Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

21

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

Denart	nent of	the Treasury	Do not enter social security numbers on this form as it may be made	public.		Open to Public		
		ue Service	Go to www.irs.gov/Form990 for instructions and the latest inform	nation.		Inspection		
A F	or the	2021 calenda	year, or tax year beginning 04-01 , 2021, and endi	ng	03-	·31 , 20 22		
B c	heck if a	applicable:	D Employ	er identification number				
X A	ddress o	change	Doing business as		47-3046472			
□ N	ame cha	ange	E Telepho	ne number				
l Ir	itial retu	ırn	157 COLUMBUS AVENUE	414		(929)265-1167		
F	nal retu	rn/terminated	City or town, state or province, country, and ZIP or foreign postal code		G Gross r	eceipts		
A	mended	return	NEW YORK, NY 10023		\$	392,303		
A	oplicatio	on pending	F Name and address of principal officer:	H(a) Is this a	group return for	subordinates? Yes X No		
				H(b) Are all	subordinates	included? Yes No		
I T	ax-exem	npt status: X 5	01(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	lf "No,"	attach a list.	See instructions		
JW	ebsite:	► HTTP	S://WWW.POWERINGPOTNEITAL.ORG/	H(c) Group	exemption nu	imber 🕨		
K F	orm of o	rganization: 🗴 C	orporation 🗌 Trust 🗌 Association 🗌 Other 🕨 🛛 L Year of formation: 201	5 м :	State of legal	domicile: NY		
Par	tl	Summary						
	1	Briefly describ	e the organization's mission or most significant activities: <u>TO USE TECHNOLOGY</u>	TO ENH	ANCE E	DUCATION AND		
		STIMULATE	IMAGINATIONS FOR LEARNERS IN DEVELOPING COUNTRIES WHILE	E RESPE	CTING A	AND INCORPORATING		
Activities & Governance		VALUES OF	THE LOCAL CULTURE.					
rna								
ove	2	Check this box	▶ ☐ if the organization discontinued its operations or disposed of more than 25% of it	s net asse	ts.			
Ğ	3	Number of vot	ng members of the governing body (Part VI, line 1a)		. 3	7		
ŝ	4	Number of ind	ependent voting members of the governing body (Part VI, line 1b)		. 4	6		
/itie	5	Total number of	1					
vctiv	6	5						
٩	7a	Total unrelated	I business revenue from Part VIII, column (C), line 12		. 7a	0		
	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11		. 7b	0		
				Prior Year		Current Year		
	8	Contributions a	nd grants (Part VIII, line 1h)	232	2,887	392,300		
anu	9	Program servi	ce revenue (Part VIII, line 2g)			0		
Revenue	10	Investment inc	ome (Part VIII, column (A), lines 3, 4, and 7d)		3	3		
Re	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0		
	12	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 232,890						
	13		ilar amounts paid (Part IX, column (A), lines 1-3)	23	3,547	22,604		
	14		o or for members (Part IX, column (A), line 4)			0		
ú	15		compensation, employee benefits (Part IX, column (A), lines 5-10)	67	772	73,017		
Expenses			ndraising fees (Part IX, column (A), line 11e)			0		
per			ng expenses (Part IX, column (D), line 25) 28,327					
ũ	17		s (Part IX, column (A), lines 11a-11d, 11f-24e)		9,268	116,428		
	18	•	Add lines 13-17 (must equal Part IX, column (A), line 25)		,587	212,049		
	19	Revenue less	expenses. Subtract line 18 from line 12		2,303	180,254		
or Ices		—		ning of Curr		End of Year		
Net Assets or Fund Balances	20	,	Part X, line 16)		2,111	258,972		
# As nd B	21		(Part X, line 26)		473	1,080		
	22		und balances. Subtract line 21 from line 20	77	,638	257,892		
Par		Signature		lodgo cad k -	liof it ic			
			e that I have examined this return, including accompanying schedules and statements, and to the best of my know ation of preparer (other than officer) is based on all information of which preparer has any knowledge.	neuge and be	iiel, il is			

	MATTHEW COHEN									
Sign	Signature of officer				Da	te				
Here	MATTHEW COHEN,	CHAIRMAN								
	Type or print name and title									
	Print/Type preparer's name	Preparer's signature	Date		Check X if	PTIN				
Paid	Christopher Nickol	las Christopher Nickolas	01-11-2023	self-employed		P01707557				
Preparer	Firm's name Ch	ristopher Nickolas CPA		Firm's EIN 🕨						
Use Only	Firm's address > 24	4 Chestnut Avenue	Phone no.							
	Во	646-468-8111								
May the IRS	May the IRS discuss this return with the preparer shown above? See instructions									
	· · · · · ·	•								

Form	n 990 (2021) powering potential inc. 4	7-3046472	Page 2
	rt 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:		
	TO USE TECHNOLOGY TO ENHANCE EDUCATION AND STIMULATE IMAGINATIONS FOR LEARNERS	IN DEVELO	OPING
	COUNTRIES WHILE RESPECTING AND INCORPORATING VALUES OF THE LOCAL CULTURE.		
	D'al the same size the same destates a second of the same second size of the same shifts have a set that all same		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?		x No
	If "Yes," describe these new services on Schedule O.	· · [] fes	<u>X</u> NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
3			V No
	If "Yes," describe these changes on Schedule O.	🗋 Tes	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured b	v	
7	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	-	
	the total expenses, and revenue, if any, for each program service reported.	σ,	
4a	(Code:) (Expenses \$ 169,989 including grants of \$ 22,604) (Revenue \$)
	TO PROVIDE SOLAR POWER COMPUTERS TO SCHOOLS TO EDUCATE CHILDREN.		/
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	-)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
40	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)		
_	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 169,989		
		Forr	n 000 (2021)

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Pa	rt 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		х
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		x
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				
	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		x
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
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		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		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? 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	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
40	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III.	19		x
20 a		20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

