

**CHAR500
Online**For new annual filings,
and amendments**Annual Filing for Charitable Organizations**New York State Office of the Attorney General
Charities Bureau - Registration Section
28 Liberty Street
New York, NY 10005
charitiesnys.com**Open to Public
Inspection**

Filing Type:

 New Filing AmendmentFiling Year: 2022**General Information**

Current Organization Name:	<u>OUTREACH DEVELOPMENT CORPORATION</u>	Updated Name:	<u>N/A</u>
NY Registration Number:	<u>03-08-00</u>	Registration Category:	<u>DUAL</u>
Organization Type:	<u>Corporation</u>	EIN:	<u>112518262</u>
Current Fiscal Year End:	<u>06/30</u>	Updated Fiscal Year End:	<u>N/A</u>
Organization Email:	<u>tonycroce@opiny.org</u>	Organization's Phone:	<u>7188479233</u>
Tax Exempt Status:	<u>501(c)(3)</u>	Website:	<u>www.opiny.org</u>

Organization Address

Mailing Address	Principal Address	NY State Address
11711 Myrtle Avenue Richmond Hill NY 11418 UNITED STATES	11711 Myrtle Avenue Richmond Hill NY 11418 UNITED STATES	NA

Primary Contact Information

First Name: Irving Last Name: Dela Cruz Title: Sr. Vice President of Finance and CFO
 Phone: 7188479233 Email: irvingdelacruz@opiny.org

Organization Type

Type of IRS document filed with IRS: IRS990 Organization Type: Public

Third Party Preparer Information

First Name: Anthony Last Name: Croce Title: _____
 Firm Name: Anthony J. Croce, CPA Phone: 5166714551 Email: tonycroce.cpa@gmail.com

Third Party Address

Street: 75 TODD DR N
 City: GLEN HEAD State: NY
 Zip: 11545 Country: United States

Registration Category

1. Does the organization conduct activity in New York State other than soliciting? This may include, but is **not limited to**, maintaining an office, having employees or staff, or running a program.
 Yes No
2. Does the organization have assets in New York State?
 Yes No
3. Is the organization incorporated or formed in New York State?
 Yes No
4. Has the organization received more than \$25,000 in total contributions from New York State residents, foundations, corporations or government agencies or other entities in the period covered by this filing?
 Yes No
5. Does the organization plan to receive more than \$25,000 annually in total contributions from New York State residents, foundations, corporations, government agencies or other entities?
 Yes No
6. Does the organization use a professional fundraiser or fundraising counsel?
 Yes No

Based on your responses to the above questions, this organization's registration category remains as DUAL

Contribution Information

1. Did the organization solicit or receive contributions during the fiscal year in New York State?
 Yes No
3. Choose the total contributions in New York State this fiscal year: \$10,000,000-\$50,000,00

Annual Exemptions

1. Were the total contributions from New York State, including residents, foundations, government agencies, etc. under \$25,000 during the fiscal year?
 Yes No N/A
2. Did the organization use a professional fundraiser or fundraising counsel during the fiscal year?
 Yes No N/A
3. Were the organization's gross receipts under \$25,000 and the market value of its assets under \$25,000 during the fiscal year?
 Yes No

Based on your responses to annual exemption questions, this organization is required to file under DUAL during this fiscal year.

Financial Information

Type of IRS document filed with IRS IRS990 Organization's total revenue: 29,395,343
 Organization's total contributions: 17,369,892 Organization's total assets: N/A
 Organization's net assets: 10,024,023 Organization's total revenue and contributions: N/A
 Organization's total liabilities: N/A Organization's total assets/worth: N/A
 Organization's total income: N/A

For this filing year, does your organization plan to complete any of the following with the New York State Charities Bureau?

Closing Withdrawing Dissolving None

Is this your final filing with New York State? Yes No N/A

Filing Information

Did your organization use a professional fundraiser or fundraising counsel for fundraising activity in New York State?

Yes No

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

Did the organization receive government grants during this fiscal year?

Yes No

Government Grant Agency	Grant Amount
NYS OFFICE OF ADDICTION SERVICES AND SUPPORTS	\$13,361,022.00
SUFFOLK DEPARTMENT OF ALCOHOLISM & SUBSTANCE ABUSE	\$971,734.00
NYS DEPARTMENT OF HEALTH	\$403,687.00
RESEARCH FOUNDATION FOR MENTAL HEALTH	\$1,283,034.00
	To be continued in Appendix page 2

Documents

Attached organization's required documents:

- IRS document
- Certified Public Accountant's Audit Report
- Certified Public Accountant's Review Report
- Complete Certificate of Amendment or other document amending the name
- Other documents

Signatures

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

Role	First Name	Last Name	Email
President	Debbie	Pantin	debbiepantin@opiny.org
Chief Financial Officer	Irving	Dela Cruz	irvingdelacruz@opiny.org

Signature of
President

DocuSigned by:

Debbie Pantin

04B0000F0E0400...

Date:

4/25/2024

Signature of
Chief Financial Officer

DocuSigned by:

Irving Dela Cruz

A2A2D33C32BD43E...

Date:

4/26/2024

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2022

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

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

A For the 2022 calendar year, or tax year beginning 7/1/2022, and ending 6/30/2023

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization OUTREACH DEVELOPEMENT CORPORATION
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
11711 MYRTLE AVENUE
 City or town State ZIP code
Richmond Hill NY 11418-1751
 Foreign country name Foreign province/state/county Foreign postal code

D Employer identification number 11-2518262

E Telephone number (718) 847-9233

F Name and address of principal officer:
DEBBIE PANTIN 11711 MYRTLE AVENUE, RICHMOND HILL, NY 114

G Gross receipts \$ 29,395,343

H(a) Is this a group return for subsidiaries? Yes No
H(b) Are all subsidiaries included? Yes No
 If "No," attach a list. See instructions

I Tax-exempt status: 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527

J Website: WWW.OPINY.ORG

K Form of organization: Corporation Trust Association Other

L Year of formation: 1979

M State of legal domicile: NY

H(c) Group exemption number _____

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>PROVIDE TREATMENT FOR SUBSTANCE ABUSER AMBULATORY OUTPATIENT AND RESIDENTIAL INPATIENT AND COMMUNITY RESIDENTIAL SETTINGS. ALSO PROVIDE CREDENTIALING AND CONTINUING EDUCATION FOR THE SUBSTANCE USE DISORDER FIELD.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	508
	6 Total number of volunteers (estimate if necessary)	6	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	15,243,321	17,369,892
	9 Program service revenue (Part VIII, line 2g)	9,750,223	11,960,000
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,386	4,178
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	31,428	61,273
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	25,029,358	29,395,343
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	18,297,002	21,991,764
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25)	0	
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	6,705,879	7,903,107
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	25,002,881	29,894,871	
19 Revenue less expenses. Subtract line 18 from line 12	26,477	-499,528	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 34,164,893	End of Year 36,063,751
	21 Total liabilities (Part X, line 26)	23,641,342	26,039,728
	22 Net assets or fund balances. Subtract line 21 from line 20	10,523,551	10,024,023

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: DEBBIE PANTIN Date: PRESIDENT AND CEO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: Anthony J Croce, CPA Preparer's signature: Anthony J Croce, CPA Date: 4/23/2024 Check if self-employed PTIN: P01497337

Firm's name: Anthony J. Croce, CPA Firm's EIN: 82-0951428

Firm's address: 75 Todd Drive North, Glen Head, NY 11545-1405 Phone no.: 516-671-4551

May the IRS discuss this return with the preparer shown above? See instructions. Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: PROVIDE TREATMENT FOR SUBSTANCE ABUSERS IN AMBULATORY OUTPATIENT AND RESIDENTIAL INPATIENT AND COMMUNITY RESIDENTIAL SETTINGS. ALSO PROVIDE CREDENTIALING AND CONTINUING EDUCATION FOR THE SUBSTANCE USE DISORDER FIELD.

