Form **99**

Т

EXTENDED TO NOVEMBER 15, 2023 Return of Organization Exempt From Income Tax

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



Depa Inter	artment nal Rev	of the Treasury enue Service Go to www.irs.gov/Form990 for instructions and the	-	•	Open to Public Inspection
AI	For th	ne 2022 calendar year, or tax year beginning and en	ding		
	Check if applicat			D Employer identificati	on number
	Addr chan	GRACE SMITH HOUSE, INC.			
	 	e		14-1626657	
	Initia retur		om/suite	E Telephone number	
	Final	PO BOX 5205	on, ou to	845-452-71	55
	termi			G Gross receipts \$	2,927,636.
	Amer	nded DOILCHKEEDGTE NY 12602		H(a) Is this a group retur	
	Appl tion	^{ica-} F Name and address of principal officer: CHRISTINA KEARNEY			Yes X No
	pend	Ing SAME AS C ABOVE		H(b) Are all subordinates includ	
1	Tax-e>	xempt status: 🚺 501(c)(3) 📃 501(c) () (insert no.) 📃 4947(a)(1) or [527	If "No," attach a list	. See instructions
J١	Webs	ite: WWW.GRACESMITHHOUSE.ORG		H(c) Group exemption n	umber
Κ	Form o	of organization; 🚺 Corporation 📄 Trust 📄 Association 📄 Other	L Year c	of formation: 1981 M St	tate of legal domicile: NY
Pa	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities: PROVID	DE COL	MPREHENSIVE S	ERVICES
Activities & Governance		TO VICTIMS OF DOMESTIC VIOLENCE.			
rna	2	Check this box if the organization discontinued its operations or disposed	l of more t	than 25% of its net assets	
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	17
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			17
8 8	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		5	45
/itie	6	Total number of volunteers (estimate if necessary)		6	31
cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_ <	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		0.
				Prior Year	Current Year
ø	8	Contributions and grants (Part VIII, line 1h)		2,756,176.	2,518,389.
Revenue	9	Program service revenue (Part VIII, line 2g)		187,632.	205,446.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		94,628.	120,283.
£	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		46,199.	12,679.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,084,635.	2,856,797.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		91,939.	80,410.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Ś	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,585,384.	1,794,390.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ed	. b	Total fundraising expenses (Part IX, column (D), line 25) 128,049).		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		714,529.	633,459.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,391,852.	2,508,259.
	19	Revenue less expenses. Subtract line 18 from line 12		692,783.	348,538.
or or			Beg	inning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		7,343,051.	7,097,263.
ASS	21	Total liabilities (Part X, line 26)		234,522.	228,554.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20		7,108,529.	6,868,709.
Pa	art II	Signature Block			
Und	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedules an	nd statemei	nts, and to the best of my kno	owledge and belief, it is

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer		Date	
-	CHRISTINA KEARNEY, TREASU	RER		
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date Check PTIN	
Paid	GARRETT M. HIGGINS	GARRETT M. HIGGINS	11/09/23 self-employed P005	543209
Preparer	Firm's name PKF O'CONNOR DAVI	ES ADVISORY, LLC	Firm's EIN 87-3231	.666
Use Only	Firm's address 32 FOSTERTOWN ROA	D		
	NEWBURGH, NY 1255	0	Phone no. 845 – 565 –	5400
May the IF	RS discuss this return with the preparer shown abo	ove? See instructions	Χ.Υ	'es 🗌 No
	1114 Est Demonstrate Device the Ast Not	· · · · · · · · · · · · · · · · · · ·		000 (0000)

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2022)

_	rt III Statement of Program Service Accomplishments	14-1626657	Page
гai			X
	Check if Schedule O contains a response or note to any line in this Part III		🔼
1	Briefly describe the organization's mission:		
	SEE SCHEDULE O		
Par 1 2 3 4 4a 4b 4c 4d			
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	XN
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Ves	XN
•	If "Yes," describe these changes on Schedule O.		
A	Describe the organization's program service accomplishments for each of its three largest program services, as	manaurad by avananaa	
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	• •	
		is, the total expenses, a	nu
	revenue, if any, for each program service reported. (Code:) (Expenses \$ 827,559. including grants of \$ 34,100.) (Reven		0
4a		nue \$	0.
	MARY LOU HEISSENBUTTEL RESIDENCE		
	THE MARY LOU HEISSENBUTTEL RESIDENCE (MLHR) IS A 25 BED		
	DOMESTIC VIOLENCE SHELTER FOR INDIVIDUALS AND THEIR MINC		но
	NEED SAFETY FROM ABUSE. DOMESTIC VIOLENCE IS A PATTERN C		
	COERCIVE BEHAVIORS USED BY ONE PERSON TO GAIN POWER AND	CONTROL OVER	
	ANOTHER IN AN INTIMATE RELATIONSHIP. THESE REPEATED ACTS	MAY BE	
	PHYSICAL, EMOTIONAL, VERBAL, SEXUAL, OR FINANCIAL IN NAT	URE. THE	
	CRISIS HOTLINE IS ANSWERED BY A TRAINED ADVOCATE 24/7/36		
	FY2022 WE HANDLED 1,918 CALLS FOR HELP. WE PROVIDED SHEL		
	ADULTS AND 70 CHILDREN AND TURNED AWAY 574 REQUESTS FOR		וופש
	WE WERE AT CAPACITY AND COULD NOT ACCOMMODATE THE SIZE C		
4b	(Code:) (Expenses \$ 457,640. including grants of \$ 18,857.) (Rever	nue \$	0.
	OUTREACH PROGRAM		
	GRACE SMITH HOUSE HAS AN EXTENSIVE OUTREACH AND COMMUNIT	Y EDUCATION	
	PROGRAM. THROUGH OUR OUTREACH EFFORTS WE COLLABORATE WI		
	PARTNERS ON PROJECTS DESIGNED TO INCREASE VICTIM SAFETY,		
	·	E FY2022 YEA	
			к,
	OUR OUTREACH PROGRAMS AND ACTIVITIES INCLUDED THE FOLLOW	ING:	
	FAMILY COURT ADVOCACY PROJECT - GRACE SMITH HOUSE COORDI		
	DUTCHESS COUNTY FAMILY COURT TO HAVE TWO ADVOCATES PROVI		
	SERVICES TO WALK-IN CUSTOMERS WHO SEEK ASSISTANCE FROM F	AMILY COURT.	
	ADVOCATES MEET WITH INDIVIDUALS TO ASSESS FOR THE PRESEN	ICE OF DOMEST	IC
4c	(Code:) (Expenses \$ 338,016. including grants of \$ 13,928.) (Rever	nue \$	0.
	FOLLOW UP PROGRAM		
	THE GRACE SMITH HOUSE NON RESIDENTIAL FOLLOW UP PROGRAM	PROVIDES & W	דחד
	VARIETY OF SERVICES TO FAMILIES RESIDING IN THE COMMUNIT		
	EXPERIENCING DOMESTIC VIOLENCE. ORIGINALLY DEVELOPED AS		
	PROGRAM TO ASSIST RESIDENTS WHO WERE TRANSITIONING OUT C		NCY
	SHELTER, THIS PROGRAM HAS EXPANDED TO PROVIDE A BROAD SP		
	ADVOCACY, COUNSELING AND SUPPORT SERVICES TO VICTIMS OF	DOMESTIC	
	VIOLENCE. SERVICES INCLUDE INDIVIDUAL COUNSELING, SUPPO	RT GROUP,	
	SAFETY PLANNING, COURT AND LEGAL ADVOCACY, ACCOMPANIMENT	TO COURT,	
	SOCIAL SERVICES ADVOCACY, RISK ASSESSMENT, IMMIGRATION A		
	HOUSING AND EMPLOYMENT ASSISTANCE, TRANSPORTATION, AND R		
44			
-tu	Other program services (Describe on Schedule O.) (Expenses \$ 328,212. including grants of \$ 13,524.) (Revenue \$	205,446.)	
-	1 051 105	40J,440•)	
4e	Total program service expenses 1,951,427.		
			990 (202
32002	2 12-13-22 SEE SCHEDULE O FOR CONTINUATION (5)	
	3		
11	L09 756359 1561190.000 2022.05000 GRACE SMITH H0	DUSE, INC.	1563

		26657	Р	age 3
Par	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effective of the organization engage in lobbying activities.	ect		
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Pa	rt I <u>6</u>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	<u>11a</u>	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	<u>11b</u>		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<u>11c</u>		X 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			<u> </u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<u>11e</u>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12 a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	1 4a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<u> </u>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III			X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20 a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		<u> </u>
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			X
232003	3 12-13-22	Form	1 990	(2022)

4 2022.05000 GRACE SMITH HOUSE, INC.

