2022										
f	Total of lines 3a through 3e										
g	Applied to underdistributions of prior years										
h	Applied to 2023 distributable amount										
<u>i</u> _	Carryover from 2018 not applied (see instructions)										
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.										
4	Distributions for 2023 from Section D,										
	line 7: \$										
a	Applied to underdistributions of prior years										
b	Applied to 2023 distributable amount										
c	Remainder. Subtract lines 4a and 4b from line 4.										
5	Remaining underdistributions for years prior to 2023, if										
	any. Subtract lines 3g and 4a from line 2. For result greater										
	than zero, explain in Part VI. See instructions.										
6	Remaining underdistributions for 2023. Subtract lines 3h										
	and 4b from line 1. For result greater than zero, explain in										
	Part VI. See instructions.										
7	Excess distributions carryover to 2024. Add lines 3j										
	and 4c.										
8	Breakdown of line 7:										
а	Excess from 2019										

Schedule A (Form 990) 2023

b Excess from 2020c Excess from 2021d Excess from 2022e Excess from 2023

Schedule A	(Form 990) 2023	LEWIS	COUNTY	OPPORTU	JNITIES,	INC.	16-6066837 <sub>Pa</sub>	ge <b>8</b>
Part VI	Supplemental Info Part IV, Section A, lines line 1; Part IV, Section D	ormation. Pro 1, 2, 3b, 3c, 4b ), lines 2 and 3;	ovide the exp , 4c, 5a, 6, 9a Part IV, Sect	lanations requi a, 9b, 9c, 11a, ion E, lines 1c,	ired by Part II, I 11b, and 11c; I 2a, 2b, 3a, and	ine 10; Part II, lir Part IV, Section d 3b; Part V, line	ne 17a or 17b; Part III, line 12; B, lines 1 and 2; Part IV, Section C, 1; Part V, Section B, line 1e; Part V y additional information.	
	(See Instructions.)							

# **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.

Inspection

Name of the organization LEWIS COUNTY OPPORTUNITIES, INC. Employer identification number 16-6066837

Pa			s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(b) Funds and other accounts
_	Total growth or at and aforem	(a) Donor advised funds	(b) Fullus 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	_	
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
Da			
Pa		·	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (for example, recrea	· —	f a historically important land area
	Protection of natural habitat	□□ Preservation o	f a certified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality of the toxy year	fied conservation contribution in the forn	n of a conservation easement on the last  Held at the End of the Tax Year
	day of the tax year.		
а	Total number of conservation easements		
b			
С	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included on line 2c acqu		
_	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	ne organization during the tax
_	year		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements i		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing coi	nservation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year
_			(I) \( A \( C \) \( C \)
8	Does each conservation easement reported on line 2d above		
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati	•	
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial stater	nents that describes the
Dai	organization's accounting for conservation easements.  † III Organizations Maintaining Collections o	f Art Historical Treasures or (	Other Similar Assets
ı u	Complete if the organization answered "Yes" on Form		other ommar Assets.
12	If the organization elected, as permitted under FASB ASC 95		and halance sheet works
Ia	of art, historical treasures, or other similar assets held for put		
	service, provide in Part XIII the text of the footnote to its final	· ·	•
h	If the organization elected, as permitted under FASB ASC 95		
b	· .	•	
	art, historical treasures, or other similar assets held for public	- Exhibition, Education, of Tesearch III lur	unerance of public service,
	provide the following amounts relating to these items.		<b>\$</b>
	(i) Revenue included on Form 990, Part VIII, line 1		<b>^</b>
0		anguras, or other similar assets for financia	
2	If the organization received or held works of art, historical tre		ai gairi, provide
_	the following amounts required to be reported under FASB A	_	<b>\$</b>
a	Revenue included on Form 990, Part VIII, line 1		\$ •

		OUNTY OPPO							37 Page <b>2</b>
Par	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures, c	or Other	Similar <i>I</i>	<b>Assets</b> (cc	ntinued)
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following tha	t make sig	nificant use	of its	
	collection items (check all that apply).								
а	Public exhibition	c	ı 🖳	Loan or exc	hange progra	ım			
b	Scholarly research	e	, 🗀	Other					
С	Preservation for future generations								
4	Provide a description of the organization's c	ollections and explai	in how th	ney further t	he organization	on's exem	pt purpose i	n Part XIII.	
5	During the year, did the organization solicit of								
	to be sold to raise funds rather than to be m							Ye:	
Par	t IV Escrow and Custodial Arran		te if the	organization	n answered "	Yes" on Fo	orm 990, Pai	rt IV, line 9,	or
	reported an amount on Form 990, Pa								
1a	Is the organization an agent, trustee, custod								
	on Form 990, Part X?							L Ye	s L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:					
								Amo	ount
	Beginning balance								
	Additions during the year								_
_	Distributions during the year								
f	Ending balance								
	Did the organization include an amount on F					•	y?	L Ye	s   No
Par	If "Yes," explain the arrangement in Part XIII <b>t V</b> Endowment Funds Complete if								
ı uı	Endowment Funds Complete II	(a) Current year		Prior year	(c) Two year			hack (a)	our years back
10	Paginning of year balance	(a) Guirent year	(5)	Tior year	(C) The your	o buon   (u	1 <b>)</b> 111100 youro	(C)	- July your o buok
	Beginning of year balance								
0	Contributions								
q	Grants or scholarships								
	Other expenditures for facilities								
·	and programs								
f	Administrative expenses								
	End of year balance								
2	Provide the estimated percentage of the cur		ce (line 1	a. column (a	a)) held as:	<u> </u>		<b>I</b>	
а	Board designated or quasi-endowment	•	%	9,	-,,				
b	Permanent endowment	%	<u> </u>						
С		<del></del> *							
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.							
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	and administe	red 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 organization								b
4	Describe in Part XIII the intended uses of the	e organization's endo	owment	funds.					
Par	t VI Land, Buildings, and Equipn	nent							
	Complete if the organization answere	d "Yes" on Form 99	0, Part I\	V, line 11a. S	See Form 990	, Part X, liı	ne 10.		
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Acc	umulated	(d) E	Book value
		basis (investr	ment)		(other)	depre	eciation		
	Land				0,550.				10,550.
	Buildings			87	7,121.	6	79,515	• 1	97,606.
	Leasehold improvements						10 ==:		<u> </u>
d	Equipment			32	8,559.	24	42,754	•	85,805.
	Other								
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, line 1	Oc, column	(B))			2	293,961.