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 [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 11,912,878 including grants of \$ 0) (Revenue \$ 7,363,701) RESIDENTIAL SUBSTANCE USE DISORDER PROGRAMS: PROVIDE INTENSIVE RESIDENTIAL TREATMENT FOR CHEMICALLY DEPENDENT YOUTHS AND COMMUNITY RESIDENTIAL FACILITIES FOR CHEMICALLY DEPENDENT ADULTS. ALSO PROVIDE EVALUATION, ASSESSMENT AND REFERRAL TO OTHER SUBSTANCE USE DISORDER AND WHEN APPROPRIATE MENTAL HEALTH FACILITIES FOR ADOLESCENT AND SDULT SUBSTANCE ABUSERS. (33,960 PATIENT DAYS PROVIDED)

4b (Code:) (Expenses \$ 11,586,678 including grants of \$) (Revenue \$ 3,716,392) OUTPATIENT SUBSTANCE USE DISORDER PROGRAMS: PROVIDE EVALUATION, ASSESSMENT AND TREATMENT, TO ADOLESCENT AND ADULT SUBSTANCE ABUSERS, OR REFERRAL WHEN APPROPRIATE, TO OTHER SUBSTANCE ABUSE DISORDER AND MENTAL HEALTH FACILITIES. ALSO PROVIDE AMBULATORY OUTPATIENT INDIVIDUAL, FAMILY AND SPECIALIZED TREATMENT SERVICES TO ADLOESCENT AND ADULT SUBSTANCE ABUSERS AND THEIR FAMILIES. (43,606 UNITS OF SERVICES PROVIDED)

4c (Code:) (Expenses \$ 1,264,903 including grants of \$) (Revenue \$ 354,839) INTENSIVE OUTPATIENT SUBSTANCE USE DISORDER PROGRAM: PROVIDE EVALUATION, ASSESSMENT AND TREATMENT, TO WOMEN WITH SUBSTANCE USE DISORDER PROBLEMS AND THEIR CHILDREN, IN AN INTENSIVE OUTPATIENT DAY-REAB SETTING, OR REFERRAL WHEN APPROPRIATE, TO OTHER SUBSTANCE ABUSE DISORDER AND MENTAL HEALTH FACILITIES. (4,402 UNITS OF SERVICE PROVIDED).

4d Other program services (Describe on Schedule O.) (Expenses \$ 523,796 including grants of \$ 0) (Revenue \$ 525,068)

4e Total program service expenses 25,288,255

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable.		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	508		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	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 organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	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.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17			

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 13		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official.	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain on Schedule O)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20	State the name, address, and telephone number of the person who possesses the organization's books and records OUTREACH DEVELOPEMENT CORPORATION (718) 847-9233 11711 MYRTLE AVENUE, RICHMOND HILL, NY 11418-1751

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DEBRA PANTIN PRESIDENT AND CEO	35.00 5.00			X				317,901	0	40,672
(2) ANTHONY J. CROCE, CPA SR. VICE PRESIDENT OF FINANCE AND CFO	35.00 5.00			X				262,065	0	87,779
(3) CHRISTINE CASIANO SR. VICE PRESIDENT OF OPERATIONS AND COO	35.00 5.00			X				281,737	0	45,065
(4) MARY BRITE SR. VICE PRESIDENT OF COMPLIANCE AND CCCO	35.00 5.00			X				190,529	0	81,817
(5) ENOCH CHAN, MD MEDICAL DIRECTOR	35.00 0.00					X		219,429	0	51,611
(6) JOHN VENZA VICE PRESIDENT	35.00 0.00					X		183,161	0	81,207
(7) CRISTAL MONTAGUE SR. VICE PRESIDENT AND CSO	35.00 5.00			X				203,933	0	58,834
(8) BEKIR UZUNLU ASSISTANT VICE PRESIDENT	35.00 0.00					X		198,625	0	46,362
(9) DAVID VIZZINI ASSISTANT VICE PRESIDENT	35.00 0.00					X		146,109	0	76,104
(10) KRISTA WHITMAN VICE PRESIDENT	35.00 0.00					X		149,744	0	46,607
(11) KELSEY SILVER ASSISTANT VICE PRESIDENT	35.00 0.00					X		118,570	0	58,880
(12) LILIANE DRAGO ASSISTANT VICE PRESIDENT	35.00 0.00					X		141,492	0	31,564
(13) ROBERT REYNA VICE PRESIDENT	35.00 5.00					X		156,114	0	6,725
(14) SORANY ASCOSTA NURSING DIRECTOR	35.00 0.00					X		95,271	0	47,389

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) SUZANNE SOGANICS DIRECTOR	35.00 0.00					X	100,818	0	39,965	
(16) JEANNE CHAN CONTROLLER	35.00 0.00					X	92,854	0	46,600	
(17) DONNA BORNFRIEND DIRECTOR	35.00 0.00					X	98,469	0	31,924	
(18) MELVIN SWAIN RESIDENTIAL DIRECTOR	35.00 0.00					X	111,534	0	14,959	
(19) JANET WALPOLE DIRECTOR	35.00 0.00					X	102,228	0	21,874	
(20) REBECCA HARRAS ASSISTANT DIRECTOR	35.00 0.00					X	84,843	0	36,048	
(21) ALEXIX GADSDEN DIVERSITY OFFICER	35.00 0.00					X	105,699	0	13,130	
(22) THOMAS OLIVO DIRECTOR	35.00 0.00					X	96,635	0	22,104	
(23) ELIZABETH MCNAMEE ASSISTANT DIRECTOR	35.00 0.00					X	85,857	0	21,431	
(24) JESSICA SHUREN SENIOR DIRECTOR	35.00 0.00					X	94,331	0	9,706	
(25) DANA CARABALLO ASSISTANT DIRECTOR	35.00 0.00					X	83,182	0	20,448	
1b Subtotal							3,721,130	0	1,038,805	
c Total from continuation sheets to Part VII, Section A							0	0	0	
d Total (add lines 1b and 1c)							3,721,130	0	1,038,805	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 25

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual.</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual.</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person.</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NEUROPSYCHIATRIC SERVICE 5 TALBURN LANE DIX HILLS, NY 11746	MEDICAL AND PSYCHIATR	409,620
GENOA TELEPSYCHIATRY, INC 1115 BROADWAY NEW YORK, NY 10010	PSYCHIATRIC SERVICES	151,395
FCS INC. THE FIRST CHOICE 1823 MCINTOSH STREET BOWLING GREEN, KY 4	PSYCHIATRIC AND NURSIN	211,604
		0
		0