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Part IV Checklist of Required Schedules Schedules 22 Dot the organization report more than \$5:000 of grants or other assistance to or for domestic individuals on Part IX. Solution (Part IX. Solution) Part IX. Solution (Part IX. Solution) 30 Dot the organization report more than \$5:000 of grants or other assistance to or for domestic individuals on Part IX. Solution (Part IX. Solution) Part IX. Solution (Part IX. Solution) 31 Dot the organization report more than \$5:000 of grants or other assistance to or for domestic individuals on Part IX. Solution (Part IX. Solution) Part IX. Solution (Part IX. Solution) 32 X Assistance Part IX. Solution (Part IX. Solution) Part IX. Solution (Part IX. Solution) Part IX. Solution (Part IX. Solution) 33 Dot the organization invest any proceeds of tax exempt bonds sever than a rotunding second any time during the year. Part IX. Solution (Part IX. Solution) Part IX. Solution (Part IX. Solution) 34 Dot the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? Part IX. Solution (Part IX. Solution) Part IX. Solution (Part IX. Solution) 35 Dot the organization more and in a second beyond a temporary period exception? Part IX. Solution (Part IX. Solution) Part IX. Solution (Part IX. Solution) 36 Dot the organization more and in a second benefit transaction with a disqualified perion in a prory year, and thint the targenged in an excess benefit transaction with a disqualified perion in a neone dinore discole and canone discole and ca	Form	990 (2022) GRACE SMITH HOUSE, INC. 14-162	<u>26657</u>	Р	age 4
22 Did the organization report more than 55.000 of grants or other assistance to or for domestic individuals on Part K, clink P, kin 24, or 5, about compensation of the organization current and former offices, directors, trustees, key employees, and highest compensation of the organization current and former offices, directors, trustees, key employees, and highest compensation of the organization current and former offices, directors, trustees, key employees, and highest compensation of the organization current basis day of the year, that was laused after December 31, 20027 if "Yea," competent band sizes with an outstanding principal amount of more than \$100,000 as of the size, the organization match and proceeds of tax-exempt band issue with an outstanding participal amount of more than \$100,000 as of the size of the organization match and proceeds of tax-exempt band issue with an outstanding at any time during the year? 246 2 Did the organization match and proceeds of tax-exempt band issue with an outstanding at any time during the year? 246 2 Section Office), S010(4), and organizations. Did the organization match and near eccess benefit transaction with a disqualified person during the year? 246 2 Section Office), S010(4), and organization and pair of rome select framaction with a disqualified person in a prory sar, and the the transaction han to be report any amount on Part X. Ins 5 or 22, for receivables form or payelles to any current or former office, director, trustee, key employee, creator or funder, subtanial contributor or 30% controlled entity or family member of any of these param? If "Yea," complete Schedule I, Part I 256 2 Did the organization andure theredin and order oreconter, director, trustee, k	Par	t IV Checklist of Required Schedules (continued)			
Part IX, column (A), Ine 21, pt * Yes, * complete Schedule, 1 pt all and main of the organization asserver the Tota YM, Scheduler A, June 34, pt * 5, built compensation of the organization sourcent and former officer, directors, trustees, key employees, and highest composited employees? If * Yes, * complete Schedule / If * Yes, * total and schedule for the organization market and sector account of the trustees with an outstanding principal amount of more than \$100,000 as of the schedule / If * Yes, * total is all skip of the organization market an accrew account of the than a refunding sector at your the schedule / If * Yes, * total is all skip of the organization market an accrew account of the than a refunding sector with any time during the year? 24a X 25a Det the organization market an accrew account of the than a refunding sector with any time during the year? 24d X 25a Section 30 (ICQ)S, 50 (IQA)S, and 50 (ICQA)S organizations. Did no organization angain an excess benefit transaction with a disqualified period in a prior year, and that the transaction have that if engaged in an excess benefit transaction with a disqualified period in a prior year. All of Did the organization are neptored an any of the organization on the apprint of any of these sensols? If * Yes, * complete Schedule L, Part I 25b X 27b Did the organization provide a grant or that satisfance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 356 27f X 27b 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 356 28b X <t< td=""><td></td><td></td><td></td><td>Yes</td><td>No</td></t<>				Yes	No
22 Dot the organization arswer: "Yes" to Park UK, Bestion A, Ine 3, 4, or 3, about compensation of the organization is current and forms offered, directions, trustees, key employees, and highest compensated employees? If 'Yes, "complete Schedule J, et al. (a) the organization marks and a large Desember 31, 2002? If 'Yes, "complete Schedule J, et al. (a) of the organization marks and a size of the size with an outstanding principal amount of more than \$100,000 as of the last day of the size (1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,	22			37	
and tormer offices, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 424 Did the organization have a tax exempt bond issue with an outstanding principal amount of more thms \$100,000 as of the last day of the yes, that was issue datter December 31, 2002? If "Yes," answer lines 2db through 2dd and complete Schedule K. If "No;" go to line 25a. D Did the organization invest any proceeds of tax exempt bonds beyond a temporary polied exception? 2dd D Did the organization invest any proceeds of tax exempt bonds beyond a temporary polied exception? 2dd D Did the organization area and an encrow account cher than a returned ecrow at any time duning the year? 2dd D Did the organization area and an encrow account cher than a returned ecrow at any time duning the year? 2dd D Did the organization area and an on behalf of issuer for bonds outstanding at any time duning the year? 2dd D Did the organization area and an excrow account the organizations engage in an excess benefit transaction with a disqualified person during the year? 2dd D Did the organization area and any of the organizations. Did the organization is prior year, and that the transaction has not be neglored on any of the organizations prior Forms 900 or 900-273 // Yes, " complete Schedule L, Part I D Did the organization provide a grant or dihes axistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereol, a grant solction committee memoter, or to a 55K controlled entity (including an employee thereol) or annih memory any current or former officer, director, trustee, key employee, creator or founder, substantial contributors, and exception in set as esses controlled entity (including an employee thereol) or tannih memory any current or former officer, director, trustee, key employee, creator or founder, trustee the solchadine L, Part II A Aurent or former officer, director, trustee, key employee, creator	00		. 22	A	<u> </u>
Schedule J 28 Vet	23				
24a Det the organization have a tax everyth bond issue with an outstanding principal emount of more than \$100,000 as of the last day of the year, that was lissue after December 31, 2002? If 'Yea,' answer lines 24b through 24d and complete Schedule K, If 'No,' go to be ine 25a 24a X 2 Did the organization invest any proceeds of tax-everyth bonds beyond a temporary period exception? 24a X 2 Did the organization invest any proceeds of tax-everyth bonds beyond a temporary period exception? 24a X 2 Did the organization and tain an encrow accound ther than a refunding escrow at any time during the year to defease any tax-everytheorem that disqualified person in a prior year, and that transaction with a disqualified person in a prior year, and that the organization area to the reported on any of the organization prior Forms 900 or 900-E27. If 'Yea,' complete Schedule L, Part I 25a X 2 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 30% controlled entry or family member of any of these persons? If 'Yea,' complete Schedule L, Part I 26 X 2 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, 93% controlled on try or family member of any of these persons? If 'Yea,' complete Schedule L, Part I 26 X 2 Did the organization report and secore for indindites, and resonation commuter were to a 35% contolled			23		x
is at day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete 24a X b Dd the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b 24b c Dd the organization ministin an escrew account ofher than a refunding screw at any time during the year 10 delease any tax exempt bonds? 24d d Dd the organization and at as in "on behalf of" issuer for bonds outstanding at any time during the year 10 delease any tax exempt bonds? 24d d Dd the organization and that the transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a d Dd the organization aware that the organizations. Dd the organizations of the organization are provide any of the organization appendix the organization append	24a		20		
Schedule K. If 'We', 'go to kine 25a 24a X b Did the organization meantain an escrow account other than a refunding escrow at any time during the year to defease any tax exampt bonds? 24b 24c c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24c 24c 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 time flave wave that it engaged in an excess benefit transaction with a disqualified person in a pror year, and that the transaction ware that it engaged in an excess benefit transaction with a disqualified person in a pror year, and that the transaction ware that it engaged in an excess benefit transaction with a disqualified person in a pror year, and that the transaction with a disqualified person in a pror year, and that the transaction with a singular benefit or any other sequence of the organization spice form or physible schedule L, Part I 25a X 25 Did the organization provide any or other sequence of rounder, substantial contributor, or 35% controlled entity including an employee theredo for anny inclumes, related to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or a 28de X 26a X 28 Was the organization provide any and or DHX is basistance to any current or former officer, director, trustee, key employee, creator or founder, or substantial contributor, or 35% with the organization reavies more than 352.000 in non-cash contributions? If "Yes," complete Schedule L, Part I 27a X 28 Was					
c Did the organization maintain an encow account other than a refunding escrow at any time during the year to defease any tax-wampt bonds? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(2b) organization. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 25a 25a Section 501(c)(3), 501(c)(4), and 501(c)(2b) organization. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 11%2 25a Section 501(c)(3), 501(c)(4), and 501(c)(2b) organizations prior forms 900 or 990-CE? 11%s, "complete Schedule L, Part I 25a 25a 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 amployse, creator or founder, substantial contributor, or 35% controlled entity (including an employee) thereoid, a grant selection committee member, or to a 30% controlled entity (including an employee) thereoid a grant or othese persons? If Y*cs, "complete Schedule L, Part II 26 X 27 Did the organization report to substantial contributor or employee thereoid or family member of any current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Y*cs, "complete Schedule L, Part II 26 X 28 A family member of any individual desorbed in line 28a? If Y*cs, "complete Schedule L, Part II 28 X 29 Did the organization receive ontihudinos and exceeptions? <td< td=""><td></td><td></td><td>24a</td><td></td><td>x</td></td<>			24a		x
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contributions? /f "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? /f "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? /f "yes," complete Schedule N, Part I 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? /f "yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? /f "yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization nave a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization complete Schedule R, Part V, line 2 36 36 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 37 X 38 Did the organization complete Schedule O The set or in this Part V 18 12 12 37 Did the organization complete Sched			23	- 23	<u> </u>
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(gambling) winnings to prize winners? 1c 232004 12-13-22 Form 990 (2022)			4		
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Form	990 (2022) GRACE SMITH HOUSE, INC.	14-1626	657	Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			. <u> </u>	
•				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	2a 45			
h	filed for the calendar year ending with or within the year covered by this return		2b	X	
		15 !	20 3a		x
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b		<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a		4a		x
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit			
			<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		X X
			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as required	_		
	to file Form 8282?		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	_		v
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		7e		X X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra-		7f		
g L	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g 7b		
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		7h		
0		•	8		
9	Sponsoring organizations maintaining donor advised funds.				
a			9a		
			9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		
11	Section 501(c)(12) organizations. Enter:	· · ·	1		
а	Gross income from members or shareholders	11a			
b	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	l l			
	organization is licensed to issue qualified health plans	13b	4		
	Enter the amount of reserves on hand	13c			v
			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune		15		x
	excess parachute payment(s) during the year?		15		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		x
10	If "Yes," complete Form 4720, Schedule O.		10		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities			
••	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				
232005	12-13-22		Form	9 90	(2022)
	C.				. /

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	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			23
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 17			
	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 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 17			
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
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
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	1.0		
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
5	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	<u> </u>		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
D.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
		11a	- 23	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	12a	X	
	Did the organization have a written conflict of interest policy? <i>If</i> " <i>No</i> ," <i>go to line 13</i>	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		<u></u>	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10	х	
40	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13		
14 45	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45	v	
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			37
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 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 <u>NY</u>			
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	s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other <i>(explain on Schedule O)</i>			
		d financ	cial	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
19	statements available to the public during the tax year.			
19 20	statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records			
	statements available to the public during the tax year.			

Form 990 (2022) GRACE SMITH HOUSE, INC.	14-1626657	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compe	ensated	
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 c List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardle 	0	,

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not ch		ition		ne	Reportable	Reportable	Estimated
	hours per	box,	, unles	s per	rson i	s both	n an	compensation	compensation	amount of
	week		Jer and	aaa	recio	r/trus	lee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	ll trus		/ee	mpen		1099-NEC)	1099-NEO)	and related
	below	ndividual trustee or director	nstitutional trustee	5	Key employee	ist co	er.	,		organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			U
(1) BRANKA BRYAN	55.00									
EXECUTIVE DIRECTOR				Х				89,690.	0.	40,792.
(2) MAUREEN ARCHER	55.00									
DIRECTOR OF FINANCE				Х				94,082.	0.	19,213.
(3) HEATHER FINCK	1.00									
CHAIR		Х		Х				0.	0.	0.
(4) LORI ROLISON	1.00									
CHAIR (THRU APRIL 2022)		Х		Х				0.	0.	0.
(5) ELIZABETH QUINN	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(6) CHRISTINA KEARNEY	1.00									
TREASURER		Х		Х				0.	0.	0.
(7) ELLEN HENNEBERRY	1.00									
SECRETARY		Х		Х				0.	0.	0.
(8) DONNA BETTS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) BENJAMIN DAY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) CATHERINE FORBES	1.00									-
BOARD MEMBER		Х						0.	0.	0.
(11) ALYSSA GATES	1.00									-
BOARD MEMBER		х						0.	0.	0.
(12) THERESA GILL	1.00								•	•
BOARD MEMBER	1 0 0	Х						0.	0.	0.
(13) JESSICA GLASS	1.00								•	•
BOARD MEMBER	1 0 0	X						0.	0.	0.
(14) PATRICIA HOGAN	1.00								0	0
BOARD MEMBER	1 0 0	X						0.	0.	0.
(15) RON LANE	1.00							0	0	0
BOARD MEMBER (THRU APRIL 2022)	1 0 0	X						0.	0.	0.
(16) MICHELE MCALEER	1.00								•	0
BOARD MEMBER	1 00	X						0.	0.	0.
(17) DANIEL MURPHY	1.00								•	0
BOARD MEMBER (THRU APRIL 2022)		Х						0.	0.	0.
232007 12-13-22										Form 990 (2022)