Schedule D (Form 990) 2023

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DEPOSITS HELD IN TRUST	34,313.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	34,313.

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..

Sche	dule D (Form 990) 2023 LEWIS COUNTY OPPORTUNITIES,	INC.		16-6	6066837 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With	Revenue per F	Return	l
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1				1	3,260,111.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		14 054		
а	Net unrealized gains (losses) on investments	2a	14,254. 109,253.		
b	Donated services and use of facilities	2b	109,253.	_	
С	Recoveries of prior year grants	2c		_	
d	Other (Describe in Part XIII.)	2d			100 505
е	Add lines 2a through 2d			2e	123,507.
3	Subtract line <b>2e</b> from line <b>1</b>			3	3,136,604.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
	Other (Describe in Part XIII.)	4b		1	0.
	Add lines 4a and 4b  Table reverse Add lines 2 and 4a (This must equal Form 900, Part Line 12)			4c	3,136,604.
5 Pai	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  T XII   Reconciliation of Expenses per Audited Financial Statemen			5 Retu	
I u	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ii Expended per	Hota	•••
1	Total expenses and losses per audited financial statements			1	3,240,056.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	
	Donated services and use of facilities	2a	109,253.		
	Prior year adjustments	2b	•	-	
С	Other losses	2c			
d	Other (Describe in Part XIII.)	-			
	Add lines 2a through 2d			2e	109,253.
3	Subtract line 2e from line 1			3	3,130,803.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	3,130,803.
	t XIII Supplemental Information				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	•		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 addit	ional infor	mation.		
ם א ז	RT X, LINE 2:				
1 71	(I A, DINE Z.				
тні	ORGANIZATION HAS ADOPTED THE PROVISIONS C	F FAS	B CODIFICA	OITA	N. INCOME
					.,
TAZ	KES. IN DETERMINING THE RECOGNITION OF UNCE	RTAIN	TAX POSIT	ION	S,THE
OR	SANIZATION APPLIES A MORE-LIKELY-THAN-NOT R	ECOGN	IITION THRE	SHO	LD. THE
ORG	SANIZATION ANALYZED ITS TAX POSITIONS TAKEN	I NO I	HEIR FEDER	RAL Z	AND STATE
TA	K RETURNS FOR THE OPEN YEARS 2020, 2021, AN	ID 202	2. THE ORG	ANI	ZATION
DE'	PERMINED THAT THERE WERE NO UNCERTAIN TAX F	OSITI	ONS AND TH	IAT !	<u> </u>
<u> </u>	NAMED AND AND AND AND AND AND AND AND AND AN	D			D T T T T G
ORG	SANIZATION SHOULD PREVAIL UPON EXAMINATION	BY TH	E TAXING A	OTH	DRITIES.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ Go to www.irs.gov/Form990 for the latest information.

Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

LEWIS COUNTY OPPORTUNITIES, INC. **Employer identification number** 16-6066837

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

FAMILY SERVICES - PROVIDE OUTREACH REFERRALS, EDUCATIONAL SERVICES, AND

ASSISTANCE IN RENT, UTILITIES, TRANSPORTATION AND FOOD SUPPLY.

EXPENSES \$ 306,773. INCLUDING GRANTS OF \$ 0. REVENUE \$ 170,703.

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

LINE 11A EXPLANATION - THE FINAL FORM 990 WAS PROVIDED TO THE FINANCE COMMITTEE OF THE BOARD AND REVIEWED BY MANAGEMENT AND THE TREASURER WITH THE COMMITTEE MEMBERS AT A MEETING. AFTER THE ABOVE REVIEW WAS COMPLETED, AN ELECTRONIC COPY OF THE FINAL FORM 990 WAS SENT TO EACH BOARD MEMBER FOR THEIR REVIEW. THE ABOVE REVIEW PROCESS WAS CONDUCTED PRIOR TO THE FILING WITH THE IRS.

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

THE BOARD OF DIRECTORS ARE REQUIRED TO SIGN AN ANNUAL CONFLICT OF INTEREST STATEMENT. IF THERE IS A CONFLICT, THE BOARD MEMBER SHALL EXCUSE HIMSELF FROM ANY VOTE, ACTION OR RESOLUTION.

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

EXECUTIVE COMMITTEE OF THE GOVERNING BOARD CONDUCTS AN ANNUAL CEO EVALUATION. THE CEO PROVIDES THE EXECUTIVE COMMITTEE WITH A PROGRESS NARRATIVE FOR THE YEAR.EACH MEMBER OF THE EXECUTIVE COMMITTEE COMPLETES AN INDEPENDENT EVALUATION. THE EVALUATIONS ARE COLLECTED AND SUMMARIZED. THE EXECUTIVE COMMITTEE RECOMMENDS THE SALARY TO THE FULL BOARD FOR REVIEW, DISCUSSION AND ACTION.

JOB PRICING ANALYSIS OF OTHER CAP AGENCIES VIA THE PUBLIC ACCESS TO 990

Schedule O (Form 990) 2023	Page 2
Name of the organization  LEWIS COUNTY OPPORTUNITIES, INC.	Employer identification number 16-6066837
FORMS ARE USED BY THE EXECUTIVE COMMITTEE FOR THE EVALUATION	rion in 2023.
FORM 990, PART VI, SECTION C, LINE 19:	
OWN WEBSITE, GUIDESTAR WEBSITE AND AVAILABLE UPON REQUEST	Γ.
FORM 990, PART XII, LINE 2C	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	
	_



FINANCIAL STATEMENTS
December 31, 2023

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# LEWIS COUNTY OPPORTUNITIES, INC.

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	STATEMENT OF FUNCTIONAL EXPENSES	
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#### INDEPENDENT AUDITOR'S REPORT

# TO THE BOARD OF DIRECTORS LEWIS COUNTY OPPORTUNITIES, INC.

# **Report on the Audit of the Financial Statements**

# **Opinion**

We have audited the accompanying financial statements of **LEWIS COUNTY OPPORTUNITIES, INC.** (a nonprofit organization), which comprise the statement of financial position as of December 31, 2023 and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Lewis County Opportunities, Inc. as of December 31, 2023, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

# **Basis for Opinion**

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Lewis County Opportunities, Inc. and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

# Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

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In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Lewis County Opportunities, Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

# **Auditor's Responsibilities for the Audit of the Financial Statements**

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Lewis County Opportunities, Inc.'s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Lewis County Opportunities, Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

# **Supplementary Information**

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated, in all material respects, in relation to the financial statements as a whole.