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 3

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a	0				
	b Membership dues	1b	0				
	c Fundraising events	1c	0				
	d Related organizations	1d	386,000				
	e Government grants (contributions)	1e	16,888,366				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	95,526				
	g Noncash contributions included in lines 1a-1f	1g	\$ 0				
	h Total. Add lines 1a-1f		17,369,892				
Program Service Revenue			Business Code				
	2a OUTPATIENT FEES PAID BY MEDICAID	621400	3,225,039	3,225,039	0	0	
	b RESIDENTIAL FEES PAID BY MEDICAID	623990	6,301,257	6,301,257	0	0	
	c OUTPATIENT FEES PAID BY MEDICAL INSURANCE	621400	682,051	682,051	0	0	
	d RESIDENTIAL FEES PAID BY MEDICAL INSURANCE	623990	727,056	727,056	0	0	
	e OUTPATIENT FEES PAID BY CLIENTS	621400	90,075	90,075	0	0	
	f All other program service revenue		934,522	934,522	0	0	
g Total. Add lines 2a-2f		11,960,000					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		4,178	0	0	4,178	
	4 Income from investment of tax-exempt bond proceeds		0				
	5 Royalties		0				
	6a Gross rents	(i) Real	17,500				
		(ii) Personal					
		6a	17,500				
	b Less: rental expenses	6b	0				
	c Rental income or (loss)	6c	17,500	0			
	d Net rental income or (loss)		17,500			17,500	
	7a Gross amount from sales of assets other than inventory	(i) Securities	0	0			
		(ii) Other					
		7a	0	0			
	b Less: cost or other basis and sales expenses	7b	0	0			
	c Gain or (loss)	7c	0	0			
	d Net gain or (loss)		0				
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		0					
	8a	0					
	8b	0					
c Net income or (loss) from fundraising events		0					
9a Gross income from gaming activities. See Part IV, line 19		0					
	9a	0					
	9b	0					
c Net income or (loss) from gaming activities		0					
10a Gross sales of inventory, less returns and allowances		0					
	10a	0					
	10b	0					
c Net income or (loss) from sales of inventory		0					
Miscellaneous Revenue			Business Code				
	11a MISCELLANEOUS INCOME	900099	10,938	10,938	0	0	
	b INSURANCE PROCEEDS	900099	32,835	32,835	0	0	
	c		0				
	d All other revenue		0				
e Total. Add lines 11a-11d		43,773					
12 Total revenue. See instructions		29,395,343	12,003,773	0	21,678		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,507,396	0	1,507,396	0
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	15,576,776	13,832,783	1,743,993	0
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	706,241	608,412	97,829	0
9	Other employee benefits	2,776,786	2,426,210	350,576	0
10	Payroll taxes	1,424,565	1,181,774	242,791	0
11	Fees for services (nonemployees):				
a	Management	0			
b	Legal	62,297	13,250	49,047	0
c	Accounting	99,800	50,000	49,800	0
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	1,649,107	1,481,621	167,486	0
12	Advertising and promotion	33,728	29,866	3,862	0
13	Office expenses	563,910	504,353	59,557	0
14	Information technology	461,982	442,059	19,923	0
15	Royalties	0			
16	Occupancy	1,178,369	1,178,369	0	0
17	Travel	176,128	102,265	73,863	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	104,103	93,896	10,207	0
20	Interest	40,593	0	40,593	0
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	543,566	521,525	22,041	0
23	Insurance	252,170	212,703	39,467	0
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a	REPAIRS AND MAINTENANCE	680,623	668,510	12,113	0
b	CLIENT FOOD AND BUSINESS MEALS	610,944	593,819	17,125	0
c	EXPENSED EQUIPMENT AND BETTERMENTS	265,321	247,687	17,634	0
d	UTILITIES, TELEPHONE AND INTERNET	680,311	640,401	39,910	0
e	All other expenses OTHER SEE SCHEDULE O	500,155	458,752	41,403	0
25	Total functional expenses. Add lines 1 through 24e	29,894,871	25,288,255	4,606,616	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	8,362,049	1	5,886,869
	2 Savings and temporary cash investments	6,226,526	2	3,979,119
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	2,510,557	4	3,439,434
	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	0	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)	0	6	
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	
	9 Prepaid expenses and deferred charges	193,847	9	236,934
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 22,889,191		
	b Less: accumulated depreciation	10b 8,347,686	15,085,071	10c 14,541,505
	11 Investments—publicly traded securities	0	11	0
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	3,386,953
	15 Other assets. See Part IV, line 11	1,786,843	15	4,592,937
16 Total assets. Add lines 1 through 15 (must equal line 33)	34,164,893	16	36,063,751	
Liabilities	17 Accounts payable and accrued expenses	570,371	17	680,742
	18 Grants payable	0	18	
	19 Deferred revenue	0	19	
	20 Tax-exempt bond liabilities	0	20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	
	23 Secured mortgages and notes payable to unrelated third parties	15,194,195	23	18,693,581
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	7,876,776	25	6,665,405
	26 Total liabilities. Add lines 17 through 25	23,641,342	26	26,039,728
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	10,503,551	27	10,004,023
	28 Net assets with donor restrictions	20,000	28	20,000
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0	29	
	30 Paid-in or capital surplus, or land, building, or equipment fund	0	30	
	31 Retained earnings, endowment, accumulated income, or other funds	0	31	
32 Total net assets or fund balances	10,523,551	32	10,024,023	
33 Total liabilities and net assets/fund balances	34,164,893	33	36,063,751	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	29,395,343
2	Total expenses (must equal Part IX, column (A), line 25)	2	29,894,871
3	Revenue less expenses. Subtract line 2 from line 1	3	-499,528
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	10,523,551
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	10,024,023

Part XII Financial Statements and Reporting

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

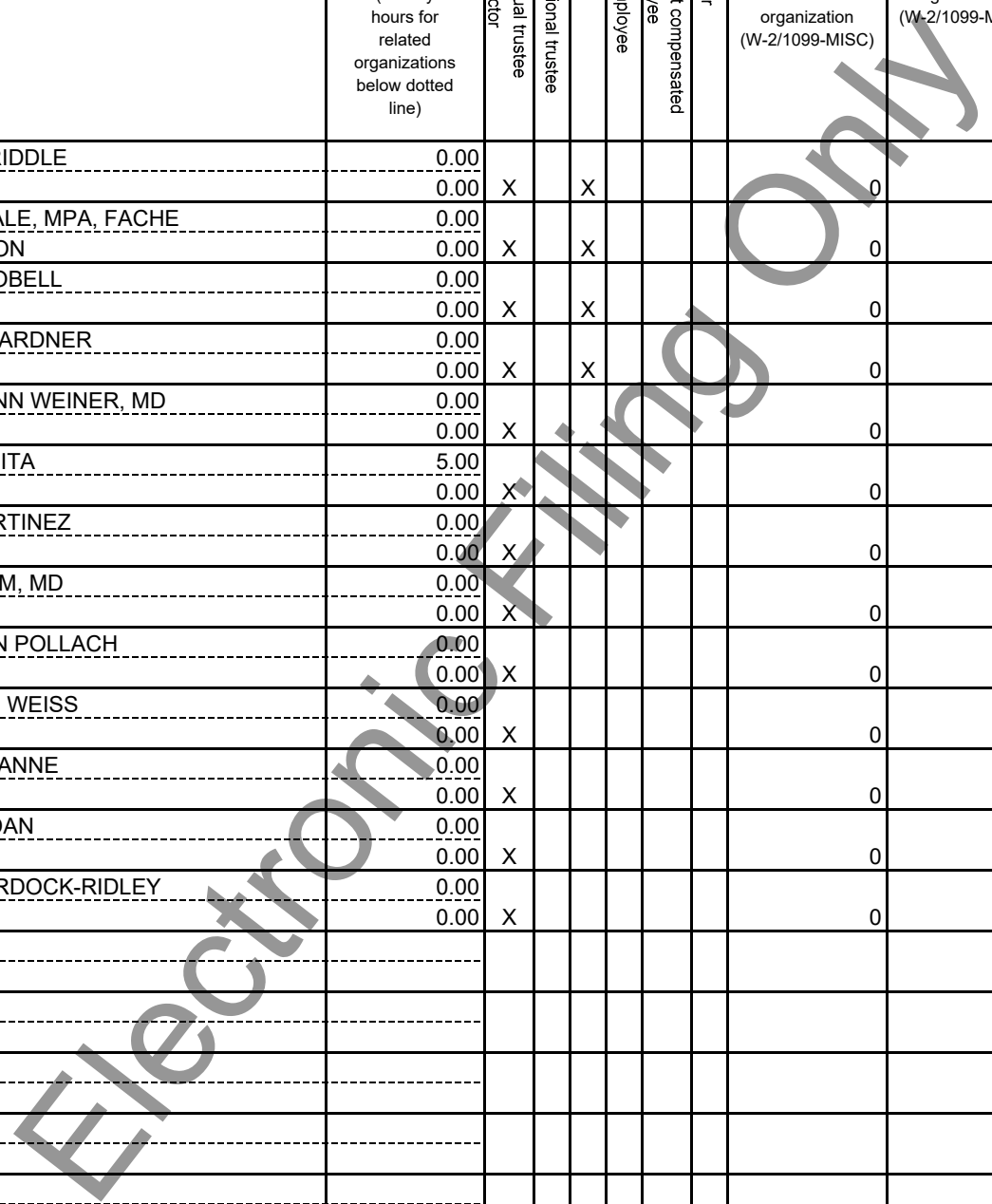
		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		X
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?	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

Continuation Sheet for Form 990

Name of the Organization OUTREACH DEVELOPEMENT CORPORATION	Employer identification number 11-2518262
--	---

Part VII Section A **Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) KATHLEEN RIDDLE CHAIRPERSON	0.00 0.00	X		X				0	0	0
(27) PAUL D. VITALE, MPA, FACHE VICE CHAIRPERSON	0.00 0.00	X		X				0	0	0
(28) VINCENT LLOBELL TREASURER	0.00 0.00	X		X				0	0	0
(29) TRACIE M. GARDNER SECRETARY	0.00 0.00	X		X				0	0	0
(30) PHYLLIS DUNN WEINER, MD BOARD MEMBER	0.00 0.00	X						0	0	0
(31) SERGIO SEDITA BOARD MEMBER	5.00 0.00			X				0	0	0
(32) MONICA MARTINEZ BOARD MEMBER	0.00 0.00	X						0	0	0
(33) JENNIFER KIM, MD BOARD MEMBER	0.00 0.00	X						0	0	0
(34) REV. GIDEON POLLACH BOARD MEMBER	0.00 0.00	X						0	0	0
(35) MITCHELL R. WEISS BOARD MEMBER	0.00 0.00	X						0	0	0
(36) LUDWIG LALANNE BOARD MEMBER	0.00 0.00	X						0	0	0
(37) KATHY JORDAN BOARD MEMBER	0.00 0.00	X						0	0	0
(38) ANGELA MURDOCK-RIDLEY BOARD MEMBER	0.00 0.00	X						0	0	0
(39)										
(40)										
(41)										
(42)										
(43)										
(44)										
(45)										
(46)										



**SCHEDULE A
(Form 990)**

Public Charity Status and Public Support

OMB No. 1545-0047

2022

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization OUTREACH DEVELOPEMENT CORPORATION	Employer identification number 11-2518262
--	---