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Form 990 (2022) GRACE SM	ITH HOUS	SE,	I	NC	•				14-1626	657 Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	ploy	ees,	and	Hig	hes	t C	ompensated Employee	s (continued)	•
(A) Name and title	(B) Average hours per week	box	not ch , unles cer an	ss pers	tion nore t son is	both	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) JESSICA NOWLIN BOARD MEMBER	1.00	x						0.	0.	0.
(19) TONI SAYCHEK BOARD MEMBER	1.00	x						0.	0.	0.
(20) MICHELE SCHNEIDER BOARD MEMBER (THRU APRIL 2022)	1.00	x						0.	0.	0.
(21) MARJORIE SMITH	1.00									
BOARD MEMBER (22) MAUREEN TALVI	1.00	X						0.	0.	0.
BOARD MEMBER (23) BRAD WEAVER	1.00	X						0.	0.	0.
BOARD MEMBER (THRU APRIL 2022) (24) SHARON WHITELEY	1.00	X						0.	0.	0.
BOARD MEMBER		x						0.	0.	0.
1b Subtotal c Total from continuation sheets to Part VI								183,772.	0.	60,005.
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but n) re	183,772.	0.00 of reportable	60,005.
compensation from the organization		000	1010	u ub	010)					0
 Did the organization list any former officer line 1a? <i>If "Yes," complete Schedule J for s</i> For any individual listed on line 1a, in the side of the second sec	uch individual									Yes No 3 X
 4 For any individual listed on line 1a, is the su and related organizations greater than \$150 5 Did any person listed on line 1a receive or a produced by the superior discussion of the superior discussion. 	0,000? <i>If</i> "Yes, accrue comper	" <i>co</i> nsati	<i>mple</i> on fr	ete S om a	Cheo any i	<i>dule</i> unre	J f	or such individual		4 X 5 X
rendered to the organization? If "Yes." con Section B. Independent Contractors	nplete Schedule	e J to	or su	ich p	ersc	<u>. n</u>				5 X
1 Complete this table for your five highest co the organization. Report compensation for	-									tion from
(A) Name and business	address			g m				(B) Description of s		(C) Compensation
LEGAL SERVICES OF HUDSON 90 MAPLE AVENUE, WHITE PI		Y	10	601	1			LEGAL SERVIC	ES	117,388.
2 Total number of independent contractors (i	ncluding but no	ot lir	nited	l to t	hose	e list	ed	above) who received mo	ore than	
\$100,000 of compensation from the organi	zation				1					Form 990 (2022)

232008 12-13-22

			2022) GRACE SMITH H	<u>OUSE, INC</u>	C.		14-1626	657 Page 9
Pa	rt V	/111	Statement of Revenue					
			Check if Schedule O contains a response of	<u>or note to </u> any lin	e in this Part VIII		<u></u>	
					(A) Total revenue	(B) Related or exempt function revenue		(D) Revenue excluded from tax under sections 512 - 514
s S	1	а	Federated campaigns 1a	13,534.				
ant unt			Membership dues 1b					
ja B			Fundraising events 1c					
ifts r A			Related organizations 1d					
, G				042,195.				
Sins			All other contributions, gifts, grants, and	012/2001				
utic		'		462,660.				
Contributions, Gifts, Grants and Other Similar Amounts		_		<u>402,000.</u> 69,718.				
hon		-			2,518,389.			
0 0		n	Total. Add lines 1a-1f		2,510,509.			
	_			Business Code	205 446	205 446		
Program Service Revenue	2		BROOKHAVEN APARTMENT R	531110	205,446.	205,446.		
ervi		b						
ו Si enu		С						
lev		d						
lбо.		е						
ď		f	All other program service revenue					
		g	Total. Add lines 2a-2f		205,446.			
	3		Investment income (including dividends, intere	st, and				
			other similar amounts)		80,957.			80,957.
	4		Income from investment of tax-exempt bond p					
	5		Royalties					
			(i) Real	(ii) Personal				
	6	a	Gross rents					
	0		Less: rental expenses 6b					
			Rental income or (loss) 6c					
	_		Net rental income or (loss) Gross amount from sales of (i) Securities	(ii) Other				
	'	а						
			,					
		b	Less: cost or other basis					
evenue			and sales expenses 7b 70,839.					
svel			Gain or (loss)		20.000			20.205
Я		d	Net gain or (loss)		39,326.			39,326.
Other	8	а	Gross income from fundraising events (not including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18 8a					
			Less: direct expenses 8b					
			Net income or (loss) from fundraising events					
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9a					
		b	Less: direct expenses 9b					
		с	Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10a					
		b	Less: cost of goods sold 10b					
			Net income or (loss) from sales of inventory					
		-		Business Code				
sn	11	2	INSURANCE PROCEEDS	900099	11,594.			11,594.
neo Ule			CREDIT CARD REWARDS	900099	942.			942.
Miscellaneous Revenue			MISC. INCOME	900099	143.			143.
sce Bey				500055	143.			143.
Mi			All other revenue	L	10 670			
			Total. Add lines 11a-11d		12,679.	205 446	0	122 002
	12		Total revenue. See instructions		2,856,797.	205,446.	0.	
23200	9 12-	13-	22					Form 990 (2022)

GRACE SMITH HOUSE INC. Form 990 (2022) Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response				
	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				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	80,410.	80,410.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	243,777.	43,925.	196,416.	3,436
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,211,697.	1,021,516.	110,277.	79,904.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	35,700.	26,133.	7,523.	2,044. 9,449.
9	Other employee benefits	165,016.	120,796.	34,771.	9,449.
10	Payroll taxes	138,200.	101,166.	29,121.	7,913.
11	Fees for services (nonemployees):				
а	Management				
	Legal	81,936.	77,868.	3,359.	709
	Accounting	24,750.	24,750.		
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	21,320.		21,320.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
Ŭ	column (A), amount, list line 11g expenses on Sch 0.)	56,805.	37,823.	3,977.	15,005.
12	Advertising and promotion	5,421.	2,546.		<u> 15,005</u> 2,875.
13	Office expenses	44,754.	41,973.	806.	1,975.
14	Information technology	58,661.	58,661.		
15	Royalties				
16	Occupancy	79,925.	78,724.	992.	209.
17	Travel	6,434.	6,434.		
18	Payments of travel or entertainment expenses	,	,		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	50.	45.	4.	1.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	135,689.	117,778.	14,790.	3,121.
23	Insurance	38,881.	33,749.	4,238.	894
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
2	BAD DEBTS	20,406.	20,406.		
	REPAIRS & MAINTENANCE	18,056.	17,485.	524.	47.
c		16,471.	16,051.	293.	127
	FOOD	11,682.	11,682.		±470
	All other expenses	12,218.	11,506.	372.	340
	·	2,508,259.	1,951,427.	428,783.	128,049
2 <u>5</u>	Total functional expenses. Add lines 1 through 24e	4,300,433.	1, , , , , 42/ •	=20,703.	120,0490
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)				

11

	990 (2			14-	1626657 Page 1 1
Par	tΧ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash papinterest bearing	70,791.	1	76,344
		Cash - non-interest-bearing	952,961.	2	947,495
	2	Savings and temporary cash investments	339,027.	23	253,132
	3	Pledges and grants receivable, net	192,433.	3 4	174,139
	4	Accounts receivable, net	192,433.	4	1/4,133
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		-	
	-	controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	C 020	8	C 110
◄	9	Prepaid expenses and deferred charges	6,030.	9	6,713
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 4,459,800.			
	b	Less: accumulated depreciation 10b 2,620,613.	1,877,264.	10c	1,839,187
	11	Investments - publicly traded securities	3,896,892.	11	3,798,853
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	7,653.	15	1,400
	16	Total assets. Add lines 1 through 15 (must equal line 33)	7,343,051.	16	7,097,263
	17	Accounts payable and accrued expenses	201,503.	17	158,222
	18	Grants payable		18	
	19	Deferred revenue	10,617.	19	47,738
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	22,402.	21	22,594
s	22	Loans and other payables to any current or former officer, director,			
litie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	234,522.	26	228,554
		Organizations that follow FASB ASC 958, check here			
sec		and complete lines 27, 28, 32, and 33.			
ano	27	Net assets without donor restrictions	4,919,610.	27	4,749,609
Bal	28	Net assets with donor restrictions	2,188,919.	28	2,119,100
pu		Organizations that do not follow FASB ASC 958, check here			
Ъц		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
Set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
et	32	Total net assets or fund balances	7,108,529.	32	6,868,709
~ '			7,343,051.		7,097,263

Form 990 (2022)

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Form	990 (2022) GRACE SMITH HOUSE, INC.	14-1	1626657	Pac	_{ae} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,856		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,508	, 25	59.
3	Revenue less expenses. Subtract line 2 from line 1	3	348		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,108	, 52	<u>29.</u>
5	Net unrealized gains (losses) on investments	5	-572	,99	<u>99.</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	-15	, 35	<u>59.</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	6,868	,70)9.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
			`	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За		X
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		

Form 990 (2022)

232012 12-13-22

(Form 990) Co Department of the Treasury Internal Revenue Service				omplete if the organ 494 At	rity Status an hization is a section 501 47(a)(1) nonexempt cha ttach to Form 990 or Fo Form990 for instructior	(c)(3) orga ritable tru rm 990-E	anization o st. Z.	or a section		OMB No. 1545-0047 2022 Open to Public Inspection
Nan	ne of	the organizati	on							identification number
Da	GRACE SMITH HOUSE, INC. 14-1626657 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.									
Pa								ee instruction	IS.	
The 1 2 3 4		A church, cor A school des A hospital or	nvention of chu cribed in secti a cooperative search organiza	urches, or associatio ion 170(b)(1)(A)(ii). (hospital service orga	For lines 1 through 12, cl on of churches described Attach Schedule E (Form anization described in se hjunction with a hospital	in sectio 1 990).) ection 170	on 170(b)(1)(b)(1)(A)(ii	i).)(iii). Enter	the hospital's name,
5		-		or the benefit of a col	llege or university owned	or operat	ed by a go	vernmental u	nit describe	ed in
		section 170	(b)(1)(A)(iv). (C	Complete Part II.)						
6 7 8		An organizati section 170(on that norma b)(1)(A)(vi). (C	lly receives a substar omplete Part II.)	nental unit described in antial part of its support fr (1)(A)(vi). (Complete Part	om a gove			ne general p	public described in
9		An agricultura	al research org	anization described	in section 170(b)(1)(A)(i x) operate	ed in conju	inction with a	land-grant	college
		-	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
10		activities relation	ted to its exem Inrelated busir	npt functions, subjec	than 33 1/3% of its supp t to certain exceptions; a (less section 511 tax) fro	and (2) no	more than	33 1/3% of it	s support f	rom gross investment
11					vely to test for public sat	ety. See	section 50)9(a)(4).		
12 a		more publicly lines 12a thro Type I. A si	v supported orgough 12d that orgoupporting orga	ganizations describe describes the type of anization operated, si	vely for the benefit of, to d in section 509(a)(1) o f supporting organization upervised, or controlled	r section and com by its supp	509(a)(2). plete lines ported orga	See section 12e, 12f, and anization(s), t	509(a)(3). (12g. ypically by	Check the box on
			0		gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	ipporting
b		Type II. A s control or n	supporting organization	-	or controlled in connect anization vested in the sa			-		-
с		Type III fur	ctionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	lly integrate	d with,
	_	its supporte	ed organizatior	n(s) (see instructions)). You must complete I	Part IV, Se	ctions A,	D, and E.		
d		••	-	• •	orting organization oper				•	
					ation generally must sat				l an attentiv	reness
		-			nplete Part IV, Sections written determination from					
е			•		nally integrated supportin			турет, туре	п, туре п	
f	Ente	er the number								
g				about the supporte	d organization(s).					
		 (i) Name of support organization 		(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi		(v) Amount o [.] support (see ir	-	(vi) Amount of other support (see instructions)
		organization			above (see instructions))	Yes	No			
										<u> </u>
<u>Tota</u>	1							1		l

