** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Α	For the	2023 calendar year, or tax year beginning and en	nding						
В	Check if applicable	C Name of organization		D Employer identific	cation number				
	Addres								
	Name change	Doing business as		91-16626	98				
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)							
	Final return/	42 7TH STREET 10	00	888-231-3					
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 32,060,164.					
	Amende	ASTORIA, OR 9/103		H(a) Is this a group return					
	Applica tion pending	F Name and address of principal officer: BROCE BROCKS		for subordinates	? Yes X No				
		SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No				
1	Tax-exe	mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	1	list. See instructions				
_	Website			H(c) Group exemption					
		organization: X Corporation Trust Association Other	L Year	of formation: 1994 N	1 State of legal domicile: WA				
P	_	Summary	TTD 3	mup Turno	TITOM AND				
ø	1 1	Briefly describe the organization's mission or most significant activities: TO BUI							
anc		EMPOWERED PACIFIC NORTHWEST USING CAPITAL,							
Governance	2 (Check this box if the organization discontinued its operations or disposed		_	ets.				
9	3 1			3	12				
		Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2023 (Part V, line 2a)			96				
Activities &	6	otal number of individuals employed in calendar year 2023 (Fart V, line 2a) otal number of volunteers (estimate if necessary)			12				
	72	otal number of volunteers (estimate in necessary) otal unrelated business revenue from Part VIII, column (C), line 12			0.				
Ą	h	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.				
	"	tot differences business taxable moonie from 1 on 1 on 1,1 dit 1, fine 11		Prior Year	Current Year				
_	8 (Contributions and grants (Part VIII, line 1h)		6,269,398.	19,354,025.				
nue	9 6	Program service revenue (Part VIII, line 2g)		12,060,240.	10,940,089.				
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		889,621.	1,766,050.				
æ	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.				
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		19,219,259.	32,060,164.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		248,949.	270,253.				
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
Ø	15 8	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		10,413,156.	11,834,538.				
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
χ	. b ⊺	otal fundraising expenses (Part IX, column (D), line 25) 453, 319	9.						
Ú	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,330,685.	8,515,968.				
	18 7	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		15,992,790.	20,620,759.				
		Revenue less expenses. Subtract line 18 from line 12		3,226,469.	11,439,405.				
Net Assets or	9			ginning of Current Year	End of Year				
sset	20	otal assets (Part X, line 16)		82,110,281.	222,022,332.				
et A	21	otal liabilities (Part X, line 26)		11,734,376.	140,216,519.				
Z	22 N art II	Net assets or fund balances. Subtract line 21 from line 20		70,375,905.	81,805,813.				
			nd atatama	nto and to the heat of my	Innoulades and halist it is				
		ties of perjury, I declare that I have examined this return, including accompanying schedules ar , and complete. Declaration of preparer (other than officer) is based on all information of which		· · ·	knowledge and beller, it is				
tiue	, сопесі	, and complete. Decial ation of preparet (other than officer) is based on all information of which	ii piepaiei	lias any knowledge.					
Ci~		Signature of officer		Date					
Sign Here		MARK STEVENSON, CHIEF FINANCIAL OFFICER							
110	•	Type or print name and title							
		Print/Type preparer's name Preparer's signature		Date Check	PTIN				
Pai		SUE ROBISON SUE ROBISON	1	1/11/24 if self-employ					
		Firm's name RSM US LLP			2-0714325				
	-	Firm's address 920 5TH AVENUE, SUITE 2800		THE SERVE					
	1	SEATTLE, WA 98104		Phone no. 20	6-281-4444				
Ma	v the IR	S discuss this return with the preparer shown above? See instructions		,	X Yes No				

Form	m 990 (2023) CRAFT3	91-1662698 F	Page 2
Pa	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 BUILD A THRIVING, JUST AND EMPOWERED PACIFIC NORTHWES	ST USING	
	CAPITAL, RELATIONSHIPS AND VOICE.		
	·		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	Yes 🖸	K No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes 🖸	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported.	10 420 15	77
4a	(Code:) (Expenses \$ 15,591,481. including grants of \$ 270,253.) (Revelopment of the control of the contr	NG ASSISTANCE	11.
	AND HIGH RISK NON-BANK CREDIT TO BUSINESSES AND INDIVIDU		
	WASHINGTON AND OREGON. IMPROVING THE PHYSICAL AND ECONOM		'S
	THROUGH REDUCTION OF WASTE, ENERGY AND CHEMICAL USAGE THE BASED LENDING.	IROUGH MISSION	
	DASED DENDING.		
	020 267	enue \$ 509,91	1 2
4b	(Code:) (Expenses \$ 828,367. including grants of \$) (Reverse PROGRAM CONSULTING: PROVIDING EXPERT GUIDANCE IN STRATEGUIDANCE IN STRATEGU		<u>LZ•</u>
	ORGANIZATIONAL DEVELOPMENT, ECONOMIC DEVELOPMENT, AND RE		
	DEVELOPMENT. THE SERVICES ARE DESIGNED TO ASSIST BUSINES		ſΤ
	ORGANIZATIONS AND LOCAL GOVERNMENTS IN ACCOMPLISHING THE	EIR GOALS.	
4c	(Code:) (Expenses \$ including grants of \$) (Reve	enue \$	
4d		1	
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 16,419,848.		