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total					0	0

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	14,921,901	12,104,059	17,020,017	15,243,321	17,369,892	76,659,190
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	14,921,901	12,104,059	17,020,017	15,243,321	17,369,892	76,659,190
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)						773,257
6 Public support. Subtract line 5 from line 4						75,885,933

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	14,921,901	12,104,059	17,020,017	15,243,321	17,369,892	76,659,190
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	45,501	37,702	38,390	23,344	21,678	166,615
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	224,697	129,848	50,575	12,470	43,773	461,363
11 Total support. Add lines 7 through 10						77,287,168
12 Gross receipts from related activities, etc. (see instructions)					12	52,053,868
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	98.19%
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	98.96%
16a 33 1/3% support test—2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
13 Total support. (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	0.00%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	0.00%

- 19a 33 1/3% support tests—2022.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2021.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a	
b	A family member of a person described on line 11a above?	11b	
c	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>	11c	

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>	2	

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>	1	

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally Integrated Supporting Organizations

1	<i>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</i>		
a	<input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		
c	<input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a governmental entity (see instructions).</i>		
2	Activities Test. Answer lines 2a and 2b below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	2a	
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain		
2	Recoveries of prior-year distributions		
3	Other gross income (see instructions)		
4	Add lines 1 through 3.	0	0
5	Depreciation and depletion		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)		
7	Other expenses (see instructions)		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities		
b	Average monthly cash balances		
c	Fair market value of other non-exempt-use assets		
d	Total (add lines 1a, 1b, and 1c)	0	0
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets		
3	Subtract line 2 from line 1d.	0	0
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	0	0
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	0	0
6	Multiply line 5 by 0.035.	0	0
7	Recoveries of prior-year distributions	0	0
8	Minimum Asset Amount (add line 7 to line 6)	0	0
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)		0
2	Enter 0.85 of line 1.		0
3	Minimum asset amount for prior year (from Section B, line 8, column A)		0
4	Enter greater of line 2 or line 3.		0
5	Income tax imposed in prior year		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).		0
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7 0
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9 0
10	Line 8 amount divided by line 9 amount	10 0.000

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			0
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017	0		
b From 2018	0		
c From 2019	0		
d From 2020	0		
e From 2021	0		
f Total of lines 3a through 3e	0		
g Applied to underdistributions of prior years		0	
h Applied to 2022 distributable amount			0
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	0		
4 Distributions for 2022 from Section D, line 7: \$	0		
a Applied to underdistributions of prior years		0	
b Applied to 2022 distributable amount			0
c Remainder. Subtract lines 4a and 4b from line 4.	0		
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.		0	
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			0
7 Excess distributions carryover to 2023. Add lines 3j and 4c.	0		
8 Breakdown of line 7:			
a Excess from 2018	0		
b Excess from 2019	0		
c Excess from 2020	0		
d Excess from 2021	0		
e Excess from 2022	0		

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

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

Table with 2 columns: Name of the organization (OUTREACH DEVELOPEMENT CORPORATION) and Employer identification number (11-2518262)

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)(3) (enter number) organization

[] 4947(a)(1) nonexempt charitable trust not treated as a private foundation

[] 527 political organization

Form 990-PF

[] 501(c)(3) exempt private foundation

[] 4947(a)(1) nonexempt charitable trust treated as a private foundation

[] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization OUTREACH DEVELOPEMENT CORPORATION	Employer identification number 11-2518262
---	--

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	OUTREACH PROJECT, INC. ----- 11711 MYRTLE AVENUE ----- RICHMOND HILL NY 11418-1751 Foreign State or Province: _____ Foreign Country: _____	\$ 386,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization OUTREACH DEVELOPEMENT CORPORATION	Employer identification number 11-2518262
---	--

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----

Name of organization OUTREACH DEVELOPEMENT CORPORATION	Employer identification number 11-2518262
---	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ _____ 0

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
For. Prov. _____ Country _____			
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
For. Prov. _____ Country _____			
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
For. Prov. _____ Country _____			
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
For. Prov. _____ Country _____			

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

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

Name of the organization: OUTREACH DEVELOPEMENT CORPORATION; Employer identification number: 11-2518262

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for values, 5-6 for Yes/No questions.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Multiple choice and table questions regarding conservation easements, including a table for 'Held at the End of the Tax Year' with rows 2a-2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Questions 1a-2b regarding reporting of art and historical treasures, including dollar amounts.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange program
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	0
d Additions during the year	
e Distributions during the year	
f Ending balance	0

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	0	0	0		
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	0	0	0	0	0

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment _____ %
- b** Permanent endowment _____ %
- c** Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations		
(ii) Related organizations		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	929,306		929,306
b Buildings	0	21,742,637	8,130,438	13,612,199
c Leasehold improvements	0	0	0	0
d Equipment	0	217,248	217,248	0
e Other	0	0	0	0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 14,541,505

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	0	
(2) Closely held equity interests	0	
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	0	

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. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	0	

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) SECURITY DEPOSITS	56,469
(2) CONSTRUCTION IN PROGRESS	4,536,468
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	4,592,937

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	0
(2) ACCRUED EXPENSES	724,187
(3) ACCRUED WAGES	95,942
(4) ACCRUED COMPENSATED ABSENSES	588,855
(5) DEFERRED RENT	0
(6) DEFERRED REVENUE	4,417,532
(7) LOAND FROM AN AFFILIATED ORGANIZATION	619,914
(8) POST-RETIREMENT BENEFITS PAYBLE	218,975
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	6,665,405

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	29,395,343
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	29,395,343
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	29,395,343

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	29,882,903
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	29,882,903
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	11,968
c	Add lines 4a and 4b	4c	11,968
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	29,894,871

Part XIII Supplemental Information.

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

Part XII Line LINE 2 OUTREACH DEVELOPMENT CORPORATION IS EXEMPT FROM INCOME TAXES UNDER

 INTERNEAL REVENUE CODE SECTION 501 (c)(3). ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS

 INCLUDED IN THE FINANCIAL STATEMENTS. THE ORGANIZATION HAS EVALUATED THE RECOGNITION

 REQUIREMENTS FOR CERTAIN TAX POSITIONS AS REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY

 ACCEPTED IN THE UNITED STATES OF AMERICA, WITH NO CUMULATIVE AFFECT ADJUSTMENT REQUIRED.

 INCOME TAX BENEFITS ARE RECOGNIZED FOR INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN

 IN A TAX RETURN, ONLY WHEN IT IS DETERMINED THAT THE INCOME TAX POSITION WILL MORE LIKELY

 THAN NOT BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES. ACCORDINGLY, THE

 ORGANIZATION HAS NOT RECORDED ANY RESERVES, OR RELATED ACCRUALS FOR INTEREST AND PENALTIES

 FOR UNCERTAIN TAX POSITIONS AT JUNE 30, 2023. THE ORGANIZATION IS SUBJECT TO ROUTINE

 AUDITS BY TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS

 IN PROGRESS.

Part XII Line LINE 4B POST RETIREMENT EXPENSES THAT RELATE TO THE ORGANIZARION'S DEFERRED

Part XIII Supplemental Information *(continued)*

HEALTH BENEFITS THAT ARE REQUIRED TO BE DISPLAYED AS A CHANGE IN NET ASSETS IN THE

STATEMENT OF ACTRIVITIES OF THE FINANCIAL STATEMENTS

Electronic Filing Only

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 Attach to Form 990.
 Go to www.irs.gov/Form990 for instructions and the latest information.