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Pa	rt 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	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	. 23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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 Schedule L, Part I	25b		х
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%	-		
07	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II.	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	27		v
28	persons? If "Yes," complete Schedule L, Part III			x
20	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
a	"Yes," complete Schedule L, Part IV	. 28a		v
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a		x x
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		~
C	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	-		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		л
	conservation contributions? If "Yes," complete Schedule M.	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	. 32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	. 34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a				
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable)		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	-		
	reportable gaming (gambling) winnings to prize winners?	1c	X	

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Par			Yes	No							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax										
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	1									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. 2k	X								
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.										
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			X							
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	. 3k									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,										
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. 4a	_	X							
b	If "Yes," enter the name of the foreign country	-									
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).										
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			x							
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?										
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?.	. 50	_								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the										
	organization solicit 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 were not tax deductible?	. <u>6</u> k									
7	Organizations that may receive deductible contributions under section 170(c).										
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods										
	and services provided to the payor?		_	X							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7t									
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was										
	required to file Form 8282?	. 70	_	x							
d	If "Yes," indicate the number of Forms 8282 filed during the year										
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e	_	х							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		_	х							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	. 7g		х							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	. 7h	_	x							
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	_	x							
9	Sponsoring organizations maintaining donor advised funds.										
а	Did the sponsoring organization make any taxable distributions under section 4966?	. 9a		х							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	. 9b		X							
10	Section 501(c)(7) organizations. Enter:										
а	Initiation fees and capital contributions included on Part VIII, line 12	_									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_									
11	Section 501(c)(12) organizations. Enter:										
а	Gross income from members or shareholders	_									
b	Gross income from other sources (Do not net amounts due or paid to other sources										
	against amounts due or received from them.)										
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	. 12	1								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year										
13	Section 501(c)(29) qualified nonprofit health insurance issuers.										
а	Is the organization licensed to issue qualified health plans in more than one state?	. 13	1	_							
	Note: See the instructions for additional information the organization must report on Schedule O.										
b	Enter the amount of reserves the organization is required to maintain by the states in which										
	the organization is licensed to issue qualified health plans	_									
С	Enter the amount of reserves on hand										
14a	Did the organization receive any payments for indoor tanning services during the tax year?	. 14a		х							
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	. 14									
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 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, any disqualified person, or mine operator 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.										

Forr	n 990 (2021) POWERING POTENTIAL INC. 47-304	5472	F	Page 6
Pa	ITT VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and the second	or a "No	"	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instruc			
	Check if Schedule O contains a response or note to any line in this Part VI	•••		. X
Sec	ction A. Governing Body and Management			1
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	7		
	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 in line 1a, above, who are independent	6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		
2	any other officer, director, trustee, or key employee?	. 2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	. 3		v
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			x x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			x
6	Did the organization have members or stockholders?	-		x
- 7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	. 7a	x	
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	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	. 8a	x	
b	Each committee with authority to act on behalf of the governing body?	. 8b	x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule Q	. 9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			T
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	. 10a		х
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?			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	. <u>11a</u>	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	10-		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13.</i>		X	
u c	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Ves."	. 12b	x	
U	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i> <i>describe in Schedule O how this was done.</i>	. 12c	v	
13	Did the organization have a written whistleblower policy?		X X	
14	Did the organization have a written document retention and destruction policy?		x	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	. 15a	x	
b	Other officers or key employees of the organization			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		x
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			
<u></u>	organization's exempt status with respect to such arrangements?	. 16b		
	tion C. Disclosure			
17 19	List the states with which a copy of this Form 990 is required to be filed New Jersey, New York Section 6104 requires an exemptation to make its Forms 1022 (1024 or 1024 A if applicable) 900 and 900 T (Section 501(c))			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (<i>explain on Schedule O</i>)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
-	GREG OBENSHAIN (929)265-1167, 157 COLUMBUS AVENUE, NEW YORK, NY 10023			

Form 990 (2027) POWERING POTENTIAL INC.	47-3046472	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Cor	npensated Employe	es, 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 tl	nis table for all persons required to be listed. Report compensation for the calendar year ending with or	within the	
organization's t	ax year.		
	the organization's ourrant officers, directors, tructors (whether individuals or organizations) regardless	a of amount of	

• 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 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, 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 instructions for the order in which to list the persons above.

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

			1.	(C)	,				
(A)	(B)	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D)	(E)	(F)
Name and title	Average hours							Reportable compensation	Reportable compensation	Estimated amount of other
	per week (list any							from the organization (W-2/	from related organizations W-2/	compensation from the
	hours for	Individual trustee or director	Instit	Officer	Key	High	Former	1099-MISC/	1099-MISC/	organization and
	related	idual ector	ution	er	Key employee	est co	ler	1099-NEC)	1099-NEC	related organizations
	organizations below		Institutional trustee		oyee	ompe				
	dotted line)	9e	stee			Highest compensated employee				
						ă				
(1) JANICE LATHEN	24.00									
PRESIDENT		x		x				61,666	0	3,814
(2) JANISA ANANDAMOHAN	1.00									
BOARD MEMBER		х						0	0	0
(3) SONIA_KARKARE	1.00									
BOARD MEMBER		х						0	0	0
(4) LASZLO SCHNEIDER	1.00							_		
BOARD MEMBER		х		_	_			0	0	0
(5) MATTHEW COHEN	<u>1.0</u> 0							0	0	0
CHAIRMAN (6) GREG OBENSHAIN	1.00	x		x	_			0	0	0
(0) GREG OBENSHAIN TREASURER		x		x				0	o	0
(7) PHILIP BRANDT	1.00							¥		•
SECRETARY		x		x				0	0	0
(8)										
(9)										
(10)										
<u>(11)</u>										
<u>(12)</u>										
(13)										
(14)										
	1									E