Form 990 (2023) CRAFT3 Part IV Checklist of Required Schedules

1 Is the organization described in section \$01(c(R)) or 4847(a(N)) (other than a private foundation)? If 'Yes, 'complete Schedule A 2 X X 2 X 2 X 3 D the organization registed to complete Schedule A 2 X X 3 D the organization registed 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 X 8 Section \$01(c(R)) organizations. Did the organization engage in tooblying activities on hebalf of or in opposition to candidates for public office? If 'Yes, 'complete Schedule C, Part I 3 X X 8 Section \$01(c(R)) organization segment in the organization as each of the complete Schedule C, Part I 3 X X 8 Section \$01(c(R)) organization segment in the organization as defined in Rev. Proc. 98-10? If 'Yes, 'complete Schedule C, Part II 4 X X X Y X Y Y Y Y Y Y Y Y Y Y Y Y Y Y				162	INO
2 Is the organization required to complete Schedule S, Schedule of Contributors' See instructions Did the organization engage in direct or indirect political campalign activities on behalf of or in opposition to candidates for public office? If 'Yes, 'complete Schedule C, Part I' Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(ii) election in effect during the fax year? If 'Yes, 'complete Schedule C, Part II' 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. Pros. 98-119' If 'Yes, 'complete Schedule C, Part II' Did the organization and interest of the complete Schedule C, Part II' Did the organization and interest of the complete Schedule C, Part II' Did the organization and interest of the complete Schedule D, Part II' Did the organization and interest of the complete Schedule D, Part II' Did the organization and interest of the complete Schedule D, Part II' Did the organization report an amount in Part X, line 21, for ascrow or custodial account liability, serve as a custodian for amounts and to liability as a custodian for a customia for a customia for a cus	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
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 II Section 5016(3) organizations. Did the organization angage in loobying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part III Is the organization assection 501(k)(4), 501(k)(5), or 501(k)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-197 If "Yes," complete Schedule C, Part III B Did the organization maintain and quota oral value from the organization for the value of a conservation aceament, including assements to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment in such funds or accounts? If "Yes," complete Schedule D, Part II D Id the organization members of the consensation accounts a such part of the organization members of the consensation accounts an amount or listed in Part X, in provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV D Id the organization is amount to protuge in elasted organization, hold assets in donor-restricted endocwments or in quasi-endocwments? If "Yes," complete Schedule D, Part V II D Id the organization report an amount for investments—or the such part V III the organization is assets and your of the felicitoring questions is "Yes," then complete Schedule D, Part V II D Id the organization report an amount for investments—or the such part V III to Yes, "complete Schedule D, Part V III D Id the organization report an amount for investments—or					
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4 Section 501(s)3 organizations. Did the organization engage in loobying activities, or have a section 501(s) election in effect during the tax year? "Yes," complete Schedule, P. Part 8 S. X. 5 is the organization a section 501(s)(s), 501(s)(s), or 501(s)(s) or 501	3				.,
during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 50 (16)(4), 501(6)) or 501(6)(6) or 501(6) or 501(6)(6) or 501(6)(6			3_		<u> </u>
s the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or smillar amounts as defined in Rev. Price. 98-197 (**)*es** complete Schedule C, Part II Did the organization maintain any donor advised funds or any smillar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? (**)** (**)**, "complete Schedule D, Part II Did the organization receiver or hold a conservation assement, including assements to preserve open space, the environment, historic land areas, or historic structures? (**)* (**)**, "complete Schedule D, Part II Did the organization maintain or loictions of works of art, historical treasures, or other similar assets? (**)** (**)**, "complete Schedule D, Part II Did the organization maintain or listed in Part X. line 21, for escrow or custodial account liability, serve as a custodian for amounts not lasted in Part X. or provide credit counseling, diet management, credit repair, or dath registration services? (**)* (**)**, "complete Schedule D, Part I V.** (**)	4			37	
similar amounts as defined in Rev. Proc. 96-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization roceive or hold a conservation easement, including asements to preserve open space, the environment, historical transfer accounts? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization 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 consisting, debt amagement, credit repairs, or debt negotiation services? If "Yes," complete Schedule D, Part III Did the organization directly or through a related organization, hold assets in donor-restricted endowments or in quasi-redowments? If "Yes," complete Schedule D, Part V. Did the organization assert to any of the following questions is "Yes," then complete Schedule D, Part V, III, III, X, or X, as a spilicable. Did the organization report an amount for investments other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments or program related 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 VIII X Did the organization report an amount for investments or 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 X III X X Did the organization report an amount for brievestments or the save are the complete Schedule D, Part X III X X Did the organization report an amount for brievestments or the save are the complete Schedule D, Part X III X X Did the organization report an amount for the intellities in Part X, line 15, that is 5% or		during the tax year? If "Yes," complete Schedule C, Part II	4	<u> X</u>	
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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 X X X X X X X X X	6				₹.
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## "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? "I "Yes," complete Schedule D, Part V 10	9				
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If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 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 c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11b X d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 11c X 11d X 11d X 11b X 11d X 11e SX 11d Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 11d IV X 11d	10		10		x
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a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V I 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 c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 16? If "Yes," complete Schedule D, Part X in Part X, line 18? If "Yes," complete Schedule D, Part X in Part X, line 18? If "Yes," complete Schedule D, Part X in Part X, line 18? If "Yes," complete Schedule D, Part X in Part X, line 19. If "Yes," complete Schedule D, Part X in Part X, line 29? If "Yes," complete Schedule D, Part X, line 19. If "Yes," complete Schedule P, Parts II and IV 14b	• •				
Part VI 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 c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 X e Did the organization report an amount for other assets in Part X, line 25% If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's isability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11t	а				
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20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		complete Schedule G, Part III	19		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II 21 X	20a		20a		X
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			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		

Form 990 (2023) CRAFT3
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	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	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			,,
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			,,
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			X
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		x
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		^
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	000		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	28c 29		X
30	, ,	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization required, terminate, or dissolve and cease operations: If "Yes," complete Scriedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32	, ,	32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
55	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			
J 1	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
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	X	L
Pai				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
		_	$\Omega\Omega\Omega$	/a a a - ·

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 96 filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2h X Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a 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). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 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? Х 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Х Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand Х **14a** Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 excess parachute payment(s) during the year? Х 15 If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17

If "Yes," complete Form 6069.

91-1662698 Page 6

Form 990 (2023) CRAFT3 91–1662698 Page
Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed OR			
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)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial	
	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			
	MARK STEVENSON, CFO - 888-231-2170			
	42 7TH STREET 100 ASTORIA OR 97103			

Form 990 (2023) CRAFT3 91-1662698 Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)	Jiga	11124		CO11 C)	ipci	oat	(D)	(E)	(F)
Name and title	Average	Position					Reportable	Reportable	Estimated	
	hours per	box	(do not check more than o box, unless person is both			s both	n an	compensation	compensation	amount of
	week	officer and a director/trustee)		from	from related	other				
	(list any	ector						the	organizations	compensation
	hours for	or di	99			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		ee ee	Suadu		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	dual tr	tional		nploy	st con	_	1099-1420)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organization o
(1) ADAM ZIMMERMAN	40.00	_	_	_						
CHIEF EXECUTIVE OFFICER	4.00			Х				301,065.	0.	24,311.
(2) BRUCE BROOKS	40.00									
PRESIDENT	4.00			Х				218,814.	0.	31,950.
(3) MICHAEL DICKERSON	40.00									
INNOVATION AND EVALUATION DIRECTOR	4.00			Х				208,803.	0.	14,551.
(4) RONALENE MONTEITH	40.00									
CHIEF CREDIT OFFICER, EVP	4.00			Х				175,002.	0.	30,103.
(5) MARK STEVENSON	40.00									
NEW MARKETS TAX CREDIT DIRECTOR, EVP	4.00			Х				163,438.	0.	36,225.
(6) JAMES GALBRAITH	40.00									
LEGAL COUNSEL, VP	0.00				Х			176,243.	0.	13,855.
(7) MARGARET WEILAND	40.00									
DEVELOPMENT DIRECTOR, SVP	0.00					Х		143,390.	0.	34,877.
(8) MICHAEL WU	40.00									
IT DIRECTOR, VP	0.00					X		149,033.	0.	27,562.
(9) SONYA LYNN	40.00									
CHIEF OPERATING OFFICER	4.00			Х				143,849.	0.	24,915.
(10) TURNER WASKOM	40.00							150 001		4 500
COMMERCIAL LENDING DIRECTOR, SVP	0.00				Х			158,081.	0.	4,693.
(11) TERESA PARRIETT	40.00					l		1 4 4 2 2 2		4 4 4 4 4 4
CONTROLLER, VP	0.00					Х		144,383.	0.	14,113.
(12) DESIREE MICHIELS	40.00	ł				l		105 101	•	15 000
CONSUMER LENDING DIRECTOR, SVP	0.00					Х		137,424.	0.	17,292.
(13) JANE REPENSEK	40.00							145 160	•	F 000
CHIEF FINANCIAL OFFICER, EVP	4.00			Х				147,160.	0.	5,283.
(14) SAIF HAKIM	40.00							140 100	•	2 524
COMMERCIAL LENDING TEAM MANAGER, VP	0.00					X		142,108.	0.	3,531.
(15) PAUL BENOIT	2.00	,,		.,					0	0
BOARD CHAIR	1.00	Х		Х				0.	0.	0.
(16) JO ANN KAUFFMAN	2.00	v						_	0	^
BOARD MEMBER	1.00	Х				-		0.	0.	0.
(17) RONALD GRZYWINSKI	2.00	v						0.	0.	^
BOARD MEMBER 332007 12-21-23	1.00	Х					<u> </u>	1 0.1	0.	0 . Form 990 (2023)

Form 990 (2023) CRAFT3 91-1662698 Page 8

Part VIII Section A Officers Directors T		.1			1 1 12 -				<u> </u>	OJO Fage O
Section A. Onicers, Directors, 1	I	loy	ees,			gnes	it Co		, ,	(E)
(A) Name and title	(B) Average hours per week	(do not check more than one					n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) ALEXA KELLY	2.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(19) ALAN OKAGAKI	2.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(20) STAN AMY	2.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(21) WALT KRUMBHOLZ	2.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(22) SHIVON BRITE BOARD MEMBER	1.00	Х						0.	0.	0.
		Λ						0.	0.	0.
(23) MARY HOUGHTON BOARD MEMBER	1.00	Х						0.	0.	0.
(24) LINDA NETTKOVEN	2.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(25) ANDREA CAUPAIN SANDERSON	2.00							-	-	-
BOARD MEMBER	1.00	Х						0.	0.	0.
(26) LEE WINSLETT	2.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
1b Subtotal								2,408,793.	0.	283,261.
c Total from continuation sheets to Par								0.	0.	0.
d Total (add lines 1b and 1c)								2,408,793.	0.	283,261.