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

OUTREACH DEVELOPEMENT CORPORATION

Employer identification number

11-2518262

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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

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

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

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

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

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

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

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

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

	Yes	No
1a		
1b		
2		
3		
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
DEBRA PANTIN	(i)	298,481	0	19,420	26,640	14,032	358,573	
1 PRESIDENT AND CEO	(ii)	0	0	0	0	0	0	
CHRISTINE CASIANO	(i)	238,218	0	43,519	36,482	8,583	326,802	
2 SR. VICE PRESIDENT OF OPERAT	(ii)	0	0	0	0	0	0	
ANTHONY J. CROCE, CPA	(i)	217,766	0	44,299	57,510	30,269	349,844	
3 SR. VICE PRESIDENT OF FINANCE	(ii)	0	0	0	0	0	0	
CHRISTAL MONTAGUE	(i)	195,254	0	8,679	19,279	39,555	262,767	
4 SR. VICE PRESIDENT AND CSO	(ii)	0	0	0	0	0	0	
MARY BRITE	(i)	160,997	0	29,532	42,321	39,496	272,346	
5 SR. VICE PRESIDENT OF COMPLIA	(ii)	0	0	0	0	0	0	
JOHN VENZA	(i)	166,838	0	16,323	41,706	39,501	264,368	
6 VICE PRESIDENT	(ii)	0	0	0	0	0	0	
BEKIR UZUNLU	(i)	166,292	0	32,333	43,565	2,797	244,987	
7 ASSISTANT VICE PRESIDENT	(ii)	0	0	0	0	0	0	
ENOCH CHAN, MD	(i)	219,429	0	0	12,027	39,584	271,040	
8 MEDICAL DIRECTOR	(ii)	0	0	0	0	0	0	
KRISTA WHITMAN	(i)	128,116	0	21,628	18,007	28,600	196,351	
9 VICE PRESIDENT	(ii)	0	0	0	0	0	0	
LILIANE DRAGO	(i)	119,264	0	22,228	18,049	13,515	173,056	
10 ASSISTANT VICE PRESIDENT	(ii)	0	0	0	0	0	0	
DAVID VIZZINI	(i)	131,365	0	14,744	34,631	41,473	222,213	
11 ASSISTANT VICE PRESIDENT	(ii)	0	0	0	0	0	0	
ROBERT REYNA	(i)	151,830	0	4,284	4,284	2,441	162,839	
12 VICE PRESIDENT	(ii)	0	0	0	0	0	0	
KELSEY SILVER	(i)	117,040	0	1,530	18,352	40,528	177,450	
13 ASSISTANT VICE PRESIDENT	(ii)	0	0	0	0	0	0	
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

2022

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

OUTREACH DEVELOPEMENT CORPORATION

11-2518262

Form 990, Part III, Line 4d: Program Service Expenses: 523,796, Grants and allocations: 0,

Revenue: 525,068 JOB TRAINING AND EMPLOYMENT PROGRAMS: PROVIDE EDUCATION AND COURSE WORK

NECESSARY TO QUALIFY STUDENTS FOR THE NYS C.A.S.A.C. CREDENTIALING EXAM. ALSO PROVIDE

ADDITIONAL COURSES APPROPRIATE FOR PROFESSIONALS TO MAINTAIN THEIR LICENSES AND CREDENTIALS.

FINALLY, CUSTOMIZED TRAINING PROGRAMS ARE PROVIDED TO MEET THE SPECIFIC NEEDS OF INDIVIDUAL

ORGANIZATIONS AS WELL AS IN HOUSE TRAINING AND COURSES TO THE AGENCY'S EMPLOYEES. (OVER 500

PERSONS TRAINED).

Form 990, Part IV, Section B, Line 11B: THE 990 IS PREPARED BY THE ORGANIZATION'S CFO WHO IS

ALSO A CPA, AND IT IS PRESENTED TO THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS FOR THEIR

REVIEW PRIOR TO THE 990 BEING FILED.

Form 990, Part VI, Section B, Line 12C: AT THE ANNUAL MEETING OF THE BOARD OF DIRECTORS HELD

IN THE SPRING, THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS REVIEWED WITH ALL OFFICERS,

DIRECTORS AND KEY EMPLOYEES. EACH INDIVIDUAL IS ASKED TO PROVIDE ANY INFORMATION CONCERNING

THEM THAT WOULD BE IN VIOLATION TO THE POLICY. INDIVIDUALS THAT IDENTIFY NO SUCH CIRCUMSTANCES

ARE THEN ASKED TO SIGN THE STATEMENT THAT THEY ARE IN COMPLIANCE WITH THE POLICY. IN CASES

WHERE CIRCUMSTANCES ARE IDENTIFIED, THE CONFLICT IS REVIEWED BY THE BOARD OF DIRECTORS ALONG

WITH THE EXECUTIVE MANAGEMENT OF THE ORGANIZATION. EACH INSTANCE IS DEALT WITH INDIVIDUALLY,

AND IF APPROVED, THE INDIVIDUALS ARE THEN ASKED TO SIGN THE STATEMENT THAT THEY ARE IN

COMPLIANCE NOTING THE APPROVED EXCEPTION.

Form 990, Part VI, Section B, Line 15A: THE ORGANIZATION UTILIZES THE ECONOMIC RESEARCH

INSTITUTE'S NONPROFIT COMPARABLE SALARY ASSESSOR TO OBTAIN COMPARABLE SALARY RANGES FOR EACH

EXECUTIVE OFFICER, FROM ORGANIZATIONS OF SIMILAR SIZE, NUMBER OF EMPLOYEES, AND GEOGRAPHIC

LOCATION. THE DATA OBTAINED FOR THE PRESIDENT IS PRESENTED TO THE FINANCE COMMITTEE OF THE

BOARD OF DIRECTORS FOR THEM TO APPROVE THE PRESIDENT'S COMPENSATION PACKAGE. DATA FOR ALL

OTHER OFFICERS IS ALSO PRESENTED TO THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS FOR

INFORMATION PURPOSES ONLY.

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

Schedule O (Form 990) 2022

Name of the organization

Employer identification number

OUTREACH DEVELOPEMENT CORPORATION

11-2518262

Form 990, Part VI, Section B, Line 15B: APPROVAL OF COMENSATION PACKAGES FOR ALL OF THE OTHER OFFICERS IS LEFT TO THE DISCRETION OF THE PRESIDENT OF THE ORGANIZATION.

Form 990, Part VI, Section C, Line LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND ALL RELATED FINANCIAL STATEMENTS ARE MADE AVAILABLE BY REQUEST TO OUR ADMINISTRATIVE OFFICES. CONTACT INFORMATION FOR OUR ADMINISTRATICE OFFICES CAN BE FOUND ON OUR COMPANY WEBSITE, OPINY.ORG.

Form 990, Part IX, Line 11G: PSYCHIATRIC SERVICES: TOTAL: \$828,673; PROGRAM SERVICES: \$828,673; MANAGEMENT AND GENERAL: \$0; FUNDRAISING: \$0.

Form 990, Part IX, Line 11G: MEDICAL DOCTORS: TOTAL: \$65,056; PROGRAM SERVICES: \$65,056; MANAGEMENT AND GENERAL: \$0; FUNDRAISING: \$0.

Form 990, Part IX, Line 11G: NURSING CONSULTANTS: TOTAL: \$211,604; PROGRAM SERVICES: \$211,604; MANAGEMENT AND GENERAL: \$0; FUNDRAISING: \$0.

Form 990, Part IX, Line 11G: TRAINING CONSULTANTS: TOTAL: \$54,705; PROGRAM SERVICES: \$54,705; MANAGEMENT AND GENERAL: \$0; FUNDRAISING: \$0.

Form 990, Part IX, Line 11G: HEALTHCARE POLICY CONSULTANTS: TOTAL: \$60,000; PROGRAM SERVICES: \$0; MANAGEMENT AND GENERAL: \$60,000; FUNDRAISING: \$0.

Form 990, Part IX, Line 11G: GRANT MANAGEMENT AND WRITING CONSULTANTS: TOTAL: \$46,900; PROGRAM SERVICES: \$33,600; MANAGEMENT AND GENERAL: \$13,300; FUNDRAISING: \$0.

Form 990, Part IX, Line 11G: PUBLIC RELATIONS AND COMMUNICATIONS CONSULTANTS: TOTAL: \$75,000; PROGRAM SERVICES: \$30,000; MANAGEMENT AND GENERAL: \$45,000; FUNDRAISING: \$0.

Form 990, Part IX, Line 11G: TECHNOLOGY CONSULTANTS: TOTAL: \$42,095; PROGRAM SERVICES: \$42,095; MANAGEMENT AND GENERAL: \$0; FUNDRAISING: \$0.

Form 990, Part IX, Line 11G: PROGRAM DATA ANALYSIS CONSULTANTS: TOTAL: \$140,707; PROGRAM SERVICES: \$140,707; MANAGEMENT AND GENERAL: \$0; FUNDRAISING: \$0.

Form 990, Part IX, Line 11G: SECURITY CONSULTANTS: TOTAL: \$34,232; PROGRAM SERVICES: \$34,232; MANAGEMENT AND GENERAL: \$0; FUNDRAISING: \$0.

Form 990, Part IX, Line 11G: HUMAN RESOURCE CONSULTANTS: TOTAL: \$51,034; PROGRAM SERVICES: \$9,000; MANAGEMENT AND GENERAL: \$42,034; FUNDRAISING: \$0.

Name of the organization OUTREACH DEVELOPEMENT CORPORATION	Employer identification number 11-2518262
--	---

Form 990, Part IX, Line 11G: ART THERAPY CONSULTANTS: TOTAL: \$13,800; PROGRAM SERVICES: \$13,800; MANAGEMENT AND GENERAL: \$0; FUNDRAISING: \$0.