		RACE SMIT			b)(1)(A)(iv) and		6657 Page 2		
	Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization								
	fails to qualify under the tests listed below, please complete Part III.)								
Sec	tion A. Public Support	<i>/</i> 1	•	,					
		(=) 2019	(b) 2019	(c) 2020	(4) 2021	(e) 2022			
	ndar year (or fiscal year beginning in)	(a) 2018	(d) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not	2620020	2510024	2670692	2755176	2510200	12005011		
	include any "unusual grants.") 2639939. 2510824. 2670683. 2755176. 2518389.13095011.								
2	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf Image: Comparison of the organ- ization of the o								
3	The value of services or facilities furnished by a governmental unit to								
	the organization without charge	2620020	2510024	2670602		2510200	12005011		
4	Total. Add lines 1 through 3	2639939.	2510824.	2670683.	2755176.	2518389.	13095011.		
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)						175,711.		
	Public support. Subtract line 5 from line 4.						12919300.		
Sec	ction B. Total Support					-			
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
7	Amounts from line 4	2639939.	2510824.	2670683.	2755176.	2518389.	13095011.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	57,040.	71,984.	58,292.	62,678.	80,957.	330,951.		
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.)	43,173.	4,114.	12,336.	46,199.	12,679.	118,501.		
11	Total support. Add lines 7 through 10				, , , , , , , , , , , , , , , , , , ,		13544463.		
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	940,807.		
	First 5 years. If the Form 990 is for th	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	organization, check this box and sto								
Sec	tion C. Computation of Publi								
14	Public support percentage for 2022 (I			olumn (f))		14	95.38 %		
15	Public support percentage from 2021					15	95.45 %		
	33 1/3% support test - 2022. If the								
100	stop here. The organization qualifies								
Ь	33 1/3% support test - 2021. If the o								
		-							
17-	and stop here. The organization qual 10% -facts-and-circumstances test								
178		0							
	and if the organization meets the fact			-		-			
	meets the facts-and-circumstances te	-		• • • •	-				
b	10% -facts-and-circumstances test	-					10% or		
	more, and if the organization meets th		-		• •				
_	organization meets the facts-and-circu		•						
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a				
						Schedule A	(Form 990) 2022		

	rt III Support Schedule for C	rganizations	Described in a	Section Sus(a)	(2)		
	(Complete only if you checked	the box on line 10	of Part I or if the	organization failed	to qualify under P	art II. If the organi	zation fails to
_	qualify under the tests listed b	elow, please comp	olete Part II.)				
Sec	ction A. Public Support	1	[1	1	1
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services 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						
	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
h	Amounts included on lines 2 and 3 received						
N	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						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(4) 2010			(4) 2021		
	Gross income from interest,						
	dividends, payments received on						
	dividends, payments received on securities loans, rents, royalties,						
b	dividends, payments received on						
b	dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses						
	dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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						
c	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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,						
c	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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						
с 11	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain						
с 11	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain or loss from the sale of capital						
0 11 12	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain						
11 12 13	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organizati	on,
11 12 13 14	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for th check this box and stop here	-					on,
11 12 13 14	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support . (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for th	-					on,
11 12 13 14 Sec	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for th check this box and stop here	c Support Per	centage	(1)			on,%
11 12 13 14 <u>Sec</u> 15 16	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2022 (I Public support percentage from 2021	c Support Per ine 8, column (f), d Schedule A, Part	ivided by line 13, III, line 15	(1)			
11 12 13 14 <u>Sec</u> 15 16	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2022 (I	c Support Per ine 8, column (f), d Schedule A, Part	ivided by line 13, III, line 15	(1)		15	
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c 11 12 13 14 <u>Sec</u> 15 <u>16</u> <u>5</u> 17 18	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support . (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Publi Public support percentage for 2022 (I Public support percentage from 2021 ction D. Computation of Invess	ine 8, column (f), d Schedule A, Part Stment Income 222 (line 10c, colur 2021 Schedule A,	ivided by line 13, III, line 15 Percentage nn (f), divided by l Part III, line 17	column (f)) ne 13, column (f))	· · · · · · · · · · · · · · · · · · · ·	15 16 17 18	
c 11 12 13 14 <u>Sec</u> 15 <u>16</u> <u>5</u> 17 18	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support . (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Publi Public support percentage for 2022 (I Public support percentage for 2021 ction D. Computation of Invess	ine 8, column (f), d Schedule A, Part Stment Income 222 (line 10c, colur 2021 Schedule A,	ivided by line 13, III, line 15 Percentage nn (f), divided by l Part III, line 17	column (f)) ne 13, column (f))	· · · · · · · · · · · · · · · · · · · ·	15 16 17 18	
c 11 12 13 14 <u>Sec</u> 15 <u>16</u> <u>5</u> 17 18	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support . (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Publi Public support percentage for 2022 (I Public support percentage from 2021 ction D. Computation of Invess	ic Support Per ine 8, column (f), d Schedule A, Part Stment Income 2022 (line 10c, colur 2021 Schedule A, organization did r	ivided by line 13, III, line 15 Percentage nn (f), divided by l Part III, line 17 ot check the box	column (f)) ne 13, column (f)) on line 14, and line	9 15 is more than 3	15 16 17 18 33 1/3%, and line 1	
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c 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17 18 19a b	dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for th check this box and stop here ction C. Computation of Public Public support percentage from 2021 (I Public support percentage from 2022 (I Investment income percentage from 2021 as 1/3% support tests - 2022. If the more than 33 1/3%, check this box ar as 31/3% support tests - 2021. If the	ine 8, column (f), d Schedule A, Part Stment Income 2021 (line 10c, colur 2021 Schedule A, organization did r organization did r corganization did r ck this box and st	centage ivided by line 13, Percentage nn (f), divided by l Part III, line 17 iot check the box organization qual iot check a box or op here. The orga	column (f)) ne 13, column (f)) on line 14, and line fies as a publicly s I line 14 or line 19a nization qualifies a	 15 is more than 3 upported organiza and line 16 is more as a publicly support 	15 16 17 18 33 1/3%, and line 1 ation ore than 33 1/3%, orted organization structions	

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Schedule A (Form 990) 2022 GRACE SMITH HOUSE, INC.

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GRACE SMITH HOUSE, INC.

1

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3a

3b

3c

4a

4b

4c

5a

5b

5c

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9a

9b

9c

10a

Yes

No

(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

Part IV Supporting Organizations

Schedule A (Form 990) 2022

- 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.)

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10b | Schedule A (Form 990) 2022

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	dule A (Form 990) 2022 GRACE SMITH HOUSE, INC. 1 t IV Supporting Organizations (continued) 1	4-162665	7 Pa	age 5
Fai	Supporting Organizations (continued)		Vaa	Na
44	Lies the experimentian expenses a gift or contribution from any of the following nervous?		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
a	11c below, the governing body of a supported organization?	11a		
Ь	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
U	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 or	e or	100	110
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's offi			
	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 support			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among a supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	the 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	Z		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	· ·		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
•	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			
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		2		
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
5	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	3		
Sec	supported organizations played in this regard. 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 instr	uctions)		
' a	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>	uctions).		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	v lago instruction		
2	Activities Test. Answer lines 2a and 2b below.	y (see instruction	Yes	No
z a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		103	
a				
	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	2a		
h	that these activities constituted substantially all of its activities. Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	20		
5	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	one of more of the organization s supported organization(s) would have been engaged in: II 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.

3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

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. 232025 12-09-22

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3b Schedule A (Form 990) 2022

2b

3a

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Type III Non-Functionally Integrated 509(a)(3) Supporting Organization is a qualifying trust on No All other Type III non-functionally integrated supporting organizations must complete Se A - Adjusted Net Income 1 t short-term capital gain 1 coveries of prior-year distributions 2 her gross income (see instructions) 3 d lines 1 through 3. 4 preciation and depletion 5 rtion of operating expenses paid or incurred for production or 6 her expenses (see instructions) 6 her expenses (see instructions) 7 ijusted Net Income 7 ligusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 B - Minimum Asset Amount 1 gregate fair market value of all non-exempt-use assets (see tructions for short tax year or assets held for part of year): 1a erage monthly value of securities 1a ir market value of other non-exempt-use assets (see tplain in detail in Part VI): 1d up usition indebtedness applicable to non-exempt-use assets 2 btract line 2 from line 1d. 3 scount claimed for blockage or other factors 2 plain in detail in Part VI): 2 up usition inclebte	v. 20, 1970 (<i>explain in</i> I	Part VI). See instruction (B) Current Year (optional) (B) Current Year (B) Current Year (optional) (B) Current Year (optional)
All other Type III non-functionally integrated supporting organizations must complete Se A - Adjusted Net Income it short-term capital gain 1 coveries of prior-year distributions 2 her gross income (see instructions) 3 id lines 1 through 3. 4 preciation and depletion 5 rition of operating expenses paid or incurred for production or lilection of gross income or for management, conservation, or sintenance of property held for production of income (see instructions) 6 her expenses (see instructions) 7 igusted Net Income 8 B - Minimum Asset Amount 8 gregate fair market value of all non-exempt-use assets (see tructions for short tax year or assets held for part of year): erage monthly value of securities 1a erage monthly value of securities 1a gregate fair market value of other non-exempt-use assets (see tructions for short tax year or assets held for part of year): 1a erage monthly cash balances 1b 1 ir market value of other non-exempt-use assets 2 1a gregate lain in detail in Part VI): 1d 1d guisition indebtedness applicable to non-exempt-use assets 2 2 btract line 2 from line 1d.	ctions A through E. (A) Prior Year	(B) Current Year (optional)
t short-term capital gain 1 coveries of prior-year distributions 2 her gross income (see instructions) 3 Id lines 1 through 3. 4 preciation and depletion 5 rition of operating expenses paid or incurred for production or 5 llection of gross income or for management, conservation, or 6 her expenses (see instructions) 6 her expenses (see instructions) 7 Jjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 B - Minimum Asset Amount 7 gregate fair market value of all non-exempt-use assets (see 1 tructions for short tax year or assets held for part of year): 1 erage monthly value of securities 1a erage monthly cash balances 1b ir market value of other non-exempt-use assets 1c tal (add lines 1a, 1b, and 1c) 1d scount claimed for blockage or other factors 2 plain in detail in Part VI): 3 quisition indebtedness applicable to non-exempt-use assets 2 btract line 2 from line 1d. 3 sh deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, e instructions). <th></th> <th>(optional)</th>		(optional)
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t value of non-exempt-use assets (subtract line 4 from line 3) 5 ultiply line 5 by 0.035. 6		
Itiply line 5 by 0.035. 6		
coveries of prior-year distributions 7		
nimum Asset Amount (add line 7 to line 6) 8		
C - Distributable Amount		Current Year
justed net income for prior year (from Section A, line 8, column A)		
ter 0.85 of line 1. 2		
nimum asset amount for prior year (from Section B, line 8, column A) 3		
ter greater of line 2 or line 3. 4		
come tax imposed in prior year 5		
stributable Amount. Subtract line 5 from line 4, unless subject to		
ergency temporary reduction (see instructions). 6		
Check here if the current year is the organization's first as a non-functionally integrated		

instructions).