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

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
B THOMPSON CONSTRUCTION DBA BAY SHORE CONST	CONSTRUCTION	
2103 HARRISON AVE NW #2774, OLYMPIA, WA 985	SERVICES	673,848.
JEREMY SMITHSON DBA PUGET SOUND SOLAR LLC	CONSTRUCTION	
805 RAINIER AVE S, SEATTLE, WA 98144	SERVICES	267,340.
SIMPLIFILE LC, 4844 NORTH 300 WEST, SUITE	ELECTRONIC DOCUMENT	
202, PROVO, UT 84604	SERVICES	254,021.
SCIDPDA BUS HOTEL COMMERICAL		
409 MAYNARD AVE S, SEATTLE, WA 98104	RENT	249,733.
B-ELITE DBA A-BELL EXCAVATING	CONSTRUCTION	
P.O. BOX 815, GRAHAM, WA 98338	SERVICES	168,418.
2 Total number of independent contractors (including but not limited to those listed		
\$100,000 of compensation from the organization 18		
		- 000

35

Form 990 (2023) CRAFT3
Part VIII Statement of Revenue

		Check if Schedule O	contains	a response	or note to any line	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
10.10	4.	Fadaratad campaigns		140					
발									
يق و									
ts, An		Fundraising events							
를									
Contributions, Gifts, Grants and Other Similar Amounts		Government grants (contr			18,701,265.				
ţţ	f	All other contributions, gifts,	grants, a	nd					
ig #		similar amounts not included	above	1f	652,760.				
할	g	Noncash contributions included in	lines 1a-1f	1g \$					
<u>ဒ</u> င	h	Total. Add lines 1a-1f				19,354,025.			
					Business Code				
ø	2 a	LENDING ACTIVITIES			522291	10,430,177.	10430177.		
Ş	b	PROGRAM CONSULTING			522291	509,912.	509,912.		
Ser	С						·		
E S	d								
gra Re	e								
Program Service Revenue		All other program service	rovonuo						
_						10,940,089.			
-+	<u>9</u>	Total. Add lines 2a-2f				10,310,003.			
	3	Investment income (included other similar amounts)				1,766,050.			1766050.
						1,700,030.			1700030.
	4 5	Income from investment of							
	3	Royalties		(i) Real	(ii) Personal				
	٠.	0		(i) i icai	(ii) i cisoriai				
		Gross rents	6a						
		Less: rental expenses	6b						
		Rental income or (loss)	6c						
		Net rental income or (loss)		\ Coourition	(ii) Othor				
	/ a	Gross amount from sales of	 `) Securities	(ii) Other				
		assets other than inventory	7a						
	b	Less: cost or other basis	1						
Revenue		and sales expenses	7b						
š		Gain or (loss)	7c						
ı,		Net gain or (loss)							
ther	8 a	Gross income from fundraisin	-	· .					
Ò		including \$		II.					
		contributions reported on	,	I .					
		Part IV, line 18			1				
		Less: direct expenses)				
		Net income or (loss) from							
	9 a	Gross income from gamin	-	I					
		Part IV, line 19		I					
	b	Less: direct expenses		9b)				
		Net income or (loss) from							
	10 a	Gross sales of inventory, I		I					
		and allowances 10a							
	b	Less: cost of goods sold		10	b				
	С	Net income or (loss) from	sales of	inventory .					
ű					Business Code				
e jo	11 a								
Miscellaneous Revenue	b								
Sek Sek	С								
Mis		All other revenue							
		Total. Add lines 11a-11d							
	12	Total revenue. See instruction	ns			32,060,164.	10940089.	0.	1766050.

Form 990 (2023) CRAFT3 Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respon			(6)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	33,334.	33,334.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	236,919.	236,919.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 070 240	1 520 515	205 172	F 4 4 F 1
	trustees, and key employees	1,878,340.	1,538,717.	285,172.	54,451.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	7,849,413.	6,448,626.	1,170,034.	230,753.
7	Other salaries and wages	7,049,413.	0,440,020.	1,170,034.	230,733.
8	Pension plan accruals and contributions (include	364,810.	291,034.	61 557	0 210
•	section 401(k) and 403(b) employer contributions)	928,327.	740,591.	64,557. 164,277.	9,219. 23,459.
9	Other employee benefits	813,648.	649,104.	143,983.	20,561.
10	Payroll taxes	013,040.	049,104.	143,903.	20,301.
11	Fees for services (nonemployees):				
	Management	16,110.	6,260.	8,825.	1 025
	Legal	130,068.	50,542.	71,253.	1,025. 8,273.
d	Accounting	130,000.	30,342.	71,255.	0,275
	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch 0.)	928,405.	455,120.	456,326.	16.959.
12	Advertising and promotion	49,275.	9,969.	39,218.	16,959. 88.
13	Office expenses	242,565.		159,766.	2,973.
14	Information technology	769,174.	512,783.	225,624.	30,767.
15	Royalties	•		·	•
16	Occupancy	258,773.	172,515.	75,907.	10,351.
17	Travel	249,568.	132,731.	105,049.	11,788.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	195,195.		155,357.	348.
20	Interest	2,588,472.	2,588,472.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	350,032.		102,676.	14,002.
23	Insurance	126,363.	84,242.	37,066.	5,055.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	LOAN COSTS	1,965,734.	1,965,734.		
b	TAXES & LICENSES	140,856.	93,904.	41,318.	5,634.
С	PROFESSIONAL DEVELOPMEN	72,993.	14,767.	58,096.	130.
d	SPONSORSHIPS	35,589.	7,200.	28,326.	63.
е	All other expenses	396,796.	34,614.	354,762.	7,420.
25	Total functional expenses. Add lines 1 through 24e	20,620,759.	16,419,848.	3,747,592.	453,319.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				000