# **Report on Summarized Comparative Information**

We have previously audited Lewis County Opportunities, Inc.'s 2022 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated May 2, 2023. In our opinion, the summarized comparative information presented herein as of and for the year ended December 31, 2022, is consistent, in all material respects, with the audited financial statements from which it has been derived.

# Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued our report dated May 13, 2024 on our consideration of Lewis County Opportunities, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Lewis County Opportunities Inc.'s internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering Lewis County Opportunities, Inc.'s internal control over financial reporting and compliance.

Bowers & Company

Watertown, New York May 13, 2024

# AUDITED FINANCIAL STATEMENTS

# STATEMENT OF FINANCIAL POSITION

December 31, 2023 with Comparative Totals for 2022

		2023	2022		
ASSETS					
Unrestricted Cash and Cash Equivalents	\$	491,878	\$	486,351	
Board Designated Deposits		44,046		46,385	
Deposits Held in Trust		34,313		36,640	
Certificates of Deposit		360,000		360,000	
Grants Receivable		192,310		235,878	
Accounts Receivable		100,342		61,951	
Accrued Interest Income Receivable		2,071		2,692	
Prepaid Expenses		2,945		821	
Investments		228,907		200,138	
Property Available for Lease, Net		1,074		1,504	
Property and Equipment, Net		292,887		306,195	
TOTAL ASSETS	\$	1,750,773	\$	1,738,555	
LIABILITIES AND NET	ASSE	ETS			
LIABILITIES					
Accounts Payable	\$	43,257	\$	37,272	
Accrued Payroll and Related Expenses		79,992		78,430	
Accrued Expenses		84,974		78,908	
Unearned Revenue		90,805		109,928	
Deposits Held in Trust		34,313		36,640	
Total Liabilities		333,341		341,178	
NET ASSETS WITHOUT DONOR RESTRICTIONS					
Undesignated		1,373,386		1,350,992	
Board Designated		44,046		46,385	
Total Net Assets Without Donor Restrictions		1,417,432		1,397,377	
TOTAL LIABILITIES AND NET ASSETS	\$	1,750,773	\$	1,738,555	

# STATEMENT OF ACTIVITIES

Year Ended December 31, 2023 with Comparative Totals for 2022

	2023	2022
SUPPORT AND REVENUE		
Federal Grants	\$ 1,402,930	\$ 1,768,977
State and Local Grants	192,454	203,537
Program Service Fees	1,462,948	1,047,065
Contributions of Cash	32,034	23,288
Contributions of Nonfinancial Assets	113,495	101,086
Rental Revenue	7,200	7,200
Investment Income, Net	22,009	6,311
Miscellaneous Income	120	-
Net Realized and Unrealized Gain (Loss) on Investments	 26,921	 (20,425)
Total Support and Revenue	3,260,111	 3,137,039
EXPENSES		
Program Services:		
Family Services	306,773	371,434
Domestic Violence & Rape Crisis	504,046	453,955
Housing Assistance	1,548,029	1,521,690
Energy Conservation	452,635	430,023
Management and General	 428,573	 399,407
Total Expenses	3,240,056	 3,176,509
CHANGE IN NET ASSETS	20,055	(39,470)
NET ASSETS, BEGINNING OF YEAR	 1,397,377	 1,436,847
NET ASSETS, END OF YEAR	\$ 1,417,432	\$ 1,397,377

# STATEMENT OF FUNCTIONAL EXPENSES

Year Ended December 31, 2023 with Summarized Totals for December 31, 2022

	Program Services													
	Domestic									Ma	nagement			
	Family	Family Violence &		]	Housing Energy					and	To	tals		
	Services	Ra	pe Crisis	A	ssistance	Conservation			Total		General	2023	2022	
													(Sı	ımmarized)
Salaries and Wages	\$ 160,169	\$	228,954	\$	418,550	\$	208,743	\$	1,016,416	\$	292,476	\$ 1,308,892	\$	1,202,484
In-Kind Wages	-		109,253		-		-		109,253		-	109,253		101,086
Payroll Taxes and Benefits	27,856		48,726		86,553		48,016		211,151		41,842	252,993		237,248
Total Payroll and Related Expenses	188,025		386,933		505,103		256,759		1,336,820		334,318	1,671,138		1,540,818
Administrative Costs	-		-		-		1,862		1,862		574	2,436		2,920
Advertising	-		9,548		736		282		10,566		636	11,202		14,477
Conferences and Seminars	842		396		-		6,016		7,254		251	7,505		16,999
Consumer Housing / Other Assistance	35,541		40,413		896,908		1,534		974,396		-	974,396		971,223
Contracted Services	8,400		533		29,811		58		38,802		2,354	41,156		88,324
Copier Pooled Costs	260		257		1,902		81		2,500		-	2,500		3,055
Donations	-		-		-		-		-		4,854	4,854		383
Dues and Subscriptions	7,582		500		2,702		1,978		12,762		4,554	17,316		14,551
Insurance	-		1,292		9,262		6,057		16,611		7,803	24,414		25,328
Occupancy Pooled Costs	16,330		15,000		18,305		9,571		59,206		8,411	67,617		58,461
Office Expense	1,892		7,587		14,579		5,693		29,751		1,486	31,237		26,919
Postage and Printing	1,302		5,777		14,077		2,453		23,609		303	23,912		20,062
Professional Fees	6,665		8,582		18,997		5,313		39,557		29,924	69,481		70,287
Program Supplies and Expenses	27,605		11,814		-		129,944		169,363		3,431	172,794		176,991
Repairs and Maintenance	5,889		1,944		3,436		9,430		20,699		4,693	25,392		46,351
Telephone	2,033		2,656		2,043		2,013		8,745		4,380	13,125		14,983
Travel	-		983		1,773		6,588		9,344		-	9,344		8,699
Vehicle Pooled Costs	2		2,395		5,580		505		8,482		1,594	10,076		12,077
Volunteer and Employee Recognition	-		135		593		-		728		12,242	12,970		9,778
Credit Losses	-		-		-		-		-		-	-		11,331
Depreciation	4,405		7,301		22,222		6,498		40,426		6,765	47,191		42,492
Total Expenses	\$ 306,773	\$	504,046	\$	1,548,029	\$	452,635	\$	2,811,483	\$	428,573	\$ 3,240,056	\$	3,176,509