	990 (2021) POWERING POTENTIA	AL INC.								47-30	46472	P	age 8
Part	VII Section A. Officers, Directors, Truster	es, Key Emp	loyee	s, ar	nd Hi	ighe	est Co	ompe	ensated Employe	es (continued)			
(A) Name and title		(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er and	Pos eck mo ss pers d a dire	son is	han one s both a /trustee employee	n)	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2 1099-MISC/ 1099-NEC)	2/ org	(F) mated am of other ompensati from the anization ed organiz	ion and
<u>(15)</u>							<u>u</u>						
(16)													
(18)					-								
					_								
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b	Subtotal	••••	•••	•••	• • •	•••		• •					
C	Total from continuation sheets to Part VII, Sec												
d	Total (add lines 1b and 1c)								61,666		0	3,8	814
2	Total number of individuals (including but not limi reportable compensation from the organization		isted a	bove	e) wn	io re	eceive	a mc	ore than \$100,000	or			0
												Yes	No
3	Did the organization list any former officer, direct						-						
	employee on line 1a? If "Yes," complete Schedu										. 3	+	х
4	For any individual listed on line 1a, is the sum of r												
	organization and related organizations greater th										. 4		x
5	Did any person listed on line 1a receive or accrue										+		Λ
	for services rendered to the organization? If "Ye			-			-				. 5		x
Secti	on B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Report comp										ər		
	(A)								(B)		(C)	
	Name and business addre	SS							Description of servic	es	Comper	isation	
2	Total number of independent contractors (includir	ng but not lim	ited to	thos	e list	ed a	above) who	C				

received more than \$100,000 of compensation from the organization

Form 9	<u> </u>	21) POWER	ING	POTENTI	AL :	INC.			47-30464	72 Page 9
Part	VIII	Statement of Rev	enu	le						
		Check if Schedule O co	ontair	ns a respons	e or n	ote to any line in thi	s Part VIII			
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .			1a					
(0	b Membership dues									
ants unts	c									
มัติ	d	Related organizations .			1d					
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (cont	ributi	ons)	1e					
inii.	f	All other contributions, gif	-							
utio er S		and similar amounts not i			1f	392,300				
oth Oth	g									
Con		lines 1a-1f			1g					
	h	Total. Add lines 1a-1f	••				392,300			
						Business Code				
ø	2a					1				
le Zi	b					1				
ent ent	C									
Program Service Revenue	d									
rog	e f	All other program service	rovo	2110						
₽.		Total. Add lines 2a-2f .								
	3	Investment income (includ other similar amounts) .					3	3		
	4	Income from investment of				-	3			
	5	Royalties		•	•	1				
		·,····		(i) Real		(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	c	Rental income or (loss)	6c							
	d	Net rental income or (loss)) .			· · · · · · ►				
	7a	Gross amount from		(i) Securitie	es	(ii) Other				
		sales of assets								
		other than inventory	7a							
	b	Less: cost or other basis								
ne		and sales expenses	7b							
ven		Gain or (loss)								
Re		Net gain or (loss)			• • •	· · · · · · •				
Other Revenue	8a	Gross income from fundra	-							
ō		events (not including \$								
		of contributions reported of								
		1c). See Part IV, line 18 Less: direct expenses .			8a					
		Net income or (loss) from			8b	-				
		Gross income from gamin		laising event	» . _	· · · · · · •				
	50	activities, See Part IV, line	-		9a					
	Ь	Less: direct expenses .			9b					
		Net income or (loss) from								
		Gross sales of inventory, I	-	ing det mee						
	IVa	returns and allowances .			10a					
	b	Less: cost of goods sold			10k					
		Net income or (loss) from				-				
						Business Code				
ŝ	11a									
non	b									
ella ven	c									
Miscellanous Revenue	d	All other revenue								
Σ	e	Total. Add lines 11a-11d		<u> </u>	<u></u> .	<u>.</u> >				
		Total revenue. See instru					392,303	3	0	0

	990 (2021) POWERING POTENTIAL INC	2.		47-30464	72 Page 10
	rt IX Statement of Functional Expenses				
Sect	ion 501(c)(3) and 501(c)(4) organizations must complete all c	· · · · · · · · · · · · · · · · · · ·	nizations must complet	e column (A).	
	Check if Schedule O contains a response or note to	,		•••••	
Do r	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	b, and 10b of Part VIII.		expenses	general expenses	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	22,604	22,604		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	64,333	57,899	3,217	3,217
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				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	3,814	3,434	189	191
10	Payroll taxes	4,870	4,383	243	244
11	Fees for services (nonemployees):				
a	Management				
b					
c		7,760		7,760	
d		7,700		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
g	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
12 12		4 9 6 7	2 000	050	01.2
13		4,867	2,998	956	913
14 15					
15		F 100	4 500		
16	Occupancy	5,100	4,590	255	255

751

110

2,258

94,928

212,049

654

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434

110

113

1,000

13,733

2,032

71,495

169,989

10

317

113

22,433

28,327

644

17

18

19

20

21

22

23

24

b

С d

е 25

26

Payments of travel or entertainment expenses for any federal, state, or local public officials

Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)

Conferences, conventions, and meetings

Payments to affiliates

Depreciation, depletion, and amortization

STATIONARY, OFFICE & POSTAGE

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

following SOP 98-2 (ASC 958-720)

Total functional expenses. Add lines 1 through 24e. .