91-1662698 Page **11**

CRAFT3

Form 990 (2023)
Part X Balance Sheet

Pai	<u>t X</u>	Balance Sheet					
		Check if Schedule O contains a response or no	te to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	2,654,762.	1	2,116,035.		
	2	Savings and temporary cash investments			10,010,298.	2	34,753,607.
	3	Pledges and grants receivable, net		1,078,178.	3	976,919.	
	4	Accounts receivable, net	1,149,037.	4	1,341,421.		
	5	Loans and other receivables from any current o					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the	se perso	ons		5	
	6	Loans and other receivables from other disquali					
		under section 4958(f)(1)), and persons described	d in sect	tion 4958(c)(3)(B)		6	
Ø	7	Notes and loans receivable, net			130,127,521.	7	149,807,124.
Assets	8	Inventories for sale or use				8	
As	9	B ::			385,872.	9	389,541.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,256,991.			
	b	Less: accumulated depreciation	10b	724,560.	1,096,508.	10c	532,431. 23,789,769.
	11	Investments - publicly traded securities			29,094,146.	11	23,789,769.
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments - program-related. See Part IV, line	967,853.	13	968,483.		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	5,546,106.	15	7,347,002.		
	16	Total assets. Add lines 1 through 15 (must equ	182,110,281.	16	222,022,332.		
	17	Accounts payable and accrued expenses	1,759,630.	17	3,681,550.		
	18	Grants payable			4 050 055	18	0.4.0.004
	19	Deferred revenue			1,053,377.	19	849,091.
	20	Tax-exempt bond liabilities			455 404	20	140 045
	21	Escrow or custodial account liability. Complete			157,404.	21	149,045.
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subs					
iab.		controlled entity or family member of any of the	-			22	
_	23	Secured mortgages and notes payable to unrela			107 011 560	23	124 064 071
	24	Unsecured notes and loans payable to unrelate			107,811,568.	24	134,064,871.
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	-	•	052 207		1,471,962.
	00	of Schedule D			952,397. 111,734,376.		140,216,519.
	26			• X	111,/34,3/0.	26	140,210,319.
S		Organizations that follow FASB ASC 958, che and complete lines 27, 28, 32, and 33.	eck nere				
nce	27	Net assets without donor restrictions			67,086,212.	27	67,131,662.
ala	28	Net assets with donor restrictions Net assets with donor restrictions			3,289,693.	28	14,674,151.
g P	20	Organizations that do not follow FASB ASC 9			3,203,033.	20	11,071,131.
Fun		and complete lines 29 through 33.	oo, che	ck liefe			
ō	29	Capital stock or trust principal, or current funds			29		
ets	30	Paid-in or capital surplus, or land, building, or ea				30	
Ass	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			70,375,905.	32	81,805,813.
Z	33	Total liabilities and net assets/fund balances			182,110,281.	33	222,022,332.
	-55	, otal habilitios and not associs/fully balances			,,		,,

Form **990** (2023)

Form 990 (2023) CRAFT3 91-1662698 Page **12**

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u> .			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	32,			
2	Total expenses (must equal Part IX, column (A), line 25)	2	20,			
3	Revenue less expenses. Subtract line 2 from line 1	3	11,			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	70,	375	5,90	<u>05.</u>
5	Net unrealized gains (losses) on investments	5		834	1,40	<u>60.</u>
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	_	843	3,9!	<u>57.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	81,	805	5,8:	<u>13.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			
			_		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	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b	Х	
	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 X 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?		L	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		L	За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	X	
			F	orm (9 90 ((2023)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CRAFT3 Employer identification number 91-1662698

Pa	art I	Reason for Public 0	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.				
The	organ	nization is not a private found	ation because it is: (F	For lines 1 through 12, cl	neck only	one box.)					
1		A church, convention of chi	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).				
2		A school described in secti	•				<i>,</i> , , , , , , , , , , , , , , , , , ,				
3	一	A hospital or a cooperative				(b)(1)(A)(ii	i).				
4	一	A medical research organization					•	the hospital's name.			
•		city, and state:		,				,			
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
•		section 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in									
		section 170(b)(1)(A)(vi). (Complete Part II.)									
8		A community trust describe		(1)(A)(vi). (Complete Part	t II.)						
9		An agricultural research org			•	ed in conju	inction with a land-grant	college			
		or university or a non-land-g				-		-			
		university:	, ,	,		, ,	,				
10		An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membership fees, and	d gross receipts from			
		activities related to its exem									
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the organization a	ifter June 30, 1975.			
		See section 509(a)(2). (Cor	mplete Part III.)								
11		An organization organized a	and operated exclusi	vely to test for public saf	ety. See	section 50)9(a)(4).				
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	ne function	ns of, or to carry out the	purposes of one or			
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section s	509(a)(2).	See section 509(a)(3). (Check the box on			
		lines 12a through 12d that	describes the type of	f supporting organization	and com	plete lines	12e, 12f, and 12g.				
а	ı 🗆	Type I. A supporting orga	anization operated, si	upervised, or controlled	by its supp	orted org	anization(s), typically by	giving			
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	f the direc	tors or trustees of the su	ipporting			
		organization. You must o	complete Part IV, Se	ections A and B.							
b	. [Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organization(s), by hav	ring			
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	ported			
		organization(s). You mus	t complete Part IV,	Sections A and C.							
c	;	Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functionally integrate	ed with,			
		its supported organization	n(s) (see instructions)). You must complete F	Part IV, Se	ctions A,	D, and E.				
c	ı 🗆	Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection w	rith its supported organiz	zation(s)			
		that is not functionally int	egrated. The organiz	ation generally must sati	isfy a distr	ibution rec	quirement and an attentiv	/eness			
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.				
e	. [Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type II, Type III				
		functionally integrated, or	Type III non-function	nally integrated supportir	ng organiz	ation.					
f	Ente	er the number of supported o	organizations								
		vide the following information			6) In the case	-tP P-I-I					
	((i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	inization listed ng document?	(v) Amount of monetary	(vi) Amount of other support (see instructions)			
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)			
	al										
100	ul						ı	1			

332021 12-21-23

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

Sec	Section A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	4918716.	19224522.	13992572.	6269398.	19354025.	63759233.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	4918716.	19224522.	13992572.	6269398.	19354025.	63759233.		
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)						6723478.		
6	Public support. Subtract line 5 from line 4.						57035755.		
Sec	tion B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
7	Amounts from line 4	4918716.	19224522.	13992572.	6269398.	19354025.	63759233.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	454,393.	399,564.	297,741.	561,076.	1766050.	3478824.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)								
11	Total support. Add lines 7 through 10						67238057.		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12			
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax y	ear as a section 5	01(c)(3)			
	organization, check this box and stop						<u></u>		
	tion C. Computation of Publi					г			
	Public support percentage for 2023 (I					14	84.83 %		
	Public support percentage from 2022					15	80.27 %		
16a	33 1/3% support test - 2023. If the c								
	stop here. The organization qualifies								
b	33 1/3% support test - 2022. If the contract the support test - 2021.								
47.	and stop here. The organization qual								
1/a	10% -facts-and-circumstances test	-							
	and if the organization meets the fact					_			
L	meets the facts-and-circumstances te	•	•			To and line 15 in			
α	10% -facts-and-circumstances test	-					10% Or		
	more, and if the organization meets the				-				
10	organization meets the facts-and-circu								
ΙŎ	Private foundation. If the organization	n dia not check a l	oox on line 13, 16a	a, 100, 17a, 011/b	, check this box a	nu see instructions	<u> </u>		

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support				ı		
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	, ,	` '	` '			,,
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) organizatio	on,
				•			
Se	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2023 (I			column (f))		15	%
	Public support percentage from 2022					16	%
Se	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20)23 (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
	a 33 1/3% support tests - 2023. If the						
-	more than 33 1/3%, check this box ar						
ŀ	33 1/3% support tests - 2022. If the						nd
-	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

Schedule A (Form 990) 2023 CRAFT3 91-1662698 Page 4

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
L	1		
L	2		
L	3a		
H	3b		
	_		
H	3c		
	_		
-	4a		
	4 b		
H	4b		
	4c		
	70		
ı	5a		
Г	5b		
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	6		
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	8		
	<u> </u>		
	9a		
	9b		
	ອນ		
	9с		
	30		
	10a		
	.ou		
	10b		
	A (Farm	~ 000	0000

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

	edule A (Form 990) 2023 CRAFT3		9	91-1662698 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti			
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	l Type III supporting orga	anization (see

Schedule A (Form 990) 2023

instructions).