Form 990, Part IX, Line 11G: OTHER CONSULTANTS: TOTAL: \$25,301; PROGRAM SERVICES: \$18,149; MANAGEMENT AND GENERAL: \$7,152; FUNDRAISING: \$0.

Form 990, Part IX, Line 24E: TOXICOLOGY: TOTAL: \$122,401; PROGRAM SERVICES: \$122,401; MANAGEMENT AND GENERAL: \$0; FUNDRAISING: \$0.

Form 990, Part IX, Line 24E: COMMUNITY RELATIONS: TOTAL: \$82,967; PROGRAM SERVICES: \$66,320; MANAGEMENT AND GENERAL: \$16,647; FUNDRAISING: \$0.

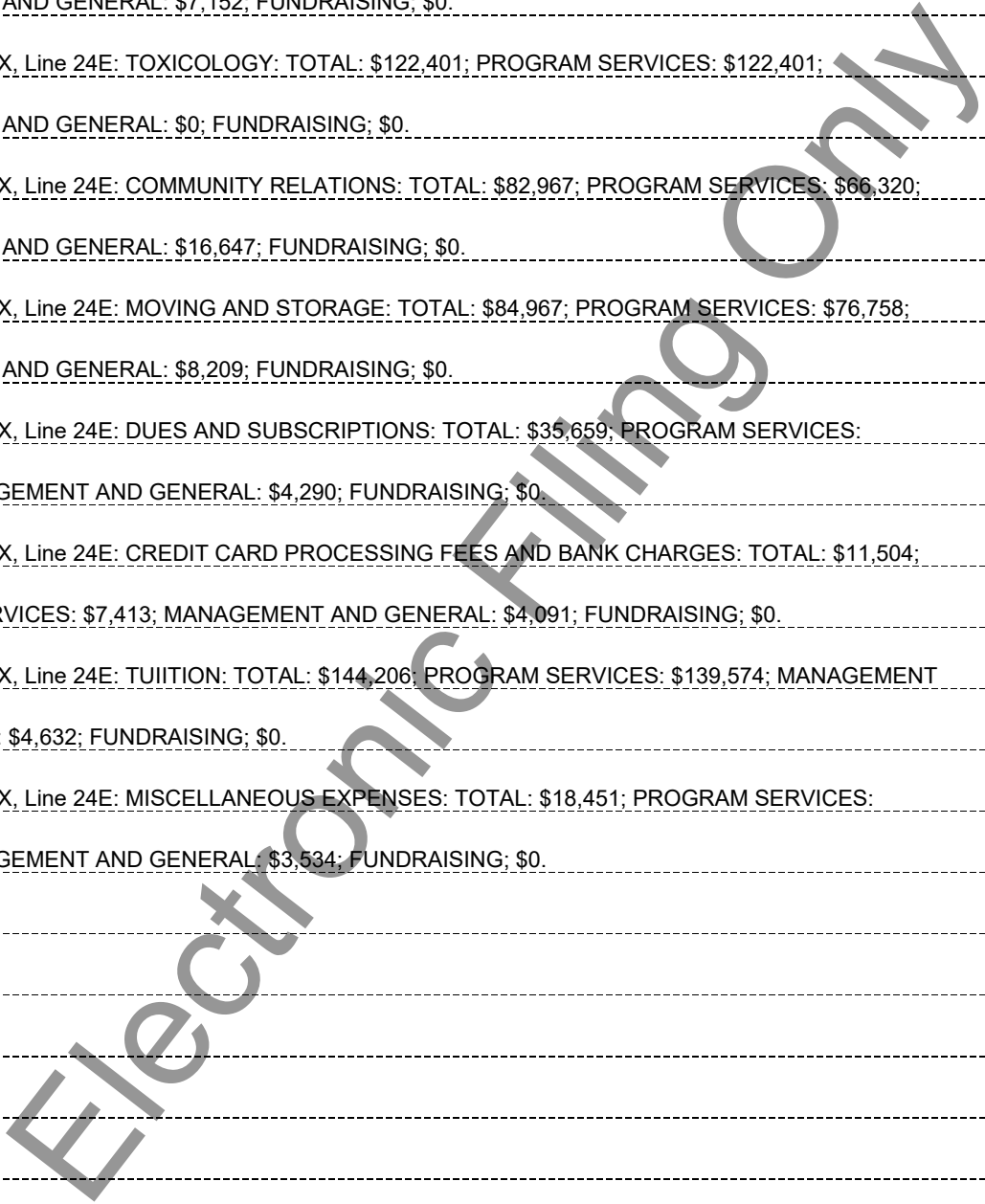
Form 990, Part IX, Line 24E: MOVING AND STORAGE: TOTAL: \$84,967; PROGRAM SERVICES: \$76,758; MANAGEMENT AND GENERAL: \$8,209; FUNDRAISING: \$0.

Form 990, Part IX, Line 24E: DUES AND SUBSCRIPTIONS: TOTAL: \$35,659; PROGRAM SERVICES: \$31,369; MANAGEMENT AND GENERAL: \$4,290; FUNDRAISING: \$0.

Form 990, Part IX, Line 24E: CREDIT CARD PROCESSING FEES AND BANK CHARGES: TOTAL: \$11,504; PROGRAM SERVICES: \$7,413; MANAGEMENT AND GENERAL: \$4,091; FUNDRAISING: \$0.

Form 990, Part IX, Line 24E: TUITION: TOTAL: \$144,206; PROGRAM SERVICES: \$139,574; MANAGEMENT AND GENERAL: \$4,632; FUNDRAISING: \$0.

Form 990, Part IX, Line 24E: MISCELLANEOUS EXPENSES: TOTAL: \$18,451; PROGRAM SERVICES: \$14,917; MANAGEMENT AND GENERAL: \$3,534; FUNDRAISING: \$0.



**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization

OUTREACH DEVELOPEMENT CORPORATION

Employer identification number

11-2518262

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) -----					
(2) -----					
(3) -----					
(4) -----					
(5) -----					
(6) -----					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) OUTREACH PROJECT, INC. 11-2621537 11711 MYRTLE AVENUE RICHMOND HILL, NY 11418-1751	DEVELOP NE AND MAINTAIN AND	NY	501 (c) (3)	Line 7	N/A		X
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) -----									
(2) -----									
(3) -----									
(4) -----									
(5) -----									
(6) -----									
(7) -----									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)	X	
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)	X	
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses	X	
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)	X	
s Other transfer of cash or property from related organization(s)	X	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1) OUTREACH PROJECT, INC	c	386,000	GIFT AMOUNT
(2) OUTREACH PROJECT, INC	d	1,247,369	LOAN GUARANTEE AMT
(3) OUTREACH PROJECT, INC	e	619,914	LOAN BALANCE
(4) OUTREACH PROJECT, INC	k	319,375	COST
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII

Supplemental Information

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

Electronic Filing Only

OUTREACH DEVELOPMENT CORPORATION



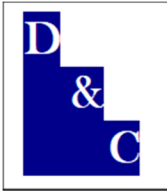
Financial Statements (Together with Independent Auditor's Report)

Year Ended June 30, 2023

OUTREACH DEVELOPMENT CORPORATION
FINANCIAL STATEMENTS
(Together with Independent Auditor's Report)
YEAR ENDED JUNE 30, 2023

TABLE OF CONTENTS

	<u>Page</u>
Independent Auditor's Report.....	1-2
FINANCIAL STATEMENTS	
Statement of Financial Position.....	3
Statement of Activities.....	4
Statement of Functional Expenses.....	5
Statement of Cash Flows	6
Notes to Financial Statements	7 - 16



Desire & Company CPAs, PLLC
Certified Public Accountants & Consultants

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of
Outreach Development Corporation

Opinion

We have audited the accompanying financial statements of Outreach Development Corporation (the "Organization"), which comprise the statement of financial position as of June 30, 2023, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Organization as of June 30, 2023, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report. We are required to be independent of the Organization and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

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

100 Park Avenue, Suite 1600
New York, NY 10017
Zache Desire, CPA

Website: DesireCPAs.Com
Email: Zache@DesireCPAs.Com
Phone: (212) 351-5092

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with generally accepted auditing standards, we:

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

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



New York, New York
January 8, 2024

Desire & Company CPAs
Certified Public Accountants & Consultants

OUTREACH DEVELOPMENT CORPORATION
STATEMENT OF FINANCIAL POSITION
AS OF JUNE 30, 2023

ASSETS

CURRENT ASSETS

Cash, including cash restricted for capital projects of \$4,434,800	\$ 9,865,988
Receivable from supporting agencies	3,383,039
Other receivables	56,395
Prepaid expenses	236,934
Total Current Assets	<u>13,542,356</u>