Schedule A (Form 990) 2022

	dule A (Form 990) 2022 GRACE SMITH H				4-1626657	Page 7		
Par		a)(3) Supporting Orga	nizations (continue	ed)	Current Yea			
Sect	ection D - Distributions							
_1	Amounts paid to supported organizations to accomplish exer			1				
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported						
	organizations, in excess of income from activity	2						
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	6	3				
4	Amounts paid to acquire exempt-use assets			4				
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5				
	Other distributions (<i>describe in</i> Part VI). See instructions.			6				
7	Total annual distributions. Add lines 1 through 6.			7				
8	Distributions to attentive supported organizations to which th	e organization is responsive		•				
	(provide details in Part VI). See instructions.			8				
9	Distributable amount for 2022 from Section C, line 6			9				
10	Line 8 amount divided by line 9 amount	(1)	le contra de la co	10	()			
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	5	(iii) Distributabl Amount for 20			
1	Distributable amount for 2022 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2022 (reason-							
	able cause required - explain in Part VI). See instructions.							
3	Excess distributions carryover, if any, to 2022							
<u>a</u>	From 2017							
b	From 2018							
C	From 2019							
d	d From 2020							
e	e From 2021							
f	Total of lines 3a through 3e							
g	Applied to underdistributions of prior years							
h	Applied to 2022 distributable amount							
i	Carryover from 2017 not applied (see instructions)							
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2022 from Section D,							
	line 7: \$							
a	Applied to underdistributions of prior years							
b	Applied to 2022 distributable amount							
C	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2022, if							
	any. Subtract lines 3g and 4a from line 2. For result greater							
	than zero, explain in Part VI. See instructions.							
6	Remaining underdistributions for 2022. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2023. Add lines 3j							
	and 4c.							
8	Breakdown of line 7:							
a	Excess from 2018							
b	Excess from 2019							
C	Excess from 2020							
d	Excess from 2021							
e	Excess from 2022							

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 GRACE SMITH HOUSE, INC. 14-1626657 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part IV, Sectiva,	C,
Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)	,
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:	
RECOVERY OF BAD DEBT	
2018 AMOUNT: \$ 42,142.	
2020 AMOUNT: \$ 4,032.	
<u>2021 AMOUNT: \$ 20,934.</u>	
CREDIT CARD REWARDS	
2018 AMOUNT: \$ 1,031.	
2019 AMOUNT: \$ 1,920.	
2020 AMOUNT: \$ 1,395.	
2021 AMOUNT: \$ 1,294.	
2022 AMOUNT: \$ 942.	
INSURANCE PROCEEDS	
2021 AMOUNT: \$ 19,678.	
2022 AMOUNT: \$ 11,594.	
MISCELLANEOUS INCOME	
2019 AMOUNT: \$ 2,194.	
2020 AMOUNT: \$ 6,909.	
2021 AMOUNT: \$ 4,293.	
2022 AMOUNT: \$ 143.	
232028 12-09-22 Schedule A (Form 99) 0) 2022

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	SCHEDULE D (Form 990)Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.						
micrital Re	nt of the Treasury evenue Service	A	ttach to Form 990. O for instructions and the latest informat		Open to Public Inspection		
Name o	of the organizatio		TNO		r identification number $4-1626657$		
Part	I Organiza	GRACE SMITH HOUSE, tions Maintaining Donor Advise	d Funds or Other Similar Funds of				
		answered "Yes" on Form 990, Part IV, lin					
			(a) Donor advised funds	(b) Funds an	nd other accounts		
1 To	otal number at en	d of year					
		contributions to (during year)					
		grants from (during year)					
		end of year					
			writing that the assets held in donor advise	d funds			
a	re the organizatior	n's property, subject to the organization's	exclusive legal control?		Yes No		
6 D	id the organization	n inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	ised only			
fc	or charitable purpo	oses and not for the benefit of the donor o	r donor advisor, or for any other purpose co	onferring			
_	npermissible priva				Yes No		
Part	II Conserva	ation Easements. Complete if the or	ganization answered "Yes" on Form 990, Pa	art IV, line 7.			
1 P	Purpose(s) of conse	ervation easements held by the organization	on (check all that apply).				
Ĺ	Preservation	of land for public use (for example, recrea	tion or education)	a historically impo	rtant land area		
Ĺ	Protection of	natural habitat	Preservation of a	a certified historic	structure		
L	Preservation	of open space					
			fied conservation contribution in the form o				
da	ay of the tax year.			Held	at the End of the Tax Yea		
a To	otal number of co	nservation easements		<u>2</u> a			
	-						
			ucture included in (a)	<u>2</u> c			
		ation easements included in (c) acquired a					
3 N	lumber of conserv	ation easements modified, transferred, rel	eased, extinguished, or terminated by the o	organization during	g the tax		
ye	ear						
	lumber of states w	where property subject to conservation eas					
5 D	lumber of states w loes the organization	ion have a written policy regarding the per	iodic monitoring, inspection, handling of				
5 D vi	lumber of states w loes the organizati iolations, and enfo	ion have a written policy regarding the per preement of the conservation easements it	iodic monitoring, inspection, handling of the the termination of terminatio of termination of terminatio				
5 D vi	lumber of states w loes the organizati iolations, and enfo	ion have a written policy regarding the per preement of the conservation easements it	riodic monitoring, inspection, handling of				
5 D vi 6 S	lumber of states w loes the organizati iolations, and enfo staff and volunteer	ion have a written policy regarding the per procement of the conservation easements it hours devoted to monitoring, inspecting,	riodic monitoring, inspection, handling of t holds?	ervation easement	s during the year		
5 D vi 6 S	lumber of states w loes the organizati iolations, and enfo staff and volunteer	ion have a written policy regarding the per procement of the conservation easements it hours devoted to monitoring, inspecting,	iodic monitoring, inspection, handling of the the termination of terminatio of termination of terminatio	ervation easement	s during the year		
5 D vi 6 S ⁻ 7 A	lumber of states w loes the organizati iolations, and enfo staff and volunteer	ion have a written policy regarding the per preement of the conservation easements it hours devoted to monitoring, inspecting, es incurred in monitoring, inspecting, hanc	iodic monitoring, inspection, handling of t holds? handling of violations, and enforcing conse lling of violations, and enforcing conservation	ervation easement on easements dur	s during the year		
5 D vi 6 S ⁻ 7 A 8 D	Jumber of states w looes the organizati iolations, and enfo itaff and volunteer mount of expense	ion have a written policy regarding the per procement of the conservation easements it hours devoted to monitoring, inspecting, s incurred in monitoring, inspecting, hanc ation easement reported on line 2(d) abov	iodic monitoring, inspection, handling of t holds? handling of violations, and enforcing conse lling of violations, and enforcing conservation re satisfy the requirements of section 170(h)	ervation easement on easements dur)(4)(B)(i)	s during the year		
5 D vi 6 S ⁻ 7 A 8 D ar	Jumber of states w Does the organizati iolations, and enfo itaff and volunteer mount of expense Does each conserv nd section 170(h)(ion have a written policy regarding the per procement of the conservation easements it hours devoted to monitoring, inspecting, es incurred in monitoring, inspecting, hanc ation easement reported on line 2(d) abov 4)(B)(ii)?	iodic monitoring, inspection, handling of t holds? handling of violations, and enforcing conse dling of violations, and enforcing conservation re satisfy the requirements of section 170(h)	ervation easement on easements dur)(4)(B)(i)	s during the year		
5 D vi 6 S 7 A 8 D ar 9 In	Jumber of states w poes the organizati iolations, and enfo staff and volunteer mount of expense poes each conserv nd section 170(h)(n Part XIII, describ	ion have a written policy regarding the per procement of the conservation easements it hours devoted to monitoring, inspecting, es incurred in monitoring, inspecting, hanc ation easement reported on line 2(d) abov 4)(B)(ii)?	riodic monitoring, inspection, handling of t holds? handling of violations, and enforcing conse dling of violations, and enforcing conservation re satisfy the requirements of section 170(h) on easements in its revenue and expense s	ervation easement on easements dur)(4)(B)(i) statement and	s during the year		
5 D vi 6 S 7 A 8 D ar 9 In ba	Jumber of states w Does the organizati iolations, and enfo staff and volunteer mount of expense Does each conserv nd section 170(h)(n Part XIII, describ alance sheet, and	ion have a written policy regarding the per procement of the conservation easements it hours devoted to monitoring, inspecting, es incurred in monitoring, inspecting, hanc ation easement reported on line 2(d) abov 4)(B)(ii)? e how the organization reports conservation include, if applicable, the text of the footr	iodic monitoring, inspection, handling of t holds? handling of violations, and enforcing conse dling of violations, and enforcing conservation re satisfy the requirements of section 170(h)	ervation easement on easements dur)(4)(B)(i) statement and	s during the year		
5 D vi 6 S ⁻ 7 A 8 D ar 9 In br or	Jumber of states w poes the organizati iolations, and enfo staff and volunteer mount of expense poes each conserv nd section 170(h)(n Part XIII, describ- palance sheet, and rganization's acco	ion have a written policy regarding the per precement of the conservation easements it hours devoted to monitoring, inspecting, es incurred in monitoring, inspecting, hanc ation easement reported on line 2(d) abov 4)(B)(ii)? e how the organization reports conservation include, if applicable, the text of the footr punting for conservation easements.	riodic monitoring, inspection, handling of t holds? handling of violations, and enforcing conservation dling of violations, and enforcing conservation re satisfy the requirements of section 170(h) on easements in its revenue and expense s note to the organization's financial statemen	ervation easement on easements dur)(4)(B)(i) statement and nts that describes	s during the year		
5 D vi 6 S 7 A 8 D ar 9 In ba	Jumber of states w looes the organizati iolations, and enfo itaff and volunteer mount of expense looes each conserv nd section 170(h)(n Part XIII, describ inalance sheet, and rganization's acco III Organiza	ion have a written policy regarding the per procement of the conservation easements it hours devoted to monitoring, inspecting, es incurred in monitoring, inspecting, hand ation easement reported on line 2(d) abov 4)(B)(ii)? e how the organization reports conservation include, if applicable, the text of the footr punting for conservation easements. tions Maintaining Collections of	iodic monitoring, inspection, handling of t holds? handling of violations, and enforcing conservations dling of violations, and enforcing conservation re satisfy the requirements of section 170(h) on easements in its revenue and expense s note to the organization's financial statemer f Art, Historical Treasures, or Oth	ervation easement on easements dur)(4)(B)(i) statement and nts that describes	s during the year		
5 D vi 6 S 7 A 8 D au 9 In ba or Part	Jumber of states w looes the organizati iolations, and enfo itaff and volunteer mount of expense Does each conserv nd section 170(h)(n Part XIII, describ- ialance sheet, and <u>irganization's acco</u> Organiza Complete if	ion have a written policy regarding the per procement of the conservation easements it hours devoted to monitoring, inspecting, as incurred in monitoring, inspecting, hanc ation easement reported on line 2(d) abov (4)(B)(ii)? e how the organization reports conservation include, if applicable, the text of the footr punting for conservation easements. tions Maintaining Collections of the organization answered "Yes" on Form	iodic monitoring, inspection, handling of t holds? handling of violations, and enforcing conservation dling of violations, and enforcing conservation re satisfy the requirements of section 170(h) on easements in its revenue and expense s note to the organization's financial statement f Art, Historical Treasures, or Oth a 990, Part IV, line 8.	ervation easement on easements dur)(4)(B)(i) statement and nts that describes ner Similar As	s during the year ing the year Yes No the sets.		
5 D vi 6 S 7 A 8 D ar 9 In ba 0 0 Part I	Jumber of states w boes the organizati iolations, and enfo staff and volunteer mount of expense Does each conserv nd section 170(h)(n Part XIII, describ- ialance sheet, and organization's acco III Organiza Complete if the organization e	ion have a written policy regarding the per procement of the conservation easements it hours devoted to monitoring, inspecting, as incurred in monitoring, inspecting, hanc ation easement reported on line 2(d) abov 4)(B)(ii)? e how the organization reports conservation include, if applicable, the text of the footr punting for conservation easements. tions Maintaining Collections of the organization answered "Yes" on Form elected, as permitted under FASB ASC 95	riodic monitoring, inspection, handling of t holds? handling of violations, and enforcing conservation dling of violations, and enforcing conservation re satisfy the requirements of section 170(h) on easements in its revenue and expense s hote to the organization's financial statement f Art, Historical Treasures, or Oth a 990, Part IV, line 8.	ervation easement on easements dur)(4)(B)(i) statement and nts that describes ner Similar Ase	s during the year ing the year Yes No the sets.		
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5 D vi 6 S 7 A 8 D ar 9 In ba 00 9 In ba 10 11 If 01 (ii) 2 If (ii) 2 If th a 8 A	Jumber of states w looes the organizati iolations, and enfo itaff and volunteer mount of expense Does each conserv nd section 170(h)(n Part XIII, describ- ialance sheet, and rganization's acco III Organiza Complete if the organization of f art, historical treaser ervice, provide in la the organization of the organization o	ion have a written policy regarding the per- procement of the conservation easements it hours devoted to monitoring, inspecting, as incurred in monitoring, inspecting, hand ation easement reported on line 2(d) abov 4)(B)(ii)? e how the organization reports conservation include, if applicable, the text of the footr punting for conservation easements. tions Maintaining Collections of the organization answered "Yes" on Form elected, as permitted under FASB ASC 95 asures, or other similar assets held for public part XIII the text of the footnote to its finar elected, as permitted under FASB ASC 95 ures, or other similar assets held for public ng amounts relating to these items: ded on Form 990, Part VIII, line 1 d in Form 990, Part X received or held works of art, historical tre nts required to be reported under FASB ASC approximation of the provide to the footnote to the form 990, Part VIII, line 1	riodic monitoring, inspection, handling of t holds? handling of violations, and enforcing conservation ding of violations, and enforcing conservation re satisfy the requirements of section 170(h) on easements in its revenue and expense s hote to the organization's financial statement f Art, Historical Treasures, or Oth 1990, Part IV, line 8. 18, not to report in its revenue statement and polic exhibition, education, or research in further is a terments that describes these items as, to report in its revenue statement and base exhibition, education, or research in further asures, or other similar assets for financial of SC 958 relating to these items:	ervation easement on easements dur)(4)(B)(i) statement and nts that describes ner Similar Ass ad balance sheet work therance of public s. alance sheet work erance of public se 	s during the year ing the year Yes No the sets. vorks s of ervice,		