Fai	LV	Type III Non-Functionally integrated 509(aj(s) supporting orga	ilizations (continu	ıed)	
Secti	on D -	Distributions		•		Current Year
1	Amou	ints paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amou	ints paid to perform activity that directly furthers exemp	t purposes of supported			
	organ	izations, in excess of income from activity			2	
3	Admii	nistrative expenses paid to accomplish exempt purpose	s of supported organizations	3	3	
4	Amou	ints paid to acquire exempt-use assets		4		
5	Qualit	fied set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6		distributions (describe in Part VI). See instructions.			6	
7		annual distributions. Add lines 1 through 6.			7	
8	Distril	outions to attentive supported organizations to which the	e organization is responsive			
	(provi	de details in Part VI). See instructions.			8	
9		outable amount for 2023 from Section C, line 6			9	
10	Line 8	B amount divided by line 9 amount			10	
Secti		Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distril	outable amount for 2023 from Section C, line 6				
2	Unde	rdistributions, if any, for years prior to 2023 (reason-				
	able o	cause required - explain in Part VI). See instructions.				
3	Exces	ss distributions carryover, if any, to 2023				
a	From	2018				
b	From	2019				
С	From	2020				
d	From	2021				
е	From	2022				
f	Total	of lines 3a through 3e				
g	Applie	ed to underdistributions of prior years				
h	Applie	ed to 2023 distributable amount				
i_	Carry	over from 2018 not applied (see instructions)				
<u>j</u>	Rema	inder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distril	outions for 2023 from Section D,				
	line 7	\$				
a	Applie	ed to underdistributions of prior years				
b	Applie	ed to 2023 distributable amount				
С	Rema	inder. Subtract lines 4a and 4b from line 4.				
5	Rema	ining underdistributions for years prior to 2023, if				
	any. S	Subtract lines 3g and 4a from line 2. For result greater				
		zero, explain in Part VI. See instructions.				
6		ining underdistributions for 2023. Subtract lines 3h				
	and 4	b from line 1. For result greater than zero, explain in				
		/I. See instructions.				
7		ss distributions carryover to 2024. Add lines 3j				
	and 4					
8		down of line 7:				
		ss from 2019				
b	Exces	ss from 2020				

Schedule A (Form 990) 2023

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

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Employer identification number

CRAFT3 91-1662698 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Name of organization Employer identification number

CRAFT3	3		91-1662698
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 10,000,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 3,664,539	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$3,480,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$1,300,992	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

CRAFT3 91-1662698

Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	(b) Description of noncash property given (b) Description of noncash property given	Description of noncash property given Column

Name of organization **Employer identification number** 91-1662698 CRAFT3 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

SCHEDULE C

(Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

• Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization **Employer identification number** 91-1662698 CRAFT3 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ______\$ ____ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 4a Was a correction made? Yes Nο b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

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

Calendar year (or fiscal year beginning in)

(a) 2020
(b) 2021
(c) 2022
(d) 2023
(e) Total

2a Lobbying nontaxable amount
1,000,000.
879,152.
949,640.
1,000,000.
3,828,792.
b Lobbying ceiling amount
(150% of line 2a, column(e))

5,743,188.

c Total lobbying expenditures
79,432.
56,400.
135,832.
d Grassroots nontaxable amount
(150% of line 2d, column (e))

6 Grassroots ceiling amount
(150% of line 2d, column (e))

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023 CRAFT3 91-16626 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b	,
f the lobbying activity.	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 501(c)(5), or sec	tion	
			Yes	N
Were substantially all (90% or more) dues received nondeductible by members?		1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_		
ב בייס ווים סוקמווע במוסדו make סווץ ווידוסטאפ וסטטץוווץ experiolitures סו קב,ססט סו וופאז?		2		
Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "	prior year? 501(c)(5	3), or sec		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."	prior year? 1 501(c)(5 No" OR (3), or sec b) Part I		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." 1 Dues, assessments and similar amounts from members	prior year? n 501(c)(5 No" OR (3), or sec b) Part I		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." 1 Dues, assessments and similar amounts from members	prior year? n 501(c)(5 No" OR (3), or sec b) Part I		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year? n 501(c)(5 No" OR (), or sec b) Part I		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year	prior year? n 501(c)(5 No" OR (i), or sec b) Part I		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year	p prior year? n 501(c)(5 No" OR (i	3), or sec b) Part I		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	prior year? n 501(c)(5 No" OR (i	3), or sec b) Part I		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year	p prior year? n 501(c)(5 No" OR (3), or sec b) Part I		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	p prior year? n 501(c)(5 No" OR (3), or sec b) Part I		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	e prior year? n 501(c)(5 No" OR (l	3), or sec b) Part I		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the last III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyperiod expenditures next year?	e prior year? n 501(c)(5 No" OR (l	3), or sec b) Part I 1 2a 2b 2c 3		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditures next year? 5 Taxable amount of lobbying and political expenditures. See instructions	e prior year? n 501(c)(5 No" OR (l	3), or sec b) Part I 2a 2b 2c 3		3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedages the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditures next year? 5 Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information	p prior year? n 501(c)(5 No" OR (3), or sec b) Part I 2a 2b 2c 3	II-A, line	3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexient expenditures next year? 5 Taxable amount of lobbying and political expenditures. See instructions 2 Part IV Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group love)	p prior year? n 501(c)(5 No" OR (3), or sec b) Part I 2a 2b 2c 3	II-A, line	3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditures next year? 5 Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group line)	p prior year? n 501(c)(5 No" OR (3), or sec b) Part I 2a 2b 2c 3	II-A, line	3, is
Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polyperioditures next year? Taxable amount of lobbying and political expenditures. See instructions Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group love)	p prior year? n 501(c)(5 No" OR (3), or sec b) Part I 2a 2b 2c 3	II-A, line	3, is
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Employer identification number

91-1662698

Name of the organization

CRAFT3

Pa	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's e	xclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad	visors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the organization	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (for example, recreati	on or education) Preservation of	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic struc		
d	Number of conservation easements included on line 2c acquir	ed after July 25, 2006, and not	
	on a historic structure listed in the National Register	•	2d
3	Number of conservation easements modified, transferred, rele		
	year		
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it h	nolds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing con	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and enforcing conserva	ation easements during the year
8	Does each conservation easement reported on line 2d above s		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expense	e statement and
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial statem	ents that describes the
D -	organization's accounting for conservation easements.	A de Historia de la Transacción de Contraction de la Contraction d	II O''I A I.
Pa	Till Organizations Maintaining Collections of		tner Similar Assets.
	Complete if the organization answered "Yes" on Form S		
1a	If the organization elected, as permitted under FASB ASC 958		
	of art, historical treasures, or other similar assets held for publ	,	•
	service, provide in Part XIII the text of the footnote to its finance		
b	If the organization elected, as permitted under FASB ASC 958	•	
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical treas	sures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB AS		
а	Revenue included on Form 990, Part VIII, line 1		
h	Assets included in Form 990, Part X		\$