🕨 🗌 if

a OUTSIDE CONSULTANTS

All other expenses

Check II Schedule Q contains a response or note to any line in this Part X (A) (B) I Cash - non-interast-bearing (A) (B) End of year 30,157 2 19,660 3 16,277 1 62,364 3 Pledge and grants reservable, net 30,157 2 19,960 3 176,081 4 Accounts reservables from any current or former officer, director, trustee, key employee, creator or loading valuatilized persons (as defined under section 4956(r)(3)(6) 6 5 6 6 6 Lears and other receivables from other dequalitied persons (as defined under section 4956(r)(3)(6) 6 6 6 7 Notes and loars receavable, net 8 9 9 10 10a Land, buildings, and equipment cost of other basis. Complete Part VI of Schedule D 10 2,566 184 10c 74 11 Investments - other sections. Sole Part IV, line 11 11 11 11 11 12 Investments - other sections. Sole Part IV, line 11 13 13 15 5 13	Part	: X	Balance Sheet					_
setup 1 Cath - non-interest-bearing 36,177 1 62,364 2 Savings and temporary cash investments 36,177 1 62,364 30 Pleques and grants receivable, net 30,107 19,860 31,76,081 4 Accounts receivable, net 5 4 4 4 5 Lass and other receivables from any current or former officer, director, trustes, kay employee, creator or founder, subtamila contributor, or 35%, controlled enty of anily member of any of these persons 5 5 6 Lass and other receivable, net 7 8 6 7 7 Notes and loars receivable, net 7 8 9 9 10 10 Lass, complete Part VI of Schedule D 10 2,640 9 11 11 11 11 12 13 14 13 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 16 16 16			Check if Schedule O contains a response or note to any	line in	this Part X	(A)		(B)
gg 2 Skrings and temporary cash investments 30,157 2 19,660 4 Accounts receivable, net 15,000 3 176,081 5 Lears and other receivables from any current or tormer officer, director, trustes key employee, creator of tonneds, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Lears and other receivables from three disqualified persons (as defined under section 4958(r)(1)), and persons described in section 4958(r)(3)(B) 6 7 7 Notes and Lears receivable, net 7 7 7 9 Prepaid expenses and deferred charges 9 9 9 10 Lark, building, and equipoment cost or tother basis. Complete Part VI of Schedule D 10 2,666 184 10c 74 11 Investments - publicly traded securities 11 11 11 11 11 11 11 11 12 11 12 11 11 12 11 13 11 11 12 11 11 12 11 11 12 11 12 11 <		4	Cook non interest bearing				4	
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S Loars and other receivables from any current of former officer, director, trustue, key employee, creator of funder, substantial contributor, or 35%, controlled entity of raminy member of any of these persons 5 6 Loars and other receivables from other disqualified persons (as defined under section 4958(f(1)), and persons described in section 4958(c)(3)(8) 6 7 Notes and loars receivable, net 7 8 Inventonies for sale or use 8 9 Prepaid expanses and defared charges 3 10a 2,640 3 10b 2,566 184 10c 74 11 Investments - poster vol of Schedule D 10a 2,640 10a						15,000	-	1/6,081
set trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loss and other receivables from other disqualified persons (as defined under section 4956(f(1)), and persons described in section 4958(c)(3)(E) 6 6 7 Notes and loars receivables from other disqualified persons (as defined under section 4956(f(1)), and persons described in section 4958(c)(3)(E) 6 6 9 Prepaid expenses and deferred charges 9 9 9 9 9 9 9 100 2,566 184 10c 74 10 mesternets - publicly traded securities 11 11 11 11 11 mesternets - publicly traded securities 11 13 11 12 11 mesternets - publicly traded securities 11 13 13 13 14 inangible assets 5 5 5 5 5 16 Total assets. Add lines 1 through 15 (must equal line 33) 22,253 19 2 13 20 Tax-exempt bord liabilities 2,263 19 2 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>4</td> <td></td>							4	
sector sector<		Э						
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9 7 Notes and loans receivable, net 7 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 2,640 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 2,640 11 Investments - publicly traded securities 11 12 12 Investments - publicly traded securities 11 13 13 Investments - publicly traded securities 14 14 14 Intargible assets. See Part IV, line 11 13 14 15 Other assets. See Part IV, line 11 12 17 1,080 16 Total assets. Add lines 1 through 15 (must equal line 33) 82,111 16 258,972 17 Accounts payable and accrued expenses 1,220 17 1,080 18 Grants payable and accrued expenses 2,253 19 20 21 Eacrow or custodal account liability. Complete Part IV of Schedule D 21 22 23 24 22 Secured nortgages and notes payable to unrelated trid parties 1,000 24 </td <td></td> <td>0</td> <td></td> <td></td> <td></td> <td></td> <td>6</td> <td></td>		0					6	
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Ioa Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Ioa 2,640 b Less: accumulated depreciation 10b 2,566 184 10c 74 11 Investments - publicly traded securities 111 11 11 12 Investments - other securities. See Part IV, line 11 13 11 13 Intragible assets 593 15 593 16 Total assets. Add lines 1 through 15 (must equal line 33) 82,111 16 258,972 14 Scounds payable and accrued expenses 1,220 17 1,080 18 Grants payable 2,253 19 20 20 21 20 21 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loars and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 23 Secured mortgages and notes payable to unrelated third parties 1,000 24	sts							
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generative depreciation 10a 2,640 10b 74 10 2,566 1.84 10c 74 11 Investments - publicly traded socurities. See Part IV, line 11 12 11 12 Investments - program-related. See Part IV, line 11 13 12 14 Investments - program-related. See Part IV, line 11 13 14 15 Other assets. See Part IV, line 11 593 15 593 16 Total assets. Add lines 1 through 15 (must equal line 3) 82,111 16 258,972 17 Accounts payable and accrued expenses 1,200 17 1,0080 19 Deferred revenue 2,253 19 10 20 Tax-exempt bond liabilities 20 21 10 21 Loars and other payables to any current or former officer, director, trustee, key employee, creator of founder, substantial contributor, or 35% controlled entily of family member of any of these persons 22 23 22 Secured motgages and notes payable to unrelated third parties 1,000 24 24 23 Secured notes and loars payable to unrelated third parties 23 25 25	∢						9	
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11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 593 15 593 16 Total assets. See Part IV, line 11 593 15 593 16 Total assets. See Part IV, line 11 593 15 593 17 Accounts payable and accrued expenses 1,220 17 1,080 19 Deferred revenue 2,253 19 19 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loars and other payables to any current or former officer, director, truste, key employee, creator or founder, substaintial contributor, or 35% controlled entity or family member of any of these persons 22 23 23 Secured mortgages and notes payable to unrelated third parties 1,000 24 24 25 Other liabilities (including federal income tax, payables to related third parties 1,000 24 25 26 Total liabilities on ticklude on li		h	•			194	100	74
12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intagible assets. See Part IV, line 11 13 15 Other assets. See Part IV, line 11 593 16 Total assets. Add lines 1 through 15 (must equal line 33) 82,111 16 258,972 17 Accounts payable and accrued expenses 1,220 17 1,080 18 Grants payable . 18 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 20 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 24 Unsecured notes and lones payable to unrelated third parties 1,000 24 25 Other liabilities. (including federal income tax, payables to related third parties 15,000 28 1,080 27 Net assets with donor restrictions 62,638 27 69,311 26 Total Habilities. Add lines 17 through 25 15,000 28 188,581 Organizations that do				· · · · ·		104		/1
13 Investments - program-related. See Part IV, line 11 13 14 Intargible assets 14 15 Other assets. See Part IV, line 11 593 16 Total assets. Add lines 11 through 15 (must equal line 33) 82,111 17 Accounts payable and accrued expenses 1,220 17 1,080 18 Grants payable 18 2,253 19 20 Tax-exempt bond liabilities 20 21 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mottgages and notes payable to unrelated third parties 1,000 24 25 Other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 4,473 26 1,080 07ganizations that follow FASB ASC 958, check here X 25 25 27 Net assets with donor restrictions 62,638 27 69,311								
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Set 231Retained earnings, endowment, accumulated income, or other funds3132Total net assets or fund balances77,6383233Total liabilities and net assets/fund balances82,11133	ets	30	Paid-in or capital surplus, or land, building, or equipment	fund	[30	
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33 Total liabilities and net assets/fund balances 82,111 33 258,972	let /	32			-	77,638	32	257,892
		33	Total liabilities and net assets/fund balances			82,111	33	258,972