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Sche	dule D (Form 990) 2022 GRACE S	MITH HOUSE	, IN	с.			14-	162665'	7 Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	easures, o	r Other S	Similar Ass	ets _{(contir}	nued)
3	Using the organization's acquisition, accessi	on, and other record	s, checl	any of the	following that	make sign	ificant use of	its	
	collection items (check all that apply):								
а	Public exhibition	c	я 🛄 к	Loan or exc	change progra	am			
b	e Other								
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how th	ney further th	ne organizatio	n's exemp	t purpose in F	Part XIII.	
5	During the year, did the organization solicit of		,		,	er similar as	sets		
	to be sold to raise funds rather than to be ma							Yes	No
Par	t IV Escrow and Custodial Arran		ete if the	e organizatio	on answered '	'Yes" on Fo	orm 990, Part	IV, line 9, or	
	reported an amount on Form 990, Pa								
1a	Is the organization an agent, trustee, custodi								
	on Form 990, Part X?							Yes	X No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:				A	
								Amoun	t
	Beginning balance								
	Additions during the year						1d		
e	Distributions during the year						1e		
Ť	Ending balance							VV	
	Did the organization include an amount on F						?	X Yes	No X
	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete								Δ
I UI		(a) Current year		Prior year	(c) Two year) Three years b	ack (a) Four	years back
10	Paginning of year balance	(u) ourrent your	(5)1	nor your	(0) 100 you		rinoo youro b		youro buok
1a 5	Beginning of year balance								
D									
с	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
_	and programs								
	Administrative expenses								
-	End of year balance			. ,					
2	Provide the estimated percentage of the curr	-		g, column (a	i)) held as:				
a	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
С		_%							
	The percentages on lines 2a, 2b, and 2c sho								
3a	Are there endowment funds not in the posse	ession of the organiza	ation tha	it are held a	nd administer	ed for the		ſ	X N.
	organization by:								Yes No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations								
b	If "Yes" on line 3a(ii), are the related organiza							3b	
	Describe in Part XIII the intended uses of the		wment	funds.					
Fai	t VI Land, Buildings, and Equipm			/ line 11e (Davit V lin	o 10		
	Complete if the organization answere				1			<i>(</i>) –	
	Description of property	(a) Cost or c		.,	t or other		umulated	(d) Boo	k value
<u> </u>		basis (investr	nent)		(other)	depre	eciation	20	1 170
	Land				4,478.	2 2 2	0 1 2 /		<u>4,478.</u>
	Buildings			2 م, 8	29,067.	4,32	8,134.	1,50	0,933.
	Leasehold improvements			10		<u> </u>	0 170	1 0	2 776
				42	26,255.	29	2,479.	L3.	3,776.
	Other							1 0 2	0 107
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X. colur	nn (B), line 1	0c.)		-		9,187.
							Schee	dule D (Forn	n 990) 2022

232052 09-01-22

GRACE SMITH HOUSE, INC. Schedule D (Form 990) 2022 Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (including name of security) (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) Financial derivatives (2) Closely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H)

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Colu	umn (b) must equal Form 990, Part X, col. (B) line 15.)	
Part X	Other Liabilities.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.	
1.	(a) Description of liability	(b) Book value

(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
- Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)	

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

Schedule D (Form 990) 2022

X

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14-1626657 Page 3

Sche	dule D (Form 990) 2022 GRACE SMITH HOUSE, INC.				1626657	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per Re	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ι.				
1	Total revenue, gains, and other support per audited financial statements			1	2,264	<u>,293.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	. 2a	-572,999.			
b	Donated services and use of facilities	. 2b	1,815.			
с	Recoveries of prior year grants	. 2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e	-571	<u>,184.</u>
3	Subtract line 2e from line 1			3	2,835	<u>,477.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	21,320.			
b	Other (Describe in Part XIII.)	. 4b				
С	Add lines 4a and 4b			4c		,320.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.)			5	2,856	<u>,797.</u>
Pa	t XII Reconciliation of Expenses per Audited Financial Statem		n Expenses per F	leturi	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				0 504	110
1	Total expenses and losses per audited financial statements			1	2,504	,113.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	1 01 5			
а	Donated services and use of facilities		1,815.	-		
b	Prior year adjustments			-		
С	Other losses		4 - 2 - 2	-		
d	Other (Describe in Part XIII.)		15,359.			4 - 4
е				2e		<u>,174.</u>
3	Subtract line 2e from line 1			3	2,486	,939.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b		21,320.			
b	Other (Describe in Part XIII.)	. 4b				
С	Add lines 4a and 4b			4c		,320.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	2,508	,259.
Pa	rt XIII Supplemental Information.					

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

PART IV, LINE 2B:

THE ORGANIZATION HOLDS FUNDS ON BEHALF OF THE LOCAL DEPARTMENT OF SOCIAL

SERVICE OFFICE. THE AMOUNTS WILL BE RETURNED WHEN THE TENANT MOVES OUT AND

THE ORGANIZATION DOES NOT CLAIM ANY UNPAID RENT OR APARTMENT DAMAGES.

PART X, LINE 2:

THE ORGANIZATION RECOGNIZES THE EFFECTS OF INCOME TAX POSITIONS ONLY WHEN

THEY ARE MORE LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT HAS DETERMINED

THAT THE ORGANIZATION HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE

FINANCIAL STATEMENT RECOGNITION AND/OR DISCLOSURE. THE ORGANIZATION IS NO

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LONGER SUBJECT TO EXAMINATION BY APPLICABLE TAXING JURISDICTIONS FOR

PERIODS PRIOR TO DECEMBER 31, 2019.

232054 09-01-22

Schedule D (Form 990) 2022 GRACE SMITH HOUSE, INC. Part XIII Supplemental Information (continued)	14-1626657 Page
ART XII, LINE 2D - OTHER ADJUSTMENTS:	
OSS ON DISPOSAL OF ASSET REPORTED ON PART XI, LINE 9	14,359.
RITE OFF OF UNCOLLECTIBLE PLEDGE REPORT ON PART XI, LINE	9 1,000.
COTAL TO SCHEDULE D, PART XII, LINE 2D	15,359.
	Schedule D (Form 990) 20
2055 09-01-22 32	

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service			Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to www irs cov/Form900 for the latest information	er Assistance t d Individuals in answered "Yes" on Fo Attach to Form 990.	s and Other Assistance to Organizat ments, and Individuals in the United re organization answered "Yes" on Form 990, Part IV, Attach to Form 990.	izations, ed States t IV, line 21 or 22.		OMB No. 1545-0047 2022 Open to Public Inspection
Name of the organization	GRACE	SMITH HOUSE,	INC.					Employer identification number $14-1626657$
Part I General Ir 1 Does the organized orga	I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	d Assistance substantiate the	amount of the grants o	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selection	
criteria used to a	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the Holted States	ance?	aring the use of grant f	betin I hat i shur	l States			X Yes No
<u>i</u>	Grants and Other Assistance to Domestic Organizations and Domestic Governments. recipient that received more than \$5,000. Part II can be duplicated if additional space is nee	omestic Organiz ,000. Part II can	iations and Domestic be duplicated if additic	if additional space is needed.	complete if the orga ed.	inization answered "Y	Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any edd.	', line 21, for any
1 (a) Name and ac or go	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
2 Enter total numb	Enter total number of section 501(c)(3) and government organizations list Enter total number of other organizations listed in the line 1 table	d government org listed in the line 1	tanizations listed in the	ed in the line 1 table				
	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	ons for Form 990.					Schedule I (Form 990) 2022

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Schedule I (Form 990) 2022 GRACE SMITH HOUSE	SE, INC.				14-1626657 Page 2
ier Assistance to Do luplicated if additional	. Complete if the	organization answe	sred "Yes" on Form 9	90, 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
IN 2022 WE DISTRIBUTED \$11,892 IN ASSISTANCE. THIS GRANT FUNDING ASSISTED 66 UNDUPLICATED INDIVIDUALS, ADULTS AND CHILDREN COMBINED. THE REQUESTS FOR ASSISTANCE ENCOMPASSED SAFETY AND	66	11,892.			
DONATED FOOD AND MERCHANDISE THE SOURCE OF THESE ITEMS IS OUR MANY DONORS. THESE ITEMS ALSO BENEFITTED APPROXIMATELY 575 PEOPLE. NON-CASH ASSISTANCE \$68,518.	575	.0	68,518.	FMV	FOOD AND MERCHANDISE
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	uired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.	
PART I, LINE 2:					
GRACE SMITH HOUSE RECEIVES GRANT FU	FUNDS THAT	ARE FOR	THE PURPOSE	OF	
PROVIDING DIRECT FINANCIAL ASSISTANCE	TO	VICTIMS OF D	DOMESTIC VIOLENCE	DLENCE SERVD	
BY OUR PROGRAMS. THESE GRANT FUNDS	S PROVIDE FOR	: FOR CRITICAL,		UNMET NEEDS FOR	
VICTIMS OF DOMESTIC VIOLENCE IN OUR	R RESIDENTIAL		OR NON-RESIDENTIAL	IAL	
PROGRAMS. THESE FUNDS ARE USED WHEN	OTHER	SOURCES HAVE BEEN		SOUGHT AND	
COULD NOT BE SECURED OR WHEN ALTERNATE	NATE SOURCES	CES CAN NOT	ΒE	IDENTIFIED. WHEN	
ADVOCATES WORKING WITH VICTIMS IDEN	IDENTIFY A F	FINANCIAL C	CRISIS THAT	CAN BE	
HELPED VIA THE GRANT FUNDS, THEY CC	COMPLETE A	AN APPLICAT	APPLICATION PACKET WITH THE	WITH THE	
232102 10-31-22 SEE PART IV FOR COLUMN	(Y)	DESCRIPT 3@ NS	70		Schedule I (Form 990) 2022

Schedule I (Form 990) GRACE SMITH HOUSE, INC.	14-1626657 Page 2
Part IV Supplemental Information	
VICTIM. THIS APPLICATION IS SUBMITTED TO THE SUPERVIS	SOR FOR APPROVAL.
REQUESTS OVER \$100 REQUIRE THE APPROVAL OF THE EXECUT	TIVE DIRECTOR. THE
FINANCE DEPARTMENT ISSUES PAYMENT TO THE THIRD PARTY	AND MAINTAINS RECORDS
DOCUMENTING DISBURSEMENTS AS WELL AS SUBMITTING FISC	AL REPORTS AS PER
FUNDER REQUIREMENTS. REGULAR REPORTS ON THE NUMBER	OF REQUESTS, CATEGORY,
TOTAL NUMBER OF PERSONS WHO BENEFIT FROM THE REQUEST	, AND AMOUNT DISBURSED
PER PERSON ARE SUBMITTED TO FUNDERS AND YEARLY SITE	VISITS TO AUDIT THE
GRANT FUNDING IS CONDUCTED BY FUNDERS.	
PART III, COLUMN (A):	
(A) TYPE OF GRANT OR ASSISTANCE: IN 2022 WE DISTRIBUT	TED \$11,892 IN

ASSISTANCE. THIS GRANT FUNDING ASSISTED 66 UNDUPLICATED INDIVIDUALS,

ADULTS AND CHILDREN COMBINED. THE REQUESTS FOR ASSISTANCE ENCOMPASSED

SAFETY AND SURVIVAL NEEDS INCLUDING UTILITIES; RENTAL AND HOUSING

ASSISTANCE; COURT AND DOCUMENTATION NEEDS; MEDICATION; TRANSPORTATION;

CLOTHING; EMPLOYMENT, (LICENSE, TRAINING, EQUIPMENT) FOOD AND FURNITURE.