Sche	dule D (Form 990) 2023					91-	166	2698	Pa	age 2
	t III Organizations Maintaining Co	llections of Art, His	torical Tre	easures, o	r Other S					.90
3	Using the organization's acquisition, accession									
	collection items (check all that apply).									
а	Public exhibition	d	Loan or exc	hange progra	am					
b	Scholarly research	е 🗀	Other							
С	Preservation for future generations									
4	Provide a description of the organization's colle	ections and explain how t	hey further th	ne organizatio	n's exemp	t purpose in F	art XII	il.		
5	During the year, did the organization solicit or i	eceive donations of art, h	istorical treas	sures, or othe	er similar as	ssets				
	to be sold to raise funds rather than to be main							Yes		No
Par	t IV Escrow and Custodial Arrange		e organizatior	n answered "`	Yes" on Fo	rm 990, Part I	V, line	9, or		
	reported an amount on Form 990, Part									
1a	Is the organization an agent, trustee, custodiar	•								,
	on Form 990, Part X?						Ш,	Yes	X	No
b	If "Yes," explain the arrangement in Part XIII ar	d complete the following	table:							
							A	Amount		
	Beginning balance					1c				
	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f	77		_	1
	Did the organization include an amount on For	· · · · ·			•	?	X,	Yes		│ No
Par	If "Yes," explain the arrangement in Part XIII. C							·	X	<u></u>
i ui			Prior year	(c) Two year) Three years b	ack (e) Four ye	ears	hack
10		(a) Guiterit year (b)	i iloi yeai	(C) TWO you	3 Daok (C	ij Tilioo yoars b	uon (c) rour y	ours	Juon
	Beginning of year balance									
	Contributions Net investment earnings, gains, and losses									
C C	Grants or scholarships									
	Other expenditures for facilities									
•										
f	Administrative expenses									
g g	End of year balance									
2	Provide the estimated percentage of the currer	nt vear end halance (line 1	a column (a)) held as:						
	Board designated or quasi-endowment	,	g, 001011111 (a	jj ricia ao.						
b	Permanent endowment	,°								
c	Term endowment %									
_	The percentages on lines 2a, 2b, and 2c should									
За	Are there endowment funds not in the possess	•	at are held ar	nd administer	ed for the					
	organization by:	3						Y	'es	No
							ſ	3a(i)		
								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization							3b		
4	Describe in Part XIII the intended uses of the o									
Par	t VI Land, Buildings, and Equipme		<u>-</u>							
	Complete if the organization answered	'Yes" on Form 990, Part I	V, line 11a. S	See Form 990	, Part X, lin	ie 10.				
	Description of property	(a) Cost or other		t or other		umulated	(c	d) Book v	value)
		basis (investment)	basis	(other)	depre	eciation				
1a	Land									

650,966. 404,540.

201,485.

Schedule D (Form 990) 2023

310,172.

171,325.

532,431.

50,934.

340,794.

353,606.

30,160.

e Other

c Leasehold improvements

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

Schedule D (Form 990) 2023 CRAFT3		91	-1662698	Page
Part VII Investments - Other Securities				J
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market va	alue
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))				
Part VIII Investments - Program Related.	1			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market va	alue
(1)	,,			
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))				
Part IX Other Assets	1			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.		
	Description	, ,	(b) Book va	lue
(1)	·		. ,	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, line 15, co	J (R))			
Part X Other Liabilities	או. (ט)		I	
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 va	lue
(1) Federal income taxes			,=, = 55 Va	•
(2) LEASE LIABILITIES			1,297,	921
(3) DEFERRED COMPENSATION LIA	BILTTIES		174,	
(4)			1,11,	<u> </u>
(5)				

1,471,962. Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 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

(6) (7) (8) (9)

Schedule D (Form 990) 2023 CRAFT3		⊃age 4
Part XI Reconciliation of Revenue per Audited Finan	ncial Statements With Revenue per Return	
Complete if the organization answered "Yes" on Form 990,), Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial state	ements 1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	<u>2</u> :	
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)	2d	
3 Subtract line 2e from line 1		
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1	
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Par Part XII Reconciliation of Expenses per Audited Final	art I. line 12.) 5	
Complete if the organization answered "Yes" on Form 990,		
1 Total expenses and losses per audited financial statements		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
	2e 3	
3 Subtract line 2e from line 14 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
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, P.	Part I line 18) 5	
Part XIII Supplemental Information	2art I, Ilne 18.)	
	nes 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		
PART IV, LINE 2B:		
THE ESCROW PAYABLE ACCOUNT IS A PASS	5-THROUGH FOR BORROWERS FOR WHICH	
CRAFT3 COLLECTS INSURANCE OR TAX FUN	IDS SIMULTANEOUSLY WITH THEIR MONTHLY	
LOAN PAYMENTS AND THEN REMITS THESE	FUNDS FOR THEIR TAXES OR INSURANCE.	
DADE V ITHE 2.		
PART X, LINE 2:		
CDAEMS TO EVENDE EDOM PEDEDAL INCOME	E TAXES UNDER SECTION 501(C)(3) OF THE	
CRAFTS IS EXEMPT FROM PEDERAL INCOME	TAKES UNDER SECTION SUITCH (S) OF THE	<u> </u>
INTERNAL REVENUE CODE. CRAFT3 IS SUB-	ATECT TO CERTAIN BUSINESS AND	
INTERNAL REVENUE CODE: CRAFTS TO DOD	OLCI TO CHRIMIN DODINEDO AND	
OCCUPATION TAXES, WHICH APPLY EQUALL	Y TO FOR-PROFIT AND NONPROFIT	
Occidental designation of the second	11 10 1011 110111 1110 11011110111	
BUSINESSES, IMPOSED BY STATE AND LOCA	CAL TAXING AUTHORITIES. THE TAXES ARE	
ASSESSED ON A PERCENTAGE OF CRAFT3'S	REVENUES. CRAFT3 HAD NO UNCERTAIN TA	X
POSITIONS AS OF DECEMBER 31, 2023 AND	ND 2022. UNRELATED BUSINESS INCOME TAX	Ξ,

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

CRAFT3							91-1662698
Part I General Information on Grants a	nd Assistance						
Does the organization maintain records to criteria used to award the grants or assis Describe in Part IV the organization's properties. Grants and Other Assistance to recipient that received more than Statements.	stance? ocedures for moni Domestic Organi	toring the use of grant	funds in the United	States. Complete if the organic			X Yes No
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
COMMUNITY HOUSING FUND 3700 SW MURRAY BLVD 2200 BEAVERTON, OR 97005	27-0049012	501(C)(3)	22,000.	0.			PROGRAM SUPPORT
NETWORK FOR OREGON AFFORDABLE HOUSING - 12047 SW BROADWAY - PORTLAND, OR 97205	93-1037330	501(C)(3)	11,334.	0.			PROGRAM SUPPORT
2 Enter total number of section 501(c)(3) a3 Enter total number of other organizations	•	•					

Schedule I (Form 990) 2023 CRAFT3 91-1662698

Part III Grants and Other Assistance to Domestic Individual Part III can be duplicated if additional space is needed.		organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
DEQ OREGON WILDLIFE RECOVERY	30	206,072.	0.		
DEQ ARPA FINANCIAL AID	8	30,847.	0.		
Part IV Supplemental Information. Provide the information re	equired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.	
PART I, LINE 2:					
CRAFT3 ISSUES FUNDS TO ORGANIZATION	ONS TO BE	USED AT TH	EIR OWN DI	SCRETION.	
CRAFT3 REVIEWS INVOICES AND SUPPOR	RTING DOCU	MENTATION	PROVIDED B	Y GRANTEES	
PRIOR TO THE DISBURSEMENT OF GRANT					