Property and equipment - at cost, net of accumulated depreciation of \$8,347,686 (Notes 2D and 3)	19,077,973
---	------------

Right-of-use asset - operating - at cost, net of accumulated amortization of \$610,471 (Note 4)	<u>3,386,953</u>
---	------------------

OTHER ASSETS

Security deposits	<u>56,469</u>
Total Other Assets	56,469

TOTAL ASSETS

36,063,751

LIABILITIES

CURRENT LIABILITIES

Accounts payable	\$ 680,742
Accrued expenses	820,129
Accrued compensated absences (Note 16)	588,855
Deferred revenue	4,417,532
Post retirement benefits payable - current portion (Note 10)	12,800
Lease liability - Operating - current portion (Note 4)	628,807
Long-term debt - Current portion (Note 5)	1,690,407
Due to OPI (Note 12)	619,914
Total Current Liabilities	<u>9,459,186</u>

LONG-TERM LIABILITIES

Long-term debt - net of current portion (Note 5)	13,503,788
Lease liability - operating (Note 4)	2,870,579
Post retirement benefits payable (Note 10)	206,175
Total Long-Term Liabilities	<u>16,580,542</u>

TOTAL LIABILITIES

26,039,728

NET ASSETS

Net assets without donor restrictions (Note 2B)	10,004,023
Net assets with donor restrictions (Notes 2B and 11)	<u>20,000</u>
TOTAL NET ASSETS	<u>10,024,023</u>
TOTAL LIABILITIES AND NET ASSETS	<u><u>\$ 36,063,751</u></u>

The accompanying notes are an integral part of these financial statements.

OUTREACH DEVELOPMENT CORPORATION
STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2023

	<u>W ithout Donor Restrictions</u>	<u>W ith Donor Restrictions</u>	<u>Total</u>
REVENUE AND SUPPORT:			
Government reimbursement contracts (Note 6)	\$ 16,692,486	\$ -	\$ 16,692,486
Government welfare programs (Note 7)	468,209	-	468,209
Client fees (Note 7)	11,687,671	-	11,687,671
Outreach Project, Inc. grant (Note 12)	386,000	-	386,000
Grants	95,526	-	95,526
Rent income	17,500	-	17,500
Interest income	4,178	-	4,178
Other income	43,773	-	43,773
	<u>29,395,343</u>	<u>-</u>	<u>29,395,343</u>
EXPENSES			
Program services:			
Residential Services	11,912,878	-	11,912,878
Outpatient Services	11,586,678	-	11,586,678
Women and Children Services	1,264,903	-	1,264,903
Training Evaluation and Enhancement	523,796	-	523,796
Total Program Services	<u>25,288,255</u>	<u>-</u>	<u>25,288,255</u>
Supporting Services:			
Administration	4,594,648	-	4,594,648
TOTAL EXPENSES	<u>29,882,903</u>	<u>-</u>	<u>29,882,903</u>
CHANGE IN NET ASSETS			
BEFORE PENSION RELATED CHANGES	(487,560)	-	(487,560)
Pension related changes (Note 10)	(11,968)	-	(11,968)
CHANGE IN NET ASSETS	(499,528)	-	(499,528)
NET ASSETS - Beginning of Year	10,503,551	20,000	10,523,551
NET ASSETS - End of Year	<u>\$ 10,004,023</u>	<u>\$ 20,000</u>	<u>\$ 10,024,023</u>

OUTREACH DEVELOPMENT CORPORATION
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2023

	PROGRAM SERVICES					SUPPORTING SERVICES	
	RESIDENTIAL SERVICES	OUTPATIENT SERVICES	WOMEN AND CHILDREN SERVICES	TRAINING EVALUATION AND ENHANCEMENT	TOTAL PROGRAM SERVICES	ADMINISTRATION	TOTAL
Salaries	\$ 6,719,336	\$ 6,203,655	\$ 722,476	\$ 187,316	\$ 13,832,783	\$ 2,975,240	\$ 16,808,023
Payroll taxes and employee benefits	1,948,059	1,972,582	208,409	87,346	4,216,396	955,377	5,171,773
Total salaries and related costs	8,667,395	8,176,237	930,885	274,662	18,049,179	3,930,617	21,979,796
Rent	482,972	606,861	88,536	-	1,178,369	-	1,178,369
Equipment and betterments (Note 2D)	87,753	84,064	63,098	12,772	247,687	17,634	265,321
Utilities	243,398	129,855	13,016	27,866	414,135	12,350	426,485
Telephone	54,366	74,721	11,894	12,519	153,500	24,581	178,081
Consultants	305,121	1,020,676	25,944	45,855	1,397,596	167,486	1,565,082
Transportation	33,204	58,954	9,591	516	102,265	73,863	176,128
Postage	419	1,594	150	1,117	3,280	3,797	7,077
Supplies and material	477,168	350,939	30,112	15,195	873,414	67,370	940,784
Repairs and maintenance	213,652	377,892	6,429	14,517	612,490	10,901	623,391
Professional fees	43,650	24,750	3,250	1,500	73,150	98,847	171,997
Conferences and staff development	10,046	83,058	642	150	93,896	10,207	104,103
Interest and bank charges	3,007	334	-	4,072	7,413	44,684	52,097
Food	583,312	7,557	2,732	218	593,819	17,125	610,944
Insurance	93,499	93,500	20,704	5,000	212,703	39,467	252,170
Advertising and promotion	8,534	18,114	2,344	874	29,866	3,862	33,728
Printing	1,052	2,551	291	163	4,057	1,382	5,439
Outside contractors	83,071	214,350	43,887	67,558	408,866	7,611	416,477
Community relations	50,948	13,222	1,382	768	66,320	16,647	82,967
Computer services	20,258	38,209	3,564	3,630	65,661	6,931	72,592
Rubbish removal	39,613	13,604	1,684	1,119	56,020	1,212	57,232
Dues and subscriptions	5,357	23,444	2,532	36	31,369	4,290	35,659
Miscellaneous	6,573	82,634	2,236	232	91,675	11,743	103,418
Depreciation (Notes 2D and 3)	398,510	89,558	-	33,457	521,525	22,041	543,566
Total Other Expenses	3,245,483	3,410,441	334,018	249,134	7,239,076	664,031	7,903,107
Total Operating Expenses	\$ 11,912,878	\$ 11,586,678	\$ 1,264,903	\$ 523,796	\$ 25,288,255	\$ 4,594,648	\$ 29,882,903

The accompanying notes are an integral part of these financial statements.

OUTREACH DEVELOPMENT CORPORATION
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED JUNE 30, 2023

CASH FLOWS FROM OPERATING ACTIVITIES:

Change in net assets	\$ (499,528)
----------------------	--------------

Adjustments to reconcile change in net assets to net cash used in operating activities:

Depreciation	543,566
Amortization	610,471
Post retirement benefits payable	11,968

Changes in:

Receivable from supporting agencies	(1,014,123)
Other receivables	85,246
Prepaid expenses	(43,087)
Security deposits	(5,232)
Right-of-use asset - operating	(3,997,424)
Accounts payable	110,371
Accrued expenses	(894,569)
Accrued compensated absences	(53,184)
Deferred rent	(35,901)
Deferred revenue	(21,833)
Lease liability - operating	3,499,386

Subtotal	(1,204,345)
----------	-------------

Net cash used in operating activities	(1,703,873)
--	--------------------

CASH FLOWS FROM INVESTING ACTIVITIES:

Additions to construction in progress	(2,800,862)
---------------------------------------	-------------

Net Cash Used in Investing Activities	(2,800,862)
--	--------------------

CASH FLOWS FROM FINANCING ACTIVITIES:

Payments on loan payable - affiliate	(217,852)
--------------------------------------	-----------

Net Cash Used in Financing Activities	(217,852)
--	------------------

NET DECREASE IN CASH	(4,722,587)
-----------------------------	--------------------

CASH - Beginning of year	14,588,575
--------------------------	------------

CASH - End of year	\$ 9,865,988
---------------------------	---------------------

SUPPLEMENTAL DISCLOSURE

Cash paid during the year for interest	\$ 11,505
--	-----------

OUTREACH DEVELOPMENT CORPORATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2023

NOTE 1 – ORGANIZATION AND PURPOSE

Outreach Development Corporation (“ODC” or the “Organization”) operates two residential substance use disorder programs for adolescents, two residential facilities for adults, six outpatient substance use disorder treatment programs, a substance use disorder rehabilitation outpatient program for women with children, a mental health outpatient clinic, and an education and training institute. These programs are substantially funded by governmental agencies.