232291 04-01-22

SC	HEDULE M			Nonc	ash Contri	butions		OMB No.	1545-004	17
(Fo	rm 990)							20	22)
		Compl	ete if the or	ganizations	answered "Yes" o Attach to Form 9	n Form 990, Part IV, lines 2	9 or 30.	Open t		
	ment of the Treasury I Revenue Service	G	io to www.i	rs.gov/Form		90. Is and the latest informatio	n.		o Publi ection	IC
Name	e of the organizatior							ployer identificat	ion nur	nber
			SMITH	HOUSE,	INC.			14-1626	657	
Par	tl Types of	Property								
				(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) Method of determi cash contribution a	•	s
1	Art - Works of art									
2	Art - Historical trea									
3	Art - Fractional inte	erests								
4	Books and publica	tions								
5	Clothing and house					60,306.	COST			
6	Cars and other veh									
7	Boats and planes									
8	Intellectual propert									
9	Securities - Public									
10	Securities - Closely									
11	Securities - Partner	• • •								
10										
12 13	Securities - Miscell Qualified conserva									
13										
14	Historic structures Qualified conserva									
15	Real estate - Resid									
16	Real estate - Comr									
17	Real estate - Other									
18	Collectibles									
19	Food inventory				55	9,412.	COST			
20	Drugs and medical									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specime									
24	Archeological artifa									
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8		, ,						0	
	for which the organ	nization comple	eted Form 82	283, Part V, D	onee Acknowledge	ement 29			0	
									Yes	No
30a						orted in Part I, lines 1 throug		π		
		2				ch isn't required to be used				x
h	exempt purposes f		•					<u>30a</u>		
р 31	If "Yes," describe t	•		policy that re	ouires the review o	of any nonstandard contribut	tions?	31	x	
						it, process, or sell noncash				
	contributions?		•					<u>32a</u>		x
	If "Yes," describe i					for a shirt of the second s				
33		didn't report ar	n amount in	column (c) fo	r a type of property	for which column (a) is cheo	cked,			
1.1.1.4	describe in Part II.	Doduction A -	Notice	the last	tiono for Form 000			Sobodula M /F	m 000	2000
LHA	For Paperwork	neulotion ACI	i Notice, see		tions for Form 990			Schedule M (For	m 990)	2022

232141 09-09-22

Schedule M (Form 990) 2022 GRACE SMITH H							626657	Page 2
Part II Supplemental Information. Provide is reporting in Part I, column (b), the number	the information	ation require	d by Pa	art I, lines 30b, of items receiv	32b, and 3	33, and wheth mbination of b	er the organiz	zation
this part for any additional information.						Indination of D	011. AISO COI	nhiere
SCHEDULE M, PART I, COLUMN (B):							
	/ -							
THE ORGANIZATION IS REPORTING	THE 1	NUMBER	OF	CONTRIB	UTORS	IN COLU	JMN (B)	•
232142 09-09-22						Sche	edule M (For	m 990) 202:
		~ -						
		37	_	_				_
51109 756359 1561190.000		2022.0	500	0 GRACE	SMITH	HOUSE,	INC.	15611

DocuSign Envelope ID: 7279AD70-6A6A-4BB4-AE9C-3140AF6EEDF1

SCHEDULE O (Form 990) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990 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.	-EZ	OMB No. 1545-0047				
Name of the organization	GRACE SMITH HOUSE, INC.		r identification number 626657				
FORM 990, PA	RT III, LINE 1, DESCRIPTION OF ORGANIZATION MI	SSION:					
THE MISSION	THE MISSION OF GRACE SMITH HOUSE, INC. IS TO ENABLE INDIVIDUALS AND						
FAMILIES TO	LIVE FREE FROM DOMESTIC VIOLENCE BY:						
1. PROVIDIN	G SHELTER AND APARTMENTS, ADVOCACY, COUNSELING	AND					
EDUCATION							
2. RAISING THE CONSCIOUSNESS OF THE COMMUNITY REGARDING THE EXTENT,							
TYPE AND SERIOUSNESS OF DOMESTIC VIOLENCE							
3. INITIATING AND TAKING POSITIONS ON PUBLIC POLICIES IN ORDER TO							
PROVIDE OPTIONS WHICH EMPOWER VICTIMS OF DOMESTIC VIOLENCE							
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:							
THE AVERAGE LENGTH OF STAY DURING THE YEAR WAS 67 DAYS. OUR SHELTER							
PROGRAM PROV	IDES THREE MEALS DAILY INCLUDING SNACKS AVAILA	BLE AN	IYTIME.				
DURING A SHE	LTER STAY, ALL BASIC NECESSITIES SUCH AS TOILE	TRIES,					
HYGIENE PROD	UCTS, DIAPERS, WIPES, EMERGENCY CLOTHING, SCHO	OL SUP	PLIES,				
CHILD STROLL	ERS AND CAR SEATS ARE PROVIDED FOR BY OUR PROG	RAM. A	DULTS				
ARE ASSIGNED	A CASE MANAGER WHO HELPS FAMILIES CREATE A SA	FETY F	PLAN,				
ASSESS RISK	FOR LETHALITY, DETERMINE IMMEDIATE AND SHORT T	ERM NE	EDS AND				
TO ASSIST IN	NAVIGATING BOTH FAMILY AND CRIMINAL COURT, SO	CIAL					
SERVICES, LA	W ENFORCEMENT, ACCESS TO LEGAL ASSISTANCE, MED	ICAL					
SERVICES, TRANSPORTATION, EMPLOYMENT AND HOUSING. TRANSPORTATION IS							
PROVIDED FOR VICTIMS USING AGENCY VEHICLES AND CHILDCARE IS OFTEN MADE							
AVAILABLE.	WE PROVIDE DOMESTIC VIOLENCE COUNSELING ON AN	INDIVI	DUAL				
BASIS AS WEL	L AS WEEKLY SUPPORT GROUPS THROUGHOUT THE YEAR	. SEF	VICES				
ARE PROVIDED	TO CHILDREN AND PARENTS BY A YOUTH ADVOCATE,	AND IN	1				
	CHILDCARE, SERVICES INCLUDE PARENTING SUPPORT,						
LHA For Paperwork R 232211 10-28-22	eduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Sche	edule O (Form 990) 2022				

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Schedule O (Form 990) 2022	Page 2			
Name of the organization GRACE SMITH HOUSE, INC.	Employer identification number 14-1626657			
ADVOCACY, PLAY GROUPS AND SOCIAL ACTIVITY FOR CHILDREN DUR	ING THEIR			
SHELTER STAY. ALL SERVICES ARE FREE AND CONFIDENTIAL. THE	LOCATION OF			
THE SHELTER IS CONFIDENTIAL AS WELL. THE LENGTH OF A SHELT	ER PROGRAM IS			
90 DAYS WITH THE POSSIBILITY OF TWO 45 DAY EXTENSIONS DEPEN	NDING ON			
FAMILY NEEDS. THE MAXIMUM ALLOWED STAY IS 180 DAYS.				
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMEN	rs:			
VIOLENCE, PROVIDE RISK ASSESSMENT, ENGAGE IN SAFETY PLANNI	NG, EDUCATE			
THE INDIVIDUAL ABOUT VICTIM RIGHTS AND OPTIONS AS WELL AS EXPLAIN HOW				
THE CIVIL COURT PROCESS WORKS. ADVOCATES ASSIST AND SUPPORT PETITIONERS				
IN COMPLETING PAPERWORK AND FILING FOR EMERGENCY ORDERS OF	PROTECTION.			
DURING THE YEAR, THIS PROGRAM ASSISTED 850 PETITIONERS TO	FILE FOR			
EMERGENCY PROTECTIVE ORDERS. GRACE SMITH HOUSE ALSO HAS A	SEPARATE			
COURT ADVOCATE WHO IS RESPONSIBLE FOR ACCOMPANYING VICTIMS	TO COURT,			
HELPING THEM UNDERSTAND THE COURT PROCEEDINGS, CONNECTING	THEM TO LEGAL			
SERVICES, AND PROVIDING ADVOCACY AS NEEDED. THIS ADVOCATE	WAS ABLE TO			
PROVIDE EXTENSIVE COURT ADVOCACY SERVICES TO 97 VICTIMS BY	PROVIDING			
ADVOCACY AND/OR ACCOMPANIMENT TO COURT.				
CHILD PROTECTIVE SERVICES DOMESTIC VIOLENCE LIASON PROGRAM	- GRACE			

SMITH HOUSE HAS TWO DOMESTIC VIOLENCE LIAISONS EMBEDDED IN THE CHILD

PROTECTIVE SERVICES UNIT AT OUR LOCAL DISTRICT OF SOCIAL SERVICES.

THESE LIAISONS SERVE AS A KNOWLEDGEABLE RESOURCE TO CHILD PROTECTIVE

SERVICES CASEWORKERS REGARDING ISSUES RELATED TO DOMESTIC VIOLENCE.

THEY ALSO PROVIDE DOMESTIC VIOLENCE SERVICES TO THOSE FAMILIES REFERRED

FROM THE CHILD PROTECTIVE SERVICES UNIT. LAST YEAR THESE LIAISONS

SERVED 192 FAMILIES AND PROVIDED 188 CONSULTATIONS TO CHILD PROTECTIVE

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SERVICES CASEWORKERS.