Page 2

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

CRAFT3

Part I Questions Regarding Compensation

Employer identification number
91-1662698

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

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

Schedule J (Form 990) 2023

Schedule J (Form 990) 2023 CRAFT3 91-1662698 Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MISC compensation	and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ADAM ZIMMERMAN	(i)	278,783.	21,842.	440.	16,416.	7,895.	325,376.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) BRUCE BROOKS	(i)	202,739.	15,635.	440.	14,841.	17,109.	250,764.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MICHAEL DICKERSON	(i)	194,443.	14,000.	360.	12,447.	2,104.	223,354.	0.
INNOVATION AND EVALUATION DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) RONALENE MONTEITH	(i)	161,893.	12,669.	440.	12,445.	17,658.	205,105.	0.
CHIEF CREDIT OFFICER, EVP	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MARK STEVENSON	(i)	150,023.	12,975.	440.	11,706.	24,519.	199,663.	0.
NEW MARKETS TAX CREDIT DIRECTOR, EVP	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JAMES GALBRAITH	(i)	166,384.	9,419.	440.	5,698.	8,157.	190,098.	0.
LEGAL COUNSEL, VP	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MARGARET WEILAND	(i)	134,471.	8,325.	594.	8,635.	26,242.	178,267.	0.
DEVELOPMENT DIRECTOR, SVP	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) MICHAEL WU	(i)	135,013.	11,288.	2,732.	10,078.	17,484.	176,595.	0.
IT DIRECTOR, VP	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) SONYA LYNN	(i)	133,129.	10,280.	440.	6,751.	18,164.	168,764.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) TURNER WASKOM	(i)	146,723.	10,698.	660.	3,600.	1,093.	162,774.	0.
COMMERCIAL LENDING DIRECTOR, SVP	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) TERESA PARRIETT	(i)	131,900.	10,585.	1,898.	5,246.	8,867.	158,496.	0.
CONTROLLER, VP	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) DESIREE MICHIELS	(i)	127,323.	9,661.	440.	6,768.	10,524.	154,716.	0.
CONSUMER LENDING DIRECTOR, SVP	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) JANE REPENSEK	(i)	146,800.	0.	360.	0.	5,283.	152,443.	0.
CHIEF FINANCIAL OFFICER, EVP	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023	CRAFT3	91-1662698	Page 3
Part III Supplemental Information			

Part III Supplemental information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 7:
THE ORGANIZATION HAS A DISCRETIONARY BONUSING PROGRAM BASED ON THE OVERALL
FINANCIAL PERFORMANCE OF THE ORGANIZATION AND INDIVIDUAL PERFORMANCE. THIS
BONUSING PROGRAM IS OFFERED TO ALL EMPLOYEES AND OFFICERS EXCEPT THE
PRESIDENT AND CEO. THE CEO'S BONUS IS AT THE SOLE DISCRETION OF THE BOARD.
THE PRESIDENT'S BONUS IS MANAGED BY THE CEO. BONUSES WERE AWARDED FOR
EMPLOYEES, OFFICERS AND THE CEO IN 2023.

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

CRAFT3

Employer identification number 91-1662698

FORM 990, PART VI, SECTION A, LINE 4:

CRAFT3 AMENDED ITS BYLAWS TO UPDATE THE LANGUAGE DESCRIBING THE AUDIT

COMMITTEE'S APPOINTMENT AND RESPONSIBILITIES.

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

THE FORM 990 IS PREPARED BY A PUBLIC ACCOUNTING FIRM WITH ASSISTANCE FROM
THE CONTROLLER IN PROVIDING DATA. THE RETURN IS THEN REVIEWED BY CRAFT3'S

CFO AND CONTROLLER AND PROVIDED TO THE BOARD TO REVIEW BEFORE FILING WITH
THE INTERNAL REVENUE SERVICE.

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

A CONFLICT OF INTEREST IS A TRANSACTION OR ARRANGEMENT THAT MIGHT BENEFIT
THE PRIVATE INTEREST OF AN OFFICER, DIRECTOR, COMMITTEE MEMBER, STAFF, OR
CONSULTANTS OF THE ORGANIZATION OR MIGHT RESULT IN A POSSIBLE EXCESS
BENEFIT TRANSACTION. IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF
INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL
INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE
DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS
CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER DISCLOSURE OF
THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION
WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE GOVERNING BOARD OR
COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS
DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL
DECIDE IF A CONFLICT OF INTEREST EXISTS.

Schedule O (Form 990) 2023 Page 2

Name of the organization

CRAFT3

Employer identification number 91-1662698

COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST. THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT. IF THE GOVERNING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE MEMBER'S RESPONSE AND AFTER MAKING FURTHER INVESTIGATION AS WARRANTED BY THE CIRCUMSTANCES, THE GOVERNING BOARD OR COMMITTEE DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION. ALL CRAFT3 EMPLOYEES AND DIRECTORS AGREE TO ABIDE BY THE CONFLICT OF INTEREST POLICY RULES BY READING THE EMPLOYEE POLICY HANDBOOK UPON HIRE. ALL EMPLOYEES AND DIRECTORS ARE REQUIRED TO SIGN THE POLICY ANNUALLY.

<u>Schedule O (Form 990) 2023</u>

Name of the organization **Employer identification number** 91-1662698 CRAFT3 FORM 990, PART VI, SECTION B, LINE 15: CRAFT3 UTILIZES A THIRD-PARTY FINANCIAL INDUSTRY SURVEY TO EVALUATE WAGES FOR EACH POSITION. THIS INCLUDES MARKET ANALYSIS, JOB DESCRIPTION ANALYSIS, ETC. THESE ARE RE-EVALUATED ANNUALLY. ADDITIONALLY, ANNUAL PERFORMANCE PLANS ARE COMPLETED BY ALL EMPLOYEES, REVIEWED AND ACCEPTED BY THEIR SUPERVISORS. ANNUAL BONUSES (IF ANY) ARE BASED OFF OF THE RESULTS OF THE INDIVIDUAL'S PERFORMANCE PLAN AS WELL AS COMPANY PERFORMANCE OVERALL. PAY INCREASES ARE DETERMINED BY SUPERVISORS AND THEN APPROVED OR DENIED/MODIFIED BY THE CEO. FOR THE CEO, PAY INCREASES AND BONUSES ARE APPROVED BY THE BOARD AND DOCUMENTED CONTEMPORANEOUSLY IN THE BOARD MINUTES. THIS COMPENSATION REVIEW AND APPROVAL PROCESS IS COMPLETED ANNUALLY. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST. ANNUAL AUDITED FINANCIAL STATEMENTS ARE ACCESSIBLE ON THE COMPANY WEBSITE: WWW.CRAFT3.ORG FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: IMPACT ON NET ASSETS DUE TO ADOPTION OF ASC 326 -843,957.

SCHEDULE R (Form 990)

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

91-1662698

	(b)	(c)	(d)	(e)	(f)		
Name, address, and EIN (if applicable)	Primary activity Legal domicile (s			l l	I	I .		ı
of disregarded entity		foreign country)				entity		
CRAFT3 OTHER OWNED WA PROPERTIES, LLC -								
87-2102127, 42 7TH STREET #100, ASTORIA, OR								
97103	LENDING	WASHINGTON		-595.	905. CRAF	T3		
CRAFT3 OTHER OWNED OR PROPERTIES, LLC -								
92-2520557, 42 7TH STREET #100, ASTORIA, OR								
97103	LENDING	OREGON		0.	0.CRAF	T3		
Part II Identification of Related Tax-Exempt Organizations during the tax year.	zations. Complete if the organizat	ion answered "Yes" on Form 990), Part IV, line 34,	pecause it had one	e or more relate	ed tax-exemp	ot	
(a)	(b)	(c)	(d)	(e)	(f))	(g Section 5	<u></u>
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct cor	ntrolling	Section 5 contr	
of related organization		foreign country)	section	status (if section	enti enti	ty	enti	
				501(c)(3))			Yes	No
CRAFT3 FUTURE FUND - 45-5384846								
42 7TH ST, SUITE 100								
ASTORIA, OR 97103	LENDING	WASHINGTON	501(C)(3)	LINE 12A, I	CRAFT3		Х	