# STATEMENT OF CASH FLOWS

Year Ended December 31, 2023 with Comparative Totals for 2022

		2023		2022
CASH FLOWS FROM OPERATING ACTIVITIES				
Cash Received from Grantors and Contributors	\$	1,655,622	\$	2,002,489
Cash Received from Service Recipients	·	1,425,791	·	1,020,116
Investment Income Received		22,630		3,817
Cash Paid to Employees and Suppliers		(3,067,881)		(3,011,526)
Net Cash Provided By Operating Activities		36,162		14,896
CASH FLOWS FROM INVESTING ACTIVITIES				
Proceeds from Certificates of Deposit and Investments		310,370		393,180
Purchase of Certificates of Deposit and Investments		(312,218)		(393,892)
Purchase of Property and Equipment		(33,453)		(41,100)
Net Cash Used In Investing Activities		(35,301)		(41,812)
Increase (Decrease) in Cash and Cash Equivalents		861		(26,916)
Cash and Cash Equivalents, Beginning of Year		569,376		596,292
Cash and Cash Equivalents, End of Year	\$	570,237	\$	569,376
CASH AND CASH EQUIVALENTS Unrestricted Cash and Cash Equivalents Board Designated Deposits Deposits Held in Trust	\$	491,878 44,046 34,313	\$	486,351 46,385 36,640
Deposits from in frust		J <del>T</del> ,J13		30,040
Total Cash and Cash Equivalents	\$	570,237	\$	569,376

# STATEMENT OF CASH FLOWS - CONTINUED

Year Ended December 31, 2023 with Comparative Totals for 2022

		2023		2022	
RECONCILIATION OF CHANGE IN NET ASSETS TO NET CASH PROVIDED BY OPERATING ACTIVITIES					
Change in Net Assets	\$	20,055	\$	(39,470)	
Adjustments to Reconcile Change in Net Assets to Net	•	-,	*	(,,	
Cash and Cash Equivalents Provided By Operating Activities:					
Depreciation		47,191		42,492	
Unrealized (Gain) Loss on Investments		(14,254)		27,225	
Realized Gain on Sale of Investments		(12,667)		(6,800)	
Credit Losses		-		11,331	
(Increase) Decrease in Operating Assets:					
Grants Receivable		43,568		(38,543)	
Accounts Receivable		(38,391)		(40,966)	
Accrued Interest Income Receivable		621		(2,494)	
Prepaid Expenses		(2,124)		87	
Increase (Decrease) in Operating Liabilities:					
Accounts Payable		5,985		19,589	
Accrued Payroll and Related Expenses		1,562		(859)	
Accrued Expenses		6,066		2,588	
Unearned Revenue		(19,123)		30,394	
Deposits Held in Trust		(2,327)		10,322	
Net Cash Provided By Operating Activities	\$	36,162	\$	14,896	

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# **NOTE 1 – NATURE OF OPERATIONS**

Lewis County Opportunities, Inc. ("the Organization") is a non-profit community action agency operating since 1965. As a community action agency, the Organization is dedicated to the fulfillment of unmet human needs within its community which, depending on the service, encompasses Lewis and/or Jefferson Counties. To meet these needs, the Organization provides a variety of supportive services to families, with the intended outcome of a higher quality of life.

#### Services Include:

- Family Services, including Transportation Assistance Program, Representative Payee, Food Pantry, Thrift Store, and a Child Passenger Safety Program.
- **Domestic Violence and Rape Crisis Services**, including a 24-hour crisis hotline, Crime Victims Assistance, Safe Dwelling, advocacy, counseling, therapy, information and referrals, transportation, and community education and outreach.
- **Housing Assistance**, including Section 8 rental subsidies to income eligible families in Lewis and Jefferson Counties, who reside in dwellings meeting HUD criteria, and other services such as Home Ownership, Family Self-Sufficiency, and Continuum of Care.
- **Energy Conservation**, through weatherization services, by providing home repairs to promote energy efficiency and also educating consumers on the benefits of energy conservation.

For the years ended December 31, 2023 and 2022, approximately 49% and 63% of total support and revenue was provided by federal and state grants, respectively.

#### NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES

# **Basis of Accounting**

The financial statements of the Organization have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# **NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES – Continued**

#### **Basis of Presentation**

The Organization reports information regarding its financial position and activities according to one class: net assets without donor restrictions.

<u>Net Assets Without Donor Restrictions:</u> Are currently available for operating purposes subject only to the broad limits resulting from the nature of the Organization. Net assets without donor restrictions generally result from receiving contributions that have no donor restrictions, providing services, government grants and contracts, and receiving interest from operating investments, less expenses incurred in providing program-related services and performing administrative functions.

#### **Estimates**

Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenues and expenses. On an ongoing basis, management evaluates the estimates and assumptions based on new information. Management believes that the estimates and assumptions are reasonable in the circumstances; however, actual results could differ from those estimates.

# **Cash and Cash Equivalents**

For purposes of the Statement of Cash Flows, the Organization considers all unrestricted highly liquid investments with an initial maturity of three months or less to be cash equivalents. At December 31, 2023 and 2022 cash equivalents were approximately \$3,000 and \$4,000, respectively.

# **Grants Receivable**

Grants receivable represent amounts that have been billed under agency contracts but not collected as of the date of the financial statements. All grants receivable represents amounts owed by federal, state, and local government agencies. Grants receivable are stated at the amount management expects to be collected from the outstanding balance. As of December 31, 2023 and 2022, management has determined, based on historical experience, that all amounts are fully collectible and no allowance for credit losses is necessary.

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# **NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES – Continued**

#### **Accounts Receivable**

Accounts receivable represent amounts that have been billed under agency contracts but not collected as of the date of the financial statements. Accounts receivable are stated at the amount management expects to be collected from the outstanding balance. At December 31, 2023 and 2022, management considered all receivables to be fully collectible; accordingly, no allowance for credit losses has been recorded. A considerable amount of judgement is required when determining expected credit losses. Estimates of such losses are recorded when management believes a customer, or group of customers, may not be able to meet their financial obligations due to deterioration in financial condition or credit rating. Factors relevant to the assessments include prior collection history, the related aging of past due balances, projections of credit losses based on historical trends in credit quality indicators or past events, and forecasts of future economic conditions. Receivables are charged to expense when they are determined to be uncollectible.

Receivables from contracts with agencies are a component of accounts receivable on the Statement of Financial Position. At December 31, 2023, 2022, and January 1, 2022, \$100,342, \$61,951, and \$20,985, respectively, represent receivables from contracts with agencies.

#### **Investments**

Investments in marketable equity securities with readily determinable fair values are stated at fair value.