EEA

Form 990 (2021)

POWERING POTENTIAL INC.

Form 990 (2021)

47-3046472

Page 11

Form	990 (2021) POWERING POTENTIAL INC.	7-304647	2	Pa	age 12
Par	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		392,	303
2	Total expenses (must equal Part IX, column (A), line 25)	2		212,	049
3	Revenue less expenses. Subtract line 2 from line 1	3		180,	254
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		77,	638
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		257,	892
Par	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🗌
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	х	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		x
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
EEA			Form	990 (2	2021)

SCHEDULE	Α
(Form 990)	

Public Charity Status and Public Support

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

OMB No. 1545-0047
2021

Department of the Treasur Internal Revenue Service			h to Form 990 or Form				Open to Public
Name of the organization		to www.irs.gov/Fo	orm990 for instructions	and the I	atest infoi	mation. Employer identification	Inspection
-							
POWERING POTENT		rity Status (Al	l organizations mus	t comple	ato this n	47-30464	
			nes 1 through 12, check c				10115.
, in the second	•	,	0	•	,		
=			hurches described in se h Schedule E (Form 990		(I)(I)(A)(I)	•	
			ion described in section		(^)(iii)		
= .	· ·	•	tion with a hospital descr			b)(1)(A)(iii) Enter th	0
	ne, city, and state:			10eu 111 3e			6
		enefit of a college o	r university owned or ope	erated by a	agovernme	ental unit described in	
	b)(1)(A)(iv). (Comple	0			govonini		
_		,	I unit described in sectio	on 170(b)(1)(A)(v).		
_	-	-	art of its support from a g			rom the general public	2
	section 170(b)(1)(A)					3	
_			(vi). (Complete Part II.)				
9 An agricultur	al research organizat	ion described in se	ction 170(b)(1)(A)(ix) or	perated in	conjunctio	n with a land-grant co	ollege
or university	or a non-land-grant co	ollege of agriculture	(see instructions). Enter	the name,	city, and st	ate of the college or	-
university:							
10 🗌 An organizat	on that normally recei	ives: (1) more than :	33 1/3% of its support fro	om contrib	utions, men	nbership fees, and gro	DSS
			subject to certain except ousiness taxable income				
			e section 509(a)(2). (Co			101110031103303	
11 🗌 An organizat	on organized and op	erated exclusively t	o test for public safety. S	See sectio	on 509(a)(4	·).	
12 🗌 An organizati	on organized and ope	erated exclusively for	r the benefit of, to perform	m the func	tions of, or	to carry out the purpo	oses of
one or more	publicly supported or	ganizations describ	ed in section 509(a)(1)	or section	n 509(a)(2)	. See section 509(a)	(3). Check
the box in line	es 12a through 12d th	at describes the typ	e of supporting organiza	tion and co	omplete line	es 12e, 12f, and 12g.	
			rvised, or controlled by i		-	.,	giving
	•		rly appoint or elect a maj		e directors	or trustees of the	
	• •	-	rt IV, Sections A and B				
		•	controlled in connection		• •	• • • •	•
	•		tion vested in the same p	persons that	at control o	r manage the support	ed
	tion(s). You must co	•					4201
_ ,,			ganization operated in c		-	, 0	d with,
_			ou must complete Part				ation (a)
—	-	•	ng organization operate				. ,
		-	n generally must satisfy a ete Part IV, Sections A				255
_ `	,		en determination from the				
	0		integrated supporting or			i, rype ii, rype iii	
	er of supported organ						
	owing information abc		ganization(s).				
(i) Name of supported	9	(ii) EIN	(iii) Type of organization	(iv) Is the o	organization	(v) Amount of monetary	(vi) Amount of
	-		(described on lines 1-10	listed in you	ur governing	support (see	other support (see
			above (see instructions))	docum	ient?	instructions)	instructions)
				Yes	No		
(A)							
(A)							
(B)							
(=)							
(C)							
(D)							
(E)							