CRAFT3

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	Disproportion allocations		Code V-UBI amount in box 20 of Schedule	managin partner?	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	<u> </u>
CRAFT3 INVESTMENT II, LLC - 20-1179589, 42 7TH STREET,	-										
#100, ASTORIA, OR 97103	LENDING	WA	CRAFT3	RELATED	0.	0.		X	N/A	X	99.99%
CRAFT3 INVESTMENT X, LLC -											
81-3835904, 409 MAYNARD											
AVENUE S, SUITE 200, SEATTLE,											
WA 98104	LENDING	WA	N/A	RELATED	18.	1,178.		X	N/A	X	.01%
CRAFT3 INVESTMENT XI, LLC -											
82-1550360, 409 MAYNARD											
AVENUE S, SUITE 200, SEATTLE,											
WA 98104	LENDING	WA	N/A	RELATED	5.	888.		X	N/A	X	.01%
CRAFT3 INVESTMENT XII, LLC -											
82-1570912, 409 MAYNARD											
AVENUE S, SUITE 200, SEATTLE,											
WA 98104	LENDING	WA	N/A	RELATED	6.	983.		X	N/A	X	.01%

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

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled tity?
WINDFARM INVESTMENTS - 27-1496444									
42 7TH STREET, #100									
ASTORIA, OR 97103	LENDING	WA	CRAFT3	C CORP	0.	632.	100%	X	
CRAFT3 INVESTMENT XIII, LLC - 82-1583020									
409 MAYNARD AVENUE S, SUITE 200									
SEATTLE, WA 98104	LENDING	WA	N/A	C CORP	6.	1,200.	.01%		X

Schedule R (Form 990) CRAFT3 91-1662698

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

(a)	(b)	(c)	(d)	(e)	(f)	(g)	1	h)	(i)	(j)	(k)
	Primary activity	Legal domicile	Direct controlling			Share of	I		Code V-UBI	General of	Percentage
Name, address, and EIN of related organization	1 milary detivity	(state or	entity	(related, unrelated,	income	end-of-year	Disproportionate allocations		amount in box	managin	Percentage ownership
		foreign country)		Predominant income (related, unrelated, excluded from tax under sections 512-514)		assets	Yes	No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Yes No	
CRAFT3 INVESTMENT XIV, LLC -											
85-0538526, 409 MAYNARD											
AVENUE S, SUITE 200, SEATTLE,											
WA 98104	LENDING	WA	N/A	RELATED	10.	690.		X	N/A	X	.01%
	_										
	_										
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Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Page 3

Yes No

Part V	Transactions With Related Org	anizations.	Complete if the organization ar	nswered "Yes" on Form 990	. Part IV. line 34, 35b, or 36.

1	During the tax year, did the organization engage in any of the following transactions with one or	r more re	lated organizations listed i	n Parts II-IV?						
а	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity									
b	Gift, grant, or capital contribution to related organization(s)									
	c Gift, grant, or capital contribution from related organization(s)									
d	d Loans or loan guarantees to or for related organization(s)									
е	e Loans or loan guarantees by related organization(s)									
f	Dividends from related organization(s)				1f		X			
g	g Sale of assets to related organization(s)									
h	Purchase of assets from related organization(s)				1h		X			
i	Exchange of assets with related organization(s)				1i		X			
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X			
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X			
- 1	Performance of services or membership or fundraising solicitations for related organization(s)				11	X				
m	n Performance of services or membership or fundraising solicitations by related organization(s)				1m		X			
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	X				
0	Sharing of paid employees with related organization(s)				10	X				
р	Reimbursement paid to related organization(s) for expenses				1p		X			
q	Reimbursement paid by related organization(s) for expenses				1q	X				
r	Other transfer of cash or property to related organization(s)				1r		X			
s	Other transfer of cash or property from related organization(s)				1s		X			
2	If the answer to any of the above is "Yes," see the instructions for information on who must cor	mplete th	is line, including covered re	elationships and transaction thresholds.						
	(a) (b) Name of related organization Transaction type (a)	ction	(c) Amount involved	(d) Method of determining amount invo	olved					
1)										
٥١										
<u> </u>										
2)										
3)										
4)										
")										
5)										
-,										
6)										
	63 09-28-23		•	Schedule F	R (Forr	n 990	2023			

Schedule R (Form 990) 2023 CRAFT3 91-1662698 Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	General manage partner	(k) Percentage ownership
	_								000) 0000

Form **8868**

(Rev. January 2024)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

File a separate application for each return.

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

Electror	nic filing (e-file). You can electronically file Form 8868 to	request up	to a 6-month extension of time to f	ile any of	the forms				
listed be	low except for Form 8870, Information Return for Transfe	rs Associa	ted With Certain Personal Benefit C	ontracts.	An extension	1			
request	for Form 8870 must be sent to the IRS in a paper format (see instrud	ctions). For more details on the elect	ronic filing	g of Form				
8868, vi	sit www.irs.gov/e-file-providers/e-file-for-charities-and-non-p	orofits.							
Caution:	If you are going to make an electronic funds withdrawal (direct deb	it) with this Form 8868, see Form 84	53-TE and	d Form 8879	TE for payment			
instructi	ons.								
All corpo	orations required to file an income tax return other than Fo	orm 990-T	(including 1120-C filers), partnership	s, REMIC	s, and trusts				
must us	e Form 7004 to request an extension of time to file income	e tax returi	ns.						
Part I - I	dentification								
Type or	Name of exempt organization, employer, or other filer	, see instru	ictions.	Taxpaye	r identificatio	on number (TIN)			
Print									
File by the	CRAFT3				91-16	62698			
due date fo		Number, street, and room or suite no. If a P.O. box, see instructions.							
filing your return. See	42 7TH STREET, 100								
instructions	5.17, 15.11.1 5.	reign addr	ess, see instructions.						
	ASTORIA, OR 97103								
Enter the	e Return Code for the return that this application is for (file	e a separat	e application for each return)			<u> 01</u>			
Applicat	tion Is For	Return	Application Is For			Return			
		Code				Code			
Form 99	0 or Form 990-EZ	01	Form 4720 (other than individual)	09					
Form 47	20 (individual)	03	Form 5227	10					
Form 99	0-PF	04	Form 6069	11					
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12					
Form 99	0-T (trust other than above)	06	Form 5330 (individual)	13					
Form 99	0-T (corporation)	07	Form 5330 (other than individual)	14					
Form 10	41-A	08							
After y	ou enter your Return Code, complete either Part II or Part	t III. Part III	, including signature, is applicable o	nly for an	extension of	İ			
time to f	ile Form 5330.								
If this	application is for an extension of time to file Form 5330, y	ou must ei	nter the following information.						
Pl	an Name								
Pl	an Number		<u></u>						
	an Year Ending (MM/DD/YYYY)								
	Automatic Extension of Time To File for Exempt Organ		ee instructions)						
The b	ooks are in the care of MARK STEVENSON, C		GEODES OF 05103						
	42 7TH STREET, 10)	•						
	hone No. 888-231-2170		Fax No.						
	organization does not have an office or place of business								
	is for a Group Return, enter the organization's four-digit (_							
box	. If it is for part of the group, check this box		ch a list with the names and TINs of						
	equest an automatic 6-month extension of time until			e the exen	npt organizat	tion return for			
	e organization named above. The extension is for the orga	anization's	return for:						
<u>X</u>	=, 								
	tax year beginning	, 20 _	, and ending			, 20			
2 If t	the tax year entered in line 1 is for less than 12 months, cl	heck reaso	n: Initial return	Final retur	'n				
	Change in accounting period				1				
	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter the	tentative tax, less			0			
_	y nonrefundable credits. See instructions.			3a	\$	0.			
	this application is for Forms 990-PF, 990-T, 4720, or 6069	•		3b	\$	0.			
	estimated tax payments made. Include any prior year overpayment allowed as a credit.					<u> </u>			
	lance due. Subtract line 3b from line 3a. Include your pa	•		30	\$	0.			