# Property and Equipment, Net

Property and equipment, net acquired by the Organization is considered to be owned by the Organization. However, certain federal and state funding sources maintain equitable interest in the property purchased with grant monies as well as the right to determine the use of any proceeds from the sale of these assets. These federal and state funding sources have a reversionary interest in those assets purchased with its funds.

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

#### **NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES – Continued**

# Property and Equipment, Net - Continued

Property and equipment are capitalized at cost and depreciated on a straight-line basis over the useful life of the assets as follows:

Buildings and Improvements 10-40 Years Equipment 5-10 Years Vehicles 5 Years

The Organization capitalizes property and equipment with the following characteristics:

- the item has a cost value of \$2,500 or greater;
- the item has an estimated useful life of one or more years; and
- the item is not appreciably affected by use or consumption.

#### **Unearned Revenue**

The Organization is the recipient of grants that require expenditure for specified activities before the Organization is reimbursed by the grantor for the costs incurred. Certain grantors pay in advance of incurring the specified costs; in those cases, the amount received in excess of amounts spent on reimbursable costs is reported as unearned revenue.

#### **Contributions of Nonfinancial Assets**

Donated investments and other noncash donations are recorded as contributions at their fair values at the date of donation. Donated services are recognized as contributions if the services (a) create or enhance nonfinancial assets or (b) require specialized skills, are performed by people with those skills, and would otherwise be purchased by the Organization.

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# **NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES – Continued**

# **Revenue Recognition**

Building rental revenue is recognized as revenue in the month to which the space is leased.

In accordance with ASU 2014-09, *Revenue from Contracts with Customers* (Topic 606), the Organization recognizes revenue when control of the promised goods or service is transferred to the Organization's outside parties in an amount that reflects the consideration the Organization expects to be entitled to in exchange for those goods or services. The standard outlines a five-step model whereby revenue is recognized as performance obligations within a contract are satisfied.

The Organization has multiple revenue sources that are accounted for as exchange transactions, including thrift store sales and program service fees.

#### Thrift Store Sales

Sales are recognized as revenue at the time of purchase.

## Program Service Fees

Program service fees are recognized as revenue in the month the service is provided.

In accordance with ASU 2018-08, Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made (Topic 958), the Organization recognizes nonreciprocal transactions at the time of transaction for the following revenue sources:

# Federal, State and Local Grants

The Organization receives substantially all of its revenue from cost-reimbursable grants and contracts with Federal, State, and County agencies, which are conditional upon certain performance requirements and/or the incurrence of allowable qualifying expenses. Amounts received are recognized as revenue when the Organization has incurred expenditures in compliance with specific contract or grant provisions.

### Contributions

Contributions received are recorded as net assets without donor restrictions or net assets with donor restrictions based on the nature of any donor restrictions. Support that is restricted by the donor is reported as an increase in net assets without donor restrictions if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in net assets with donor restrictions, depending on the nature of the restriction.

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# **NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES – Continued**

# **Functional Allocation of Expenses**

Directly identifiable expenses are charged to programs and supporting services. Expenses related to more than one function are charged to programs and supporting services in accordance with various statistical bases. Building and property costs are allocated to programs based on square footage occupied. Agency vehicle costs are allocated based on actual miles driven. Postage and copier costs are allocated to programs based on actual usage. Telephone costs are allocated based on actual full-time employees funded by each program. Employee fringe benefits are allocated to programs using salaries and leave by employee classification as the base. Management and general expenses include those expenses that are not directly identifiable with any other specific function but provide for the overall support and direction of the Organization.

#### **Statement of Cash Flows**

The Organization had no noncash financing or investing transactions during the years ended December 31, 2023 and 2022.

# **Income Taxes and Open Tax Years**

The Organization is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. However, income from certain activities not directly related to the Organization's tax-exempt purpose is subject to taxation as unrelated business income. In addition, the Organization qualifies for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization other than a private foundation under Section 509(a)(2).

The Organization has adopted the provisions of Financial Accounting Standards Board Codification, "Income Taxes". In determining the recognition of uncertain tax positions, the Organization applies a more-likely-than-not recognition threshold and determines the measurement of uncertain tax positions considering the amounts and probabilities of the outcomes that could be realized upon ultimate settlement with taxing authorities.

The Organization recognizes potential liabilities associated with anticipated tax audit issues that may arise during an examination. Interest and penalties that are anticipated to be due upon examination are recognized as accrued interest and other liabilities with an offset to interest and other expense. The Organization analyzed its tax positions taken on their Federal and State tax returns for the open tax years 2020, 2021, and 2022. Based on this analysis, the Organization determined that there were no uncertain tax positions and that the Organization should prevail upon examination by the taxing authorities.

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# **NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES – Continued**

# **Comparative Financial Information**

The financial statements include certain prior year summarized comparative information in total but not by asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended December 31, 2022, from which the summarized information was derived.

# **Date of Management's Review**

Management has evaluated subsequent events and transactions that occurred between December 31, 2023 through May 13, 2024, which is the date the financial statements were available to be issued, and has determined that there are no additional adjustments and/or disclosures necessary.

# **Recent Accounting Pronouncements**

Effective January 1, 2023, Lewis County Opportunities, Inc. adopted ASU 2016-13, Financial Instruments—Credit Losses (Topic 326): Measurement of Credit Losses on Financial Instruments, as amended, which modifies the measurement of expected credit losses on certain financial instruments. Lewis County Opportunities, Inc. adopted this new guidance utilizing the modified retrospective transition method. Topic 326 requires measurement and recognition of expected versus incurred losses for financial assets held. Financial assets held by the Organization that are subject to ASU 2016-13 include accounts receivables. The adoption of this ASU did not have a material impact on the financial statements but did change how the allowance for credit losses is determined.

### **NOTE 3 – CERTIFICATES OF DEPOSIT**

Certificates of deposit, valued at cost, totaled \$360,000 for the years ended December 31, 2023 and 2022, and are held at Morgan Stanley. The certificates bear interest ranging from 4.8% to 5.4% and have maturities ranging from one year to two years, with penalties for early withdrawal. Any penalties for early withdrawal would not have a material effect on the financial statements.