Schedu Part	ule A (Form 990) 2021 POWERING PC			ione 170/b)//	()(A)(iv) and	47-304647	
Fait	(Complete only if you checked th						
							inty under
<u>Cest</u>	Part III. If the organization fails to	o quality unde	er the tests is	sted below, pi	ease complet	le Part III.)	
	ion A. Public Support	(-) 0047	(1-) 0040	(-) 0040	(-1) 0000	(-) 0004	
	ndar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
_	include any "unusual grants.")	175,968	182,894	239,000	232,886	392,303	1,223,051
2	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	175,968	182,894	239,000	232,886	392,303	1,223,051
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)						274,578
6	Public support. Subtract line 5 from line 4.						948,473
Sect	ion B. Total Support		1				
-	ndar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	175,968	182,894	239,000	232,886	392,303	1,223,051
8	Gross income from interest, dividends,			2007000	2027000	0,000	1/110/001
Ū	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources						
9	Net income from unrelated business						
3	activities, whether or not the business						
40	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10						1,223,051
12	Gross receipts from related activities, etc.	•	,			12	
13	First 5 years. If the Form 990 is for the or	•			•	•	, , ,
	organization, check this box and stop her						· · · · ► _
-	ion C. Computation of Public Support					1	
14	Public support percentage for 2021 (line 6		-			14	77.55 %
15	Public support percentage from 2020 Sch					15	95.98 %
16a	33 1/3% support test - 2021. If the organ	ization did not	check the box	on line 13, and	d line 14 is 33	1/3% or more,	check this
	box and stop here. The organization qua	lifies as a publi	icly supported	organization.			► <u>x</u>
b	33 1/3% support test - 2020. If the organ	ization did not	check a box o	n line 13 or 16	a, and line 15 i	s 33 1/3% or n	nore, check
	this box and stop here. The organization						
17a	10%-facts-and-circumstances test - 202						
	10% or more, and if the organization mee	•					
	Part VI how the organization meets the fa						
	Fall VI now me oroanization meets me ta			-	-		_
	-						
F	organization						
b	organization	20. If the organ	ization did not	check a box o	n line 13, 16a,	16b, or 17a, a	nd line
b	organization	20. If the organ	ization did not ts-and-circums	check a box o stances test, ch	n line 13, 16a, neck this box a	16b, or 17a, a nd stop here.	nd line Explain
b	organization	20. If the organ meets the fac facts-and-circu	ization did not ts-and-circums umstances tes	check a box o stances test, ch t. The organiza	n line 13, 16a, neck this box a tion qualifies a	16b, or 17a, a nd stop here. as a publicly su	nd line Explain pported
b	organization	20. If the organ meets the fac facts-and-circu	ization did not ts-and-circums umstances tes	check a box o stances test, ch t. The organiza	n line 13, 16a, neck this box a tion qualifies a	16b, or 17a, a nd stop here. as a publicly su	nd line Explain pported ▶□
b 18	organization	20. If the organ meets the fac facts-and-circu	ization did not ts-and-circums umstances tes	check a box o stances test, ch t. The organiza	n line 13, 16a, neck this box a tion qualifies a	16b, or 17a, a nd stop here. as a publicly su	nd line Explain pported ▶

Schedu	e A (Form 990) 2021 POWERING PC					47-3046	472 Page 3
Part	III Support Schedule for Organiza	ations Desc	ribed in Sect	ion 509(a)(2)			
	(Complete only if you checked th						under Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	mplete Part II	l.)	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities fumished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
Ŭ	unrelated trade or business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
5	furnished by a governmental unit to the						
<u> </u>	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
_	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support					1	
Calen	dar year (or fiscal year beginning in)►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the or	anization's fi	rst second thi	rd fourth or fi	fth tax vear as	a section 50	(1)(3)
••	organization, check this box and stop her	•					
Secti	on C. Computation of Public Suppor			· · · · · · · · ·			· · · · · · · · · ·
15	Public support percentage for 2021 (line 8	-		13 column (f))		15	%
16	Public support percentage from 2020 Sch		•			16	%
	on D. Computation of Investment In				•••••	10	/0
<u>3ecu</u> 17	Investment income percentage for 2021 (I			v line 13 colu	mn (f))	17	%
	Investment income percentage from 2021 (investment income percentage from 2020)			•	())	17	%
18 192							
19a	33 1/3% support tests - 2021. If the organization of the set more than 22 1/2% about this h						
ь.	17 is not more than 33 1/3%, check this b	-	-	-			-
b	33 1/3% support tests - 2020. If the organization						
20	line 18 is not more than 33 1/3%, check this bo						
20	Private foundation. If the organization di	и пот спеска	box on line 14,	19a, or 19D, C	THECK THIS DOX 8	and see Inst	uucuons 🕨 📋

Page 4

No

Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

POWERING POTENTIAL INC. Part IV Supporting Organizations (Complete only if you checked a box in line 12 on 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). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a lines 3b and 3c below. b Did the organization confirm that each supported organization gualified 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. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) С purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes," and if you checked 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. Did the organization support any foreign supported organization that does not have an IRS determination С 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). Type I or Type II only. Was any added or substituted supported organization part of a class already b designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control? С 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 disgualified 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. Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which b the supporting organization had an interest? If "Yes," provide detail in Part VI. С Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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.)

	e A (Form 990) 2021 POWERING POTENTIAL INC. 47-304647	2	F	Page
Part	IV Supporting Organizations (continued)		V	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
ecti	on B. Type I Supporting Organizations			1
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
-	organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part</i>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		2		
ti	supervised, or controlled the supporting organization.	2		
ecu	on C. Type II Supporting Organizations		Vaa	NL
	More enclosive of the encoder time of the encoder of the territory the territory descent of the discovery		Yes	N
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		
ecti	on D. All Type III Supporting Organizations			1
			Yes	N
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 ho	w		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in 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		
octi	on E. Type III Functionally Integrated Supporting Organizations	J		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (oo insi	ructio	200
	The organization satisfied the Activities Test. Complete line 2 below.	ee mst	lucii	JIIS
a h				
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		`	
c	The organization supported a governmental entity. <i>Describe in Part VI how you supported a government entity (see ins</i>	ructions		NI
2	Activities Test. Answer lines 2a and 2b below.		Yes	N
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	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. <i>Answer lines 3a and 3b below.</i>	_~		
5	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
2		20		
а			1	1
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
a 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.	3a 3b		

Part	A (Form 990) 2021 POWERING POTENTIAL INC. Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganiz	47-304 ations	16472 Page
1	Check here if the organization satisfied the Integral Part Test as a qualifying			olain in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organ	izatior	is must complete Sect	ions A through E.
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (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		
Secti	on 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-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2021

	e A (Form 990) 2021 POWERING POTENTIAL INC.		47-3046	5472 Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ea	xempt purposes	1	
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed	
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organi	izations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	<i>VI</i>) 5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2021 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount	1	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2021			
а	From 2016			
b	From 2017			
C	From 2018			
d	From 2019			
e	From 2020			
f	Total of lines 3a through 3e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount Remainder. Subtract lines 4a and 4b from line 4.			
<u>с</u> 5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h			
0	and 4b from line 1. For result greater than zero, <i>explain in</i>			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
'	and 4c.			
8	Breakdown of line 7:			
<u> </u>	Evenes from 2017			
a	Evenes from 2019			
C	Evenes from 2010			
d	Excess from 2019			
e	Excess from 2021			
EEA				Schedule A (Form 990) 2021

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

SCHEDULE D	
(Form 990)	

Supplemental Financial Statements

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

► Attach to Form 990.