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Schedule O (Form 990) 2022	Page 2
Name of the organization	Employer identification number
GRACE SMITH HOUSE, INC.	14-1626657

PREVENTION AND EDUCATION - GRACE SMITH HOUSE IS DEDICATED TO RAISING
THE CONSCIOUSNESS OF THE COMMUNITY REGARDING THE EXTENT, TYPE, AND
SERIOUSNESS OF INTIMATE PARTNER VIOLENCE. OUR PREVENTION AND EDUCATION
PROGRAM FOCUSES ON GIVING YOUNG PEOPLE THE TOOLS THEY NEED TO HAVE
HEALTHY RELATIONSHIPS AND RECOGNIZE ABUSIVE BEHAVIORS. GRACE SMITH
HOUSE EDUCATORS VISIT MIDDLE AND HIGH SCHOOLS, TRYING TO REACH ALL
DISTRICTS IN DUTCHESS COUNTY, WITH PRESENTATIONS. IN MIDDLE SCHOOLS,
EDUCATION FOCUSES ON BULLYING PREVENTION, WHILE IN HIGH SCHOOLS THE
FOCUS IS TEEN DATING VIOLENCE PREVENTION WITH TOPICS SUCH AS HEALTHY
RELATIONSHIPS, DATING VIOLENCE, SAFETY PLANNING, AND SOCIAL MEDIA
SAFETY. DURING THE YEAR THIS PROGRAM EDUCATED 3,737 MIDDLE AND HIGH
SCHOOL STUDENTS, AND 288 ELEMENTARY SCHOOL CHILDREN. GRACE SMITH HOUSE
ALSO EDUCATES HEALTHCARE PROVIDERS ON HOW TO IDENTIFY, ASSESS AND
SAFELY SCREEN FOR THE PRESENCE OF DOMESTIC VIOLENCE. DURING THE YEAR,
WE SUCCESSFULLY EDUCATED 63 HEALTHCARE PROVIDERS ON HOW TO SCREEN FOR
THE PRESENCE OF DOMESTIC VIOLENCE AND CONNECT VICTIMS TO SERVICES. AN
ADDITIONAL 220 COMMUNITY PROVIDERS RECEIVED TRAINING ON DOMESTIC
VIOLENCE, HOW TO SCREEN FOR DOMESTIC VIOLENCE AND WAYS TO CONNECT
VICTIMS TO SERVICES IN THE COMMUNITY.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: OTHER SERVICES. WE ALSO PROVIDE A FOOD PANTRY STOCKED WITH DRY GOODS, TOILETRIES, DIAPERS, BABY ITEMS, CLEANING PRODUCTS, AND HOUSEHOLD GOODS. THIS PANTRY IS AVAILABLE FOR NON-RESIDENTIAL PARTICIPANTS FREE OF CHARGE (AVAILABILITY OF ITEMS DEPENDS UPON DONATIONS). LIMITED AMOUNTS OF CLOTHING, LINENS, AND HOUSEHOLD GOODS/FURNITURE ARE ALSO AVAILABLE (DEPENDING ON DONATIONS AND STORAGE CONSIDERATIONS). A TOTAL 232212 10-28-22 40

16251109 756359 1561190.000

Schedule O (Form 990) 2022	Page 2
Name of the organization GRACE SMITH HOUSE, INC.	Employer identification number 14-1626657
OF 188 CLIENTS RECEIVED SERVICES; ADVOCACY WAS PROVIDED A	TOTAL OF
5,364 TIMES; 55 SUPPORT GROUP SESSIONS WERE PROVIDED; AND	538
INDIVIDUAL THERAPEUTIC SESSIONS WERE PROVIDED. IN ADDITION	, 101
CHILDREN OBTAINED SUPPORT SERVICES AND OUR CHILDREN'S SUPP	ORT GROUP MET
55 TIMES. OUR YOUTH ADVOCATE PROVIDED CHILDCARE 147 TIMES	DURING THE
YEAR.	
LATINA FAMILY ADVOCATE/OUTREACH PROGRAM - OUR LATINA FAMIL	
ADVOCATE/OUTREACH PROGRAM WAS PIONEERED BY GRACE SMITH HOU	
	NA COMMUNITY
	ATINA VICTIMS
IN ADDITION, THIS POSITION HAS, THROUGH EXTENSIVE OUTREACH	
	PROVIDERS WHO
ARE EXPERT IN PROVIDING SERVICES TO LATINA VICTIMS. DURING	THE YEAR THE
LATINA FAMILY ADVOCATE WORKED WITH 73 FAMILIES PROVIDING A	DVOCACY,
SUPPORT, INFORMATION AND REFERRALS. THIS PROGRAM ALSO PROV	IDED 18
OUTREACH PRESENTATIONS TO THE COMMUNITY. SUPPORT GROUP IN	SPANISH IS
OFFERED AND WEEKLY GROUP SESSIONS WERE CONDUCTED DURING TH	E YEAR.

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

BROOKHAVEN TRANSITIONAL HOUSING

BROOKHAVEN TRANSITIONAL HOUSING COMPRISES OF 14 APARTMENTS, RANGING IN

SIZE FROM STUDIO APARTMENTS TO THREE BEDROOMS. RESIDENTS MAY STAY IN

THE HOUSING PROGRAM FOR UP TO TWO YEARS (24 MONTHS). ELIGIBILITY FOR

THIS SECOND STAGE HOUSING PROGRAM IS DETERMINED BY SEVERAL FACTORS

 INCLUDING BEING A VICTIM OF DOMESTIC VIOLENCE AND CURRENTLY FLEEING AN

 Schedule O (Form 990) 2022

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 16251109 756359 1561190.000

 2022.05000 GRACE SMITH HOUSE, INC.

 15611901

Schedule O (Form 990) 2022 Name of the organization	Page 2 Employer identification number
GRACE SMITH HOUSE, INC.	14-1626657
ABUSIVE RELATIONSHIP. THIS PROGRAM IS OFFERED TO FAMILIES	WHO WANT AND
NEED A LONGER AMOUNT OF TIME TO WORK ON SAFETY, HEALING AN	D THE
ACHIEVEMENT OF SPECIFIC GOALS. WHILE MANY BROOKHAVEN RESID	ENTS ARE
REFERRED BY OUR DOMESTIC VIOLENCE SHELTER CASE MANAGERS AT	THE
CONCLUSION OF THEIR SHELTER STAYS, OTHERS ARE REFERRED THR	OUGH OUR
NON-RESIDENTIAL PROGRAM OR BY OUR COMMUNITY PARTNERS. WHIL	E IN THE
BROOKHAVEN HOUSING PROGRAM, RESIDENTS ARE PROVIDED WITH CA	SE
MANAGEMENT, INDIVIDUAL AND/OR GROUP COUNSELING, CHILDREN'S	SERVICES,
LEGAL ADVOCACY, RECREATIONAL OPPORTUNITIES AND ALL OTHER A	VAILABLE
AGENCY SERVICES AS NEEDED. THE BROOKHAVEN PROGRAM IS A SUP	PORTIVE
COMMUNITY THAT PROMOTES SAFETY, HEALING FROM TRAUMA, RESIL	IENCY FOR THE
FUTURE, AND GOOD HEALTH. DURING THE YEAR, 19 FAMILIES AND	33 OF THEIR
CHILDREN RESIDED IN OUR TRANSITIONAL HOUSING PROGRAM.	
EXPENSES \$ 328,212. INCLUDING GRANTS OF \$ 13,524. REVEN	UE \$ 205,446.
FORM 990, PART VI, SECTION B, LINE 11B:	

GRACE SMITH HOUSE, INC. HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE INFORMATION REPORTED IS COMPLETE AND ACCURATE. WHEN THE FORM 990 HAS BEEN PREPARED, REVIEWED BY MANAGEMENT AND IS READY TO BE FILED WITH THE INTERNAL REVENUE SERVICE, IT IS ELECTRONICALLY SENT TO THE BOARD MEMBERS OF THE ORGANIZATION FOR ANY COMMENTS. ANY COMMENTS ARE THEN GROUPED, SUMMARIZED AND PROVIDED TO THE OUTSIDE ACCOUNTANTS. EACH ISSUE IS DOCUMENTED AND ADDRESSED UNTIL THE RETURN IS FINALIZED AND APPROVED FOR FILING.

FORM 990, PART VI, SECTION B,	LINE 12C:
THE CONFLICT OF INTEREST POLIC	CY IS APPLICABLE TO ALL BOARD MEMBERS AND
OFFICERS OF THE ORGANIZATION.	AFTER DISCLOSURE OF THE CONFLICT OF INTEREST
232212 10-28-22	Schedule O (Form 990) 2022
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6251109 756359 1561190.000	2022.05000 GRACE SMITH HOUSE, INC. 15611901

Schedule O (Form 990) 2022	Page 2
Name of the organization GRACE SMITH HOUSE, INC.	Employer identification number 14-1626657
AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE	INTERESTED
PERSON, THE BOARD SHALL DISCUSS THE POTENTIAL CONFLICT OF	INTEREST AND VOTE
UPON WHETHER TO PROCEED WITH THE TRANSACTION OR AGREEMENT.	AN INTERESTED
PERSON SHALL NOT PARTICIPATE IN OR BE PERMITTED TO HEAR TH	E BOARD'S
DISCUSSION ON THE POTENTIAL CONFLICT OF INTEREST. AN INTER	RESTED PERSON
SHALL NOT VOTE ON THE ISSUE OR ATTEMPT TO EXERT HIS OR HER	PERSONAL
INFLUENCE WITH RESPECT TO THE MATTER. AN INTERESTED PERSO	N'S INELIGIBILITY
TO VOTE SHALL BE REFLECTED IN THE MINUTES OF THE BOARD MEE	TING.

ANNUALLY ALL BOARD MEMBERS AND OFFICERS SHALL SIGN A STATEMENT AFFIRMING THAT THEY HAVE READ AND UNDERSTOOD THE ORGANIZATION'S CONFLICT OF INTEREST, AND THAT ANY ACTUAL OR POTENTIAL CONFLICTS HAVE BEEN DISCLOSED.

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

EACH JOB IN THE AGENCY IS ASSIGNED TO A SALARY LEVEL. WITHIN EACH LEVEL THERE IS A MINIMUM SALARY AND A MAXIMUM SALARY. ONCE AN EMPLOYEE REACHES THE MAXIMUM SALARY, THE EMPLOYEE IS NO LONGER ELIGIBLE TO RECEIVE A SALARY INCREASE. EXCEPTIONS FOR AN EMPLOYEE WHO IS PAID OUTSIDE THE RANGE MUST BE APPROVED BY THE HUMAN RESOURCE COMMITTEE.

THE EXECUTIVE DIRECTOR AND CFO'S SALARIES ARE DETERMINED BY THE EXECUTIVE COMMITTEE AND THE CHAIR OF HUMAN RESOURCE COMMITTEE. THE SALARY IS BASED ON A REVIEW OF COMPARABLE SALARIES IN OTHER AGENCIES IN THE REGION.

THE BOARD APPROVES THE SALARY OF THE EXECUTIVE DIRECTOR AND THE CFO AT THE SAME TIME AS THE APPROVAL OF THE OPERATING BUDGET, AND SUCH APPROVAL IS DOCUMENTED IN THE BOARD MINUTES. THIS APPROVAL OF SALARIES WAS LAST DONE IN 2022 AS AN INTEGRATED COMPONENT OF THE ANNUAL AGENCY BUDGET APPROVAL 232212 10-28-22 43 16251109 756359 1561190.000 2022.05000 GRACE SMITH HOUSE, INC. 15611901 DocuSign Envelope ID: 7279AD70-6A6A-4BB4-AE9C-3140AF6EEDF1

GRACE SMITH HOUSE, INC.	Employer identification number
PROCESS.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC	C INSPECTION AS
REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE COD	E. THE RETURN IS
POSTED ON THE ORGANIZATION'S WEBSITE, GUIDESTAR.ORG AND	OTHER SIMILAR TYPES
OF WEBSITES. IN ADDITION, THE FINANCIAL STATEMENTS, ART	ICLES OF
INCORPORATION, FORM 990, FORM 1023, CONFLICT OF INTERES	T POLICY, AND
BY-LAWS ARE ALSO AVAILABLE UPON WRITTEN REQUEST OR BY C	ALLING THE
DRGANIZATION DIRECTLY.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
LOSS ON DISPOSAL OF ASSET	-14,359.
VRITE OFF OF UNCOLLECTIBLE PLEDGE	-1,000.
FOTAL TO FORM 990, PART XI, LINE 9	-15,359.
FORM 990, PART XII, LINE 2C:	
THE ORGANIZATION HAS AN AUDIT AND FINANCE COMMITTEE THA	T ASSUMES
RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANC	IAL STATEMENTS
AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCES	S DID NOT CHANGE
FROM THE PRIOR YEAR.	

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Schedule O (Form 990) 2022 2022.05000 GRACE SMITH HOUSE, INC. 15611901