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# **NOTE 4 – GRANTS RECEIVABLE**

Grants receivable consist of the following at December 31:

	2023	2022	
NYS Department of State	\$ 73,383	\$	21,109
NYS Office of Children and Family Services	15,146		24,954
NYS Division of Housing and Community Renewal	22,004		12,016
County of Lewis	21,747		8,560
NYS Division of Criminal Justice	37,006		32,269
Jefferson County Department of Social Services	-		115,530
NYS Office of Victim Services	20,278		20,205
Lewis County Office for the Aging	-		1,125
NYS Governors Traffic Safety Committee	2,746		110
Total Grants Receivable	\$ 192,310	\$	235,878

#### **NOTE 5 – INVESTMENTS**

Investments as of December 31, 2023 are summarized as follows:

	Cost Fair Value C		Fair Value		Carrying Va	
Equity Securities	\$	156,333	\$	228,907	\$	228,907

Investments as of December 31, 2022 are summarized as follows:

	Cost	Fair Value		Carrying Value	
Equity Securities	\$ 141,819	\$	200,138	\$	200,138

The equity securities are held at Morgan Stanley. The Organization recognized an unrealized gain (loss) of \$14,254 and (\$27,225) for the years ended December 31, 2023 and 2022, respectively. The Organization also recognized realized gains of \$12,667 and \$6,800 for the years ended December 31, 2023 and 2022, respectively. Expenses related to investment revenues, including custodial fees and investment advisory fees, amounted to \$3,526 and \$3,461 for the years ended December 31, 2023 and 2022, respectively, and have been netted against investment income in the accompanying Statement of Activities.

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# NOTE 6 – PROPERTY AVAILABLE FOR LEASE, NET

Property available for lease consists of the following at December 31:

	2023	2022		
Building and Improvements Less: Accumulated Depreciation	\$ 10,456 (9,382)	\$	10,456 (8,952)	
Total Property Available for Lease, Net	\$ 1,074	\$	1,504	

The Organization leases the above building space and improvements to a tenant under an operating lease with a three-year term, set to expire August 31, 2025. The following is a schedule of years for future minimum rentals under the lease as of December 31, 2023:

2024	\$ 7,200
2025	 4,800
Total	\$ 12,000

# NOTE 7 – PROPERTY AND EQUIPMENT, NET

Property and equipment consist of the following at December 31:

	2023			2022
Land	\$	10,550	\$	10,550
Buildings and Improvements		866,665		866,665
Equipment		173,377		172,590
Vehicles		155,182		174,761
		1,205,774		1,224,566
Less: Accumulated Depreciation		(912,887)		(918,371)
Total Property and Equipment, Net	\$	292,887	\$	306,195

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

#### **NOTE 8 – UNEARNED REVENUE**

The following table provides information about significant changes in the unearned revenue for the years ended December 31:

		2023	2022	
Unearned Revenue, Beginning of Year	\$	109,928	\$	79,534
Revenue Recognized that was Included in Unearned Revenue at the Beginning of the Year		(88,340)		(79,534)
Increase in Unearned Revenue due to Cash Received During the Year:				
NYS Division of Housing and Community Renewal		21,927		33,061
NYS Office of Children and Family Services		23,646		50,806
Lewis County Department of Social Services		5,998		23,705
Lewis County Office for the Aging		6,398		-
TJX Foundation		7,318		-
Excellus		-		500
Other		3,930		1,856
Unearned Revenue, End of Year	\$	90,805	\$	109,928

## NOTE 9 – BOARD DESIGNATED NET ASSETS

During 2004, the Board designated certain unrestricted support and revenue from recurring programs with net asset balances to be used for those programs from which the funds were originally received. In accordance with generally accepted accounting principles, net assets associated with these board-designated amounts are classified as net assets without donor restrictions. A portion of the Organization's cash and cash equivalents are set aside to fund these designations. A summary of board designated net assets, as of December 31 is as follows:

	2023			2022
DV Unrestricted	\$	4,039	\$	4,031
Food Pantry		16,007		19,040
Critical Needs		20,000		20,000
Thrift Store		4,000		3,314
Total Board Designated Net Assets	\$	44,046	\$	46,385

# NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# **NOTE 10 – GRANT REVENUES**

The Organization was primarily funded through the following restricted grants during the years ended December 31 as follows:

		State ar	nd Lo	cal		
			Gra	Grants		
<b>Funding Source</b>	Grant Name	2023		2022		
County of Lewis Lewis County Department of	OFA Mobility	\$	43,602	\$	75,000	
Social Services	Safe Harbour		31,350		18,883	
NYS Division of Criminal Justice	Legislative Initiatives and Rape Crisis		95,255		92,168	
Excellus Northern New York	Food Grant		1,000		2,489	
Community Foundation	Various		2,545		2,482	
TJX Foundation	Food Grant		2,683		-	
Other	In-Kind Grants		16,019		12,515	
Total State & Local Grants		\$	192,454	\$	203,537	

# NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# **NOTE 10 – GRANT REVENUES – Continued**

		Federal Grants			
<b>Funding Source</b>	Grant Name	2023	2022		
NYS Division of Housing &	HEAP Weatherization	\$ 163,518	\$ 269,752		
Community Renewal	Weatherization Assistance	302,733	169,524		
NYS Department of State	CSBG	248,168	348,254		
NYS Office of Victim Services	Crime Victim Assistance	77,952	97,512		
NYS Office of Children					
& Family Services	Family Violence Prevention	121,226	72,010		
NYS Division of Criminal					
Justice	Violence Against Women	50,000	50,000		
National Board Program	Emergency Food & Shelter	15,997	32,103		
County of Lewis	DV TANF/DSS	74,185	48,314		
County of Jefferson	Continuum of Care	344,128	679,898		
NYS Traffic Safety	Child Passenger Safety	5,023	1,610		
Total Federal Grants		\$ 1,402,930	\$ 1,768,977		

# **NOTE 11 – PROGRAM SERVICE FEES**

The Organization received service fees for the following programs during the years ended December 31 as follows:

	2023	2022
Housing Assistance Program:		
Jefferson/Lewis Counties	\$ 1,230,318	\$ 913,611
Other Sources	232,630	133,454
Total Program Service Fees	\$ 1,462,948	\$ 1,047,065

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# NOTE 12 – CONTRIBUTIONS OF NONFINANCIAL ASSETS

The Organization recognizes in-kind contributed services from its volunteer certified rape crisis counselors, who must obtain forty hours of training in rape crisis and twenty hours of training in domestic violence. Contributed services from volunteers are valued at the estimated fair value based on current rates for similar counseling services. The total value of donated services recognized for the years ended December 31 is as follows:

	2023	2022		
Certified Rape Crisis Counselors	\$ 109,253	\$ 101,086		

Contributed services have been included as in-kind wages on the Statement of Functional Expenses.