OMB No. 1545-0047

2021
Open to Public
Inspection

Department of the Treasury Internal Revenue Service

Internal	Revenue Service Go to www.irs.gov/Form	990 for instructions and	the latest information	. Inspection
Name o	f the organization		Emp	loyer identification number
POWER	ING POTENTIAL INC.			47-3046472
Pa	t I Organizations Maintaining Donor Advised	Funds or Other Simila	ar Funds or Accour	nts.
	Complete if the organization answered "Yes"	on Form 990, Part IV, li	ne 6.	
		(a) Donor advise	d 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	n writing that the assets hel	d in donor advised	
	funds are the organization's property, subject to the organization	zation's exclusive legal cont	rol?	Yes 🗌 No
6	Did the organization inform all grantees, donors, and donor	advisors in writing that gran	nt funds can be used	
	only for charitable purposes and not for the benefit of the do	onor or donor advisor, or for	any other purpose	
	conferring impermissible private benefit?			Yes 🗌 No
Par	II Conservation Easements.			
	Complete if the organization answered "Yes"	on Form 990, Part IV, li	ne 7.	
1	Purpose(s) of conservation easements held by the organization	ation (check all that apply).		
	Preservation of land for public use (for example, recreat	ion or education)	Preservation of a histor	rically important land area
	Protection of natural habitat		Preservation of a certif	ied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qua	lified conservation contribut	ion in the form of a con	servation
	easement on the last day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements $\ . \ .$			2b
С	Number of conservation easements on a certified historic s	structure included in (a)		2c
d	Number of conservation easements included in (c) acquired	d after 7/25/06, and not on	а	
	historic structure listed in the National Register \ldots .			2d
3	Number of conservation easements modified, transferred, r	released, extinguished, or te	erminated by the organ	ization during the
	tax year ►			
4	Number of states where property subject to conservation e	asement is located	▶	
5	Does the organization have a written policy regarding the p		-	
	violations, and enforcement of the conservation easements			
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and	enforcing conservation	easements during the year
	▶			
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enfo	prcing conservation eas	ements during the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) ab	ove satisfy the requirement	s of section 170(h)(4)(E	3)(i)
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conserva-		•	
	balance sheet, and include, if applicable, the text of the foot	note to the organization's fi	nancial statements that	describes the
Dem	organization's accounting for conservation easements.	of Aut Illiotonical T		
Par				r Similar Assets.
	Complete if the organization answered "Yes"			
1a	If the organization elected, as permitted under FASB ASC	•		
	of art, historical treasures, or other similar assets held for p			ce of public
	service, provide in Part XIII the text of the footnote to its fin			
b	If the organization elected, as permitted under FASB ASC s			
	art, historical treasures, or other similar assets held for publ	ic exhibition, education, or	research in furtherance	or 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 to		-	provide the
_	following amounts required to be reported under FASB AS	-		► ¢
a h	Revenue included on Form 990, Part VIII, line 1			·
b	Assets included in Form 990, Part X			· · F D

	D (Form 990) 2021 POWERING POTEN					_		47-30464			Page 2
Par	t III Organizations Maintaining	Coll	ections of	Art, His	torical T	reasures	, or Ot	her Similar As	sets (co	ontin	nued)
3	Using the organization's acquisition, access	sion, ar	nd other record	ls, check a	ny of the fo	ollowing that r	make sig	pnificant use of its			
	collection items (check all that apply):										
а	Public exhibition			d	🗌 Loan o	r exchange p	rograms	6			
b	Scholarly research			е		0 1	-				
c	Preservation for future generations			Ū							-
	L 0	ollooti	ana and avalai	n how tho	(furthor the		n'a avan	nt numana in Dart			
4	Provide a description of the organization's o	conecti	ons and explai	in now they	/ iunner ine	e organizatio	ns exen	ipt pulpose in Part			
_	XIII.										
5	During the year, did the organization solicit	or rece	eive donations	of art, histo	orical treas	ures, or other	r similar		_	_	_
	assets to be sold to raise funds rather than	to be I	maintained as	part of the	organizati	on's collectio	n?		Yes	<u>; </u>	No
Par	t IV Escrow and Custodial Arra	angei	ments.								
	Complete if the organization	ansv	vered "Yes"	' on Forr	n 990, P	art IV, line	9, or ı	reported an amo	ount on	Forr	n
	990, Part X, line 21.							-			
1a	Is the organization an agent, trustee, custod	lian or	other intermed	liarv for cor	ntributions	or other asse	ets not				
									Yes	5 F	No
h	If "Yes," explain the arrangement in Part XI									· L	
b		n anu c	complete the it	Jiowing tai	JIE.			A			
								Amo	ount		
С	Beginning balance							;			
d	Additions during the year	• • •					. 10	1			
е	Distributions during the year						. 1e				
f	Ending balance						. 1f				
2a	Did the organization include an amount on F	Form 9	90, Part X, line	e 21, for es	crow or cu	stodial accou	unt liabili	ty?	Yes	; [No
b	If "Yes," explain the arrangement in Part XI							-			ī
Par											<u></u>
	Complete if the organization	ansv	vered "Ves"	' on Forr	n 990 P	art IV line	10				
								()) There exists a head	(2) 5		h a al i
		(a)	Current year	(b) Pri	or year	(c) Two years	S DACK	(d) Three years back	(e) Four	years i	раск
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and										
	losses										
d	Grants or scholarships										
е	Other expenditures for facilities and										
	programs										
f	Administrative expenses										
	•										
g	End of year balance			. (1							
2	Provide the estimated percentage of the cur				column (a))) held as:					
а	Board designated or quasi-endowment	▶_		_%							
b	Permanent endowment	%									
С	Term endowment ►%	0									
	The percentages on lines 2a, 2b, and 2c sho	ould ec	jual 100%.								
3a	Are there endowment funds not in the poss	ession	of the organiz	ation that a	are held ar	nd administer	ed for the	e			
	organization by:		-						[Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations										-
L									3a(ii)		+
b	If "Yes" on line 3a(ii), are the related organi								3b		
4	Describe in Part XIII the intended uses of the			lowment fu	nds.						
Par					_						
	Complete if the organization	ansv	vered "Yes"	' on Forr	<u>n 990, P</u>	art IV, line	11a. S	See Form 990, I	Part X, I	ine '	10.
	Description of property		(a) Cost or othe	er basis	(b) Cost o	r other basis	(c)	Accumulated	(d) Book	value	,
			(investme	ent)	(other)	d	epreciation			
1a	Land										-
b	Buildings										
			<u> </u>								
C	Leasehold improvements										
d						2,640		2,566			74
e	Other										
Total.	Add lines 1a through 1e. (Column (d) must	equal	Form 990, Pai	rt X, colum	n (B), line	10c.)		►			74
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Part VII