The Organization also receives in-kind donations of goods that are reported as in-kind donations. The value of these goods was estimated at \$4,242 and \$-0- for the years ended December 31, 2023 and 2022, respectively. The Organization uses value of goods provided by the donor or thrift shop value to assign estimated value of goods received.

# NOTE 13 – ADVERTISING

The Organization uses advertising to promote its programs among the audience it serves. The production costs of advertising are expensed as incurred. During the years ended December 31, 2023 and 2022, advertising costs totaled \$11,202 and \$14,477, respectively.

# NOTE 14 – EMPLOYEES' RETIREMENT PLAN

The Organization participates in a 401(k)-profit sharing plan whereby the Organization contributes an annually determined percentage of salaries for each qualifying employee for retirement benefits. An employee becomes eligible to participate upon working 1,000 hours within a twelve-month period, effective from the employee's date of hire, and annually subsequent to that based on the plan year. All contributions to the plan are made by the Organization. During the years ended December 31, 2023 and 2022, the Organization contributed \$64,904 and \$60,253, respectively, to the plan.

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

#### NOTE 15 – CONCENTRATION OF CREDIT RISK

The Organization has cash and cash equivalents held in accounts at a local bank with bank balances of \$203,321 and \$237,961 at December 31, 2023 and 2022, respectively. Uninsured and uncollateralized amounts totaled \$-0- for both years ended December 31, 2023 and 2022.

The Organization also has accounts at Morgan Stanley in the amount of \$790,598 and \$942,705 at December 31, 2023 and 2022, respectively. Morgan Stanley is a member of the Securities Investor Protection Corporation ("SIPC"). The coverage is \$500,000, of which up to \$250,000 may be invested in cash. Morgan Stanley has obtained additional private insurance in excess of SIPC coverage, which provides an additional \$1 billion of coverage, limited to \$1.9 million per customer. Therefore, the full balances at Morgan Stanley are insured as of December 31, 2023 and 2022.

#### **NOTE 16 – FAIR VALUE MEASUREMENTS**

Financial Accounting Standards Board Accounting Standards Codification No. 820, "Fair Value Measurements" defines fair value, establishes a framework for measuring fair value, and expands disclosures about fair value instruments. That standard provides a consistent definition of fair values, which focuses on an exit price between market participants in an orderly transaction. The standard also prioritizes, within the measurement of fair value, the use of market-based information over entity-specific information and establishes a three-level hierarchy for fair value measurements based on the transparency of the information used in the valuation of an asset or liability as of the measurement date.

Investments measured and reported at fair value are classified and disclosed in one of the following categories:

- Level 1 Quoted prices are available in active markets for identical investments as of the reporting date.
- Level 2 Inputs, including broker quotes, are generally those other than exchanged quoted prices in active markets, which are either directly or indirectly observable as of the reporting date and fair value is determined through the use of models or other valuation methodologies.
- Level 3 Pricing inputs are unobservable for the investment and include situations where there is little, if any, market activity for the investment. The inputs into the determination of fair value require significant management judgment of estimation. Investments included in this category generally include privately held investments and partnership interests.

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# NOTE 16 - FAIR VALUE MEASUREMENTS - Continued

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2023 and 2022.

*Equity Securities:* Valued at the closing price reported on the active market on which the individual securities are traded.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Organization believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, the Organization's assets at fair value as of December 31, 2023:

	Level 1	Level 2	Level 3	Total
Equity Securities	\$ 228,907	\$ -	\$ -	\$ 228,907

The following table sets forth by level, within the fair value hierarchy, the Organization's assets at fair value as of December 31, 2022:

	Level 1	Level 2	Level 3	Total
Equity Securities	\$ 200,138	\$ -	\$ -	\$ 200,138

#### NOTES TO FINANCIAL STATEMENTS

December 31, 2023 with Comparative Totals for 2022

# NOTE 17 – LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS

The Organization monitors its liquidity so that it is able to meet the operating needs and other contractual commitments while maximizing the investment of its excess operating cash. The following table reflects the Organization's financial assets as of December 31, 2023 and 2022, reduced by amounts that are not available to meet general expenditures within one year of the Statement of Financial Position date.

	2023	2022
Financial Assets:		
Unrestricted Cash And Cash Equivalents	\$ 491,878	\$ 486,351
Board Designated Deposits	44,046	46,385
Certificates of Deposits	360,000	360,000
Deposits Held in Trust	34,313	36,640
Grants Receivable	192,310	235,878
Accounts Receivable	100,342	61,951
Accrued Interest Income Receivable	2,071	2,692
Investments	228,907	200,138
Total Financial Assets as of December 31	1,453,867	1,430,035
Less those Unavailable for General Expenditures Within One		
Year:		
Board Designated Deposits	(44,046)	(46,385)
Certificates of Deposit with Maturities in Excess of One Year	(145,000)	(115,000)
Deposits Held In Trust	(34,313)	(36,640)
Total Financial Assets Unavailable for General Expenditures		
Within One Year	(223,359)	(198,025)
Financial Assets Available to Meet Cash Needs for General		
Expenditures Within One Year	\$1,230,508	\$1,232,010

In addition to financial assets available to meet general expenditures over the year, the Organization operates with a balanced budget and anticipates covering its general expenditures through ongoing grant and program income.

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FEDERAL AWARD PROGRAM INFORMATION



INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

# TO THE BOARD OF DIRECTORS LEWIS COUNTY OPPORTUNITIES, INC.

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Lewis County Opportunities, Inc. (a nonprofit organization), which comprise the statement of financial position as of December 31, 2023, and the related statement of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated May 13, 2024.

# Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered Lewis County Opportunities, Inc.'s internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Lewis County Opportunities, Inc.'s internal control. Accordingly, we do not express an opinion on the effectiveness of Lewis County Opportunities, Inc.'s internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected, on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

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Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.

# **Report on Compliance and Other Matters**

As part of obtaining reasonable assurance about whether Lewis County Opportunities, Inc.'s financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

# **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Bowers & Company

Watertown, New York May 13, 2024



# INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

# TO THE BOARD OF DIRECTORS LEWIS COUNTY OPPORTUNITIES, INC.

#### Report on Compliance for Each Major Federal Program

## **Opinion on Each Major Federal Program**

We have audited Lewis County Opportunities, Inc.'s compliance with the types of compliance requirements identified as subject to audit in the OMB Compliance Supplement that could have a direct and material effect on each of Lewis County Opportunities, Inc.'s major federal programs for the year ended December 31, 2023. Lewis County Opportunities, Inc.'s major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, Lewis County Opportunities, Inc. complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended December 31, 2023.

# Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained *Government Auditing Standards*, issued by the comptroller General of the United States; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of Lewis County Opportunities, Inc. and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of Lewis County Opportunities, Inc.'s compliance with the compliance requirements referred to above.

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# **Responsibilities of Management for Compliance**

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to Lewis County Opportunities, Inc.'s federal programs.

## **Auditor's Responsibilities for the Audit of Compliance**

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on Lewis County Opportunities, Inc.'s compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about Lewis County Opportunities, Inc.'s compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and
  design and perform audit procedures responsive to those risks. Such procedures include
  examining, on a test basis, evidence regarding Lewis County Opportunities, Inc.'s
  compliance with the compliance requirements referred to above and performing such other
  procedures as we considered necessary in the circumstances.
- Obtain an understanding of Lewis County Opportunities, Inc.'s internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of Lewis County Opportunities, Inc.'s internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

## **Report on Internal Control over Compliance**

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Bowers & Company

Watertown, New York May 13, 2024

# SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

Year Ended December 31, 2023

Federal Grantor/Pass-through Grant/Program or Cluster Title	Assistance Listing Number	Pass-Through Entity Identifying Number	Total Federal Expenditures	
U.S. Department of Health and Human Services 477 Cluster:				
Passed Through NYS Department of State:				
Community Services Block Grant	93.569	C1001468	\$ 248.	,168
Passed Through County of Lewis:				
Temporary Assistance for Needy Families	93.558	N/A		,185
Total 477 Cluster			298	,353
Passed Through NYS Division of Housing & Community Renewal:				
Low-Income Home Energy Assistance	93.568	C095350-22		,564
Low-Income Home Energy Assistance	93.568	C095350-23	86,	,954
Passed Through NYS Office of Children & Family Services:				
COVID-19: Family Violence Prevention & Services - ARPA	93.497	N/A		,764
COVID-19: Family Violence Prevention & Services - ARPA	93.671	N/A	39	,546
Family Violence Prevention & Services	93.671	C028825	67.	,916
Passed Through County of Lewis:				
Social Services Block Grant	93.667	N/A	24	,000
Total U.S. Department of Health and Human Services			607	,097
U.S. Department of Energy				
Passed Through NYS Division of Housing & Community Renewal:				
Weatherization Assistance for Low-Income Persons	81.042	C095350-23		,388
Weatherization Assistance for Low-Income Persons	81.042	C096350-23	1/1	,345
Total U.S. Department of Energy			302	,733
U.S. Department of Homeland Security				
COVID-19: Emergency Food & Shelter National Board				
Program - ARPA-R	97.024	N/A		,247
Emergency Food & Shelter National Board Program	97.024	N/A	9	,750
Total U.S. Department of Homeland Security			15	,997
U.S. Department of Justice				
Passed Through NYS Office of Victim Services:				
Crime Victim Services	16.575	C11294GG	77.	,952
Passed Through NYS Division of Criminal Justice: Violence Against Women Formula Grants	16.588	C00248GG	50	,000
violence Against women Formula Grants	10.300	C00248GG	30,	,000
Total U.S. Department of Justice			127	,952
Subtotal to Next Page			\$ 1,053	,779
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# SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS - CONTINUED

Year Ended December 31, 2023

Federal Grantor/Pass-through Grant/Program or Cluster Title	Assistance Listing Number	Pass-Through Entity Identifying Number	Total Federal Expenditures
Subtotal from Previous Page			\$ 1,053,779
U.S. Department of Transportation Passed Through NYS Governors Traffic Safety Committee: National Priority Safety Programs	20.616	I-00137-025	2,277
National Priority Safety Programs	20.616	I-00137-023	2,746
Total U.S. Department of Transportation			5,023
U.S. Department of Housing & Urban Development			
Passed Through County of Jefferson, New York:			
Continuum of Care Program	14.267	N/A	344,128
Total U.S. Department of Housing & Urban Development			344,128
Total Federal Awards			\$ 1,402,930

# NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

December 31, 2023

#### **NOTE A - BASIS OF PRESENTATION**

The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal award activity of Lewis County Opportunities, Inc. under programs of the federal government for the year ended December 31, 2023. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Because the schedule presents only a selected portion of the operations of Lewis County Opportunities, Inc. it is not intended to and does not present the financial position, changes in net assets, or cash flows of Lewis County Opportunities, Inc.

# NOTE B – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

#### **NOTE C – INDIRECT COST RATE**

Indirect costs may be included in the reported expenditures, to the extent that they are included in the federal financial reports used as the source of the data presented. The Organization has elected not to use the 10 percent de minimis indirect cost rate allowed under the Uniform Guidance.

# SCHEDULE OF FINDINGS AND QUESTIONED COSTS

Year Ended December 31, 2023

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- 1. The auditor's report expresses an unmodified opinion on whether the financial statements of Lewis County Opportunities, Inc. were prepared in accordance with GAAP.
- 2. No significant deficiencies relating to the audit of the financial statements of Lewis County Opportunities, Inc. were disclosed during the audit. No material weaknesses are reported.
- 3. No instances of noncompliance material to the financial statements of Lewis County Opportunities, Inc., which would be required to be reported in accordance with *Government Auditing Standards*, were disclosed during the audit.
- 4. No significant deficiencies relating to the audit of the major federal award programs are reported in the Independent Auditors' Report on Compliance with Requirements for Each Major Program and on Internal Control Over Compliance Required by the Uniform Guidance. No material weaknesses were reported.
- 5. The auditor's report on compliance for the major federal award programs for Lewis County Opportunities, Inc. expresses an unmodified opinion on the major federal programs.
- 6. There were no audit findings required to be reported in accordance with 2 CFR Section 200.516(a) related to the major federal programs for Lewis County Opportunities, Inc.
- 7. The programs tested as major programs include:

Weatherization Assistance for Low-Income Persons

81.042

- 8. The threshold used for distinguishing between Type A and B programs was \$750,000.
- 9. Lewis County Opportunities, Inc. was determined to be a low-risk auditee.

#### FINDINGS - FINANCIAL STATEMENT AUDIT

No findings to report.

# FINDINGS AND QUESTIONED COSTS - MAJOR FEDERAL AWARD PROGRAMS AUDIT

No findings to report.