Investments - Other Securities.

Page 3

Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes" on For	<u>m 990, Part IV, lin</u>	e 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation:

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1) Fe	deral income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (C	olumn (b) must equal Form 990, Part X, col. (B) line	≥ 25.). ►

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

	D (Form 990) 2021 POWERING POTENTIAL INC.	47-3046472	Page 4
Part		e per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		
Part		ses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
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.)		
C	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part	XIII Supplemental Information.		

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

SCHEDULE F (Form 990)	Statement of Activities Outside the United State	OMB No. 1545-0047					
	► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or						
Department of the Trea	► Attach to Form 990.	Open to Public					
Internal Revenue Servi		Inspection					
Name of the organization	Name of the organization Employer						
POWERING POTENTIAL INC. 47-3046							
Part I Ge	neral Information on Activities Outside the United States. Complete if the organization	answered "Yes" on					
Fo	n 990, Part IV, line 14b.						
1 For gran	nakers. Does the organization maintain records to substantiate the amount of its grants and						
other assi	other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to						
award the	grants or assistance?	Yes 🗌 No					

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

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

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
<u>3</u> a	Subtotal					
b	Total from continuation					
	sheets to Part I					
с	Totals (add lines 3a and 3b)					

Schedule F (Form 990) 2021

POWERING POTENTIAL INC.

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Page **2**

1 (a) Name of organization (b) IRS code section and EIN (if applicable) (c) Region (d) Purpose of grant (e) Amount of cash disbursement (f) Manner of cash disbursement (g) Amount of noncash assistance (h) Description of noncash assistance (i) Method of valuation (book, FMV, appraisal, other) 2 Sub-Saharan <	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.								
Image: Note of the state of the st	1 (a) Name of	(b) IRS code section and EIN		(d) Purpose of	(e) Amount of	(f) Manner of cash	(g) Amount of noncash	(h) Description of noncash	(book, FMV,
(a) Image: I			Sub-Saharan						
(a) Image: sector of which the grantee or course has provided a sector 501(c)(3) equalency (left,	(1)		Africa	TO PROVIDE	22,604	WIRE TRANSFER		N/A	Fair market val
(a) (b) (c) ((2)								
(a) Image: I	(3)								
(6) Image: I	(4)								
(7) Image: I	(5)								
(a)	(6)								
(9)	(7)								
(10) Image:	(8)								
(1) Image: I	(9)								
(12) Image: Constraint of the section by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. Image: Constraint of the section to the sectin to the secting to the section to the section	(10)								
(13) Image:	(11)								
(14) Image: Constraint of the state o	(12)								
(15) Image: Constraint of the second sec	(13)								
(16) Image: Constraint of the second sec	(14)								
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	(15)								
exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.									
	exempt 501(c)(3) or 3 Enter total number of	ganization by the I	RS, or for which the	grantee or counsel has pr	ovided a section 501	(c)(3) equivalency letter.			Schedule F (Form 990) 2021

POWERING POTENTIAL INC.

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Page 3

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
)							
2)							
3)							
1)							
5							
5)							
7)							
3)							
9)							
0)							
1)							
2)							
3)							
4)							
5)							
6)							
7)							
8)							Schedule F (Form 990)

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed.

Schedule F (Form 990) 2021	POWERING	POTENTIAL	INC.

Schedule	F (Form 990) 2021 POWERING POTENTIAL INC.	47-3046472	Page 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	🏾 Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	🗌 Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	🏾 Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	🏾 Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	🏾 Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	🏾 Yes	X No
EEA		Schedule F (F	orm 990) 2021

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

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.

OMB No. 1545-0047

Open to Public

Inspection

Employer identification number

47-3046472

Department of the Treasury Internal Revenue Service

Name of the organization

POWERING POTENTIAL INC.

01. Member election for additional members (Part VI, line 7a)

THE BOARD MEMBERS CAN ELECT ONE OR MORE MEMBERS OF THE GOVERNING BODY.

02. Governing body decisions (Part VI, line 7b)

OTHER THAN THE GOVERNING BODY, THERE ARE NO SEPERATE CLASSES OF BOARD MEMBERS. EACH MEMBER

HAS ONE VOTE.

03. Form 990 governing body review (Part VI, line 11)

THE ACCOUNTANT PREPARES THE FEDERAL FORM 990 AND THE MEMBERS OF THE GOVERNING BODY REVIEW

AND APPROVE IT BEFORE FILING.

04. Conflict of interest policy compliance (Part VI, line 12c)

ALL MEMBERS OF THE BOARD AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE ANNUALLY, ANY INTEREST

THAT COULD GIVE RISE TO CONFLICT. COMPLIANCE IS MONITORED PERIODICALLY BY THE GOVERNING

BODY.

05. CEO, executive director, top management comp (Part VI, line 15a)

COMPENSATION IS DETERMINDES AND VOTED UPON BY THE BOARD.

06. Governing documents, etc, available to public (Part VI, line 19)

NO DOCUMENTS AVAILABLE TO THE PUBLIC.