ODC has been determined by the Internal Revenue Service to be exempt from Federal income taxes pursuant to Section 501(c) (3) of the Internal Revenue Code of 1986, as amended.

ODC has an affiliate, Outreach Project, Inc. (“OPI”), which is also an Organization exempt from Federal income taxes pursuant to Section 501(c) (3) of the Internal Revenue Code of 1986, as amended. ODC and OPI share certain common personnel and facilities. In addition, OPI provides a grant to ODC (see Note 12). They each have a separate and independent board of directors.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

- A) ***Basis of Accounting*** – The books and records of ODC are maintained, and the accompanying financial statements have been prepared, on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States.
- B) ***Financial Statement Presentation*** – ODC is required to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restriction and net assets with donor restriction. Accordingly, net assets and changes therein are classified and reported as follows:

Net assets without donor restrictions - represent resources available for support of the Organization’s operation over which the Board of Directors has discretionary control.

Net assets with donor restrictions – net assets resulting from contributions and other inflows of assets whose use by the recipient is limited by donor-imposed stipulations. Some donor restrictions are temporary in nature and may expire with the passage of time or can be fulfilled and removed by actions taken pursuant to those stipulations. Other donor restrictions are perpetual in nature and must be maintained in perpetuity.

- C) ***Tax Status*** – ODC is exempt from income taxes under Internal Revenue Code Section 501(c) (3). Accordingly, no provision for income taxes is included in the financial statements. The Organization has evaluated the recognition requirements for uncertain tax positions as required by accounting principles generally accepted in the United States of America, with no cumulative effect adjustment required. Income tax benefits are recognized for income tax positions taken or expected to be taken in a tax return, only when it is determined that the income tax position will more-likely-than-not be sustained upon examination by taxing authorities. Accordingly, the Organization has not recorded any reserves, or related accruals for interest and penalties for uncertain tax positions at June 30, 2023.

The Organization is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

OUTREACH DEVELOPMENT CORPORATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2023

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

- D) ***Property and Equipment*** – Depreciation of property and equipment is provided on a straight-line basis over the estimated useful lives (5 - 40 years) of the related assets. When property and equipment are sold or otherwise disposed of, the asset and related accumulated depreciation accounts are relieved, and any resulting gain or loss is included in operations. Repairs and maintenance are charged to expense when incurred. Betterments and major renewals or replacements are capitalized, except when the cost of the equipment or betterment is reimbursed by a funding agency. Accordingly, the title to such assets remains in the name of the reimbursing agency. Purchases of equipment and expenditures for betterments of leased offices of \$180,457 were recorded as expenses because of such reimbursements and are included in the Statement of Functional Expenses in these financial statements.

Right-of-use assets (“ROU”) are amortized systematically and rationally over the shorter of the lease term or the useful life of the underlying asset.

- E) ***Revenue Recognition*** – The principal activities of ODC are funded under the terms of expense reimbursement contracts with various governmental agencies. Revenue under these government reimbursement contracts is recognized as the related expenses are incurred. Such revenue is restricted in use and is subject to future audit and adjustment by the related government agency.

Contributions and grants are generally non-exchange transactions and accounted for under Accounting Standards Update (“ASU”) 2018-08 “Clarifying the Scope and Accounting Guidance for Contributions Received and Contributions Made” (Topic 958). Contributions are recognized as revenue when barriers within the agreements are overcome, and there is no right of return. Once the barriers are overcome, the Organization determines if there are any donor-imposed restrictions (e.g., for a specific purpose or period of time). The contribution is then recognized as unconditional and classified as either net assets with donor restrictions or net assets without donor restrictions (see Note 2B). Once the restrictions are met, the contribution is then transferred to net assets without donor restrictions. Contributions amounted to \$481,526 for the year ended June 30, 2023, and are included in the statement of activities.

Conditional contributions received (contributions with donor-imposed conditions) are accounted for as deferred revenues or are unrecognized initially until barriers to entitlement are overcome. The donor-imposed condition represents a barrier that must be overcome before the Organization is entitled to the revenue. Failure to overcome the barrier gives the contributor a right of return of the revenue it has transferred or gives the promisor a right of release from its obligations to make a contribution.

Unconditional promises to give (without barriers) are recorded as revenues when pledged. All contributions are available for unrestricted use unless specifically restricted by the donor. Unconditional promises to give due in the next year are recorded at their net realizable value. Unconditional promises to give due in subsequent years are reported at the present value of their net realizable value, using risk-free interest rates applicable to the years in which the promises are to be received.

Client fee revenue is reported at the amount that reflects the consideration to which ODC expects to be entitled in exchange for providing care to the clients. These amounts are due from the clients, third-party payers (including health insurers, Medicaid, and Medicare, and others), and include variable consideration for retroactive revenue adjustments due to the settlement of audits, reviews, and investigations. Generally, ODC bills the clients and third-party payers several days after the services are performed or the client is discharged from the facility. Revenue is recognized when performance obligations are satisfied.

Performance obligations are determined based on the nature of the services provided by ODC. Revenue for performance obligations satisfied over time is recognized based on actual charges incurred in relation to total expected (or actual) charges. ODC believes that this method provides a faithful depiction of the transfer of services over the term of the performance obligation based on the inputs needed to satisfy the obligation. Generally, performance obligations satisfied over time relate to Clients receiving services at ODC’s facilities. ODC measures the performance obligation from the commencement of a client service, to the point when it is no longer required to provide services to that client, which is generally at the time of completion of the services.

**OUTREACH DEVELOPMENT CORPORATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2023**

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Because all of its performance obligations relate to contracts with a duration of less than one year, ODC has elected to apply the optional exemption provided in Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 606-10-50-14a and, therefore, is not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially unsatisfied at the end of the reporting period. ODC's performance obligations consist primarily of client services that occur within one day of a client's visit, thus, there were no unsatisfied or partially unsatisfied performance obligations at the end of the reporting period.

Throughout the year, rates may vary, as determined by NYS and federal agencies and Medicaid, and ODC will record additional revenue resulting from a rate increase and record a reduction of revenue with a rate decrease. These rate adjustments represent variable consideration in the form of explicit or implicit price concessions and ODC considers these amounts in the determination of the transaction price. ODC determines its estimates of contractual adjustments based on contractual agreements, its policies, and historical experience.

ODC determines its estimates of explicit or implicit price concessions based on its historical collection experience. Laws and regulations governing NYS and federal programs are subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term. Additionally, noncompliance with such laws and regulations could result in fines, penalties and exclusion from these programs. ODC is not aware of any allegations of noncompliance that could have a material adverse effect on the accompanying financial statements and believes that it is in compliance with all applicable laws and regulations.

As a practical expedient, ODC utilizes the portfolio approach for analyzing the revenue contracts in accordance with Topic 606. ODC accounts for the contracts within each portfolio collectively, rather than individually, based on each revenue stream. ODC considers the similar nature and characteristics of the contract and customers in using the portfolio approach. ODC believes that the use of the portfolio approach to analyze contracts will not differ materially than if the contracts were analyzed individually.

Client fees that are received in advance are deferred to the applicable period and are recorded as deferred revenue on the Statements of Financial Position.

- F) ***Allowance for Doubtful Accounts*** – Management determined that no allowance for uncollectible receivables was necessary as of June 30, 2023. ODC evaluates the need for an allowance for uncollectible accounts based on a combination of factors such as management's assessment of the aged basis of its government funding sources, the creditworthiness of funders and contributors, current economic conditions, and historical experience. Management determined that no allowance for uncollectible receivables was necessary as of June 30, 2023.
- G) ***Use of Estimates*** – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires that management make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.
- H) ***Functional Allocation of Expenses*** – The costs of providing the various programs of the Organization have been summarized on a functional basis. Accordingly, certain costs have been allocated among the programs, and supporting services benefited as determined by management. Expenses that can be identified with a specific program are charged directly to the program.

The financial statements report certain categories of expenses that are attributable to more than one program or supporting function. Therefore, expenses require allocation on a reasonable basis that is consistently applied. The expenses that are allocated include rent, repairs and maintenance which are allocated on a square footage basis, as well as salaries, benefits, payroll taxes, and others which are allocated based on time spent in each functional category or program.

OUTREACH DEVELOPMENT CORPORATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2023

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

I) Recently Adopted Accounting Standards

In February 2016 the Financial Accounting Standards Board (FASB) issued Accounting Standards Codification (ASC) 842, Leases to increase transparency and comparability among Organizations by requiring the recognition of ROU assets and lease liabilities on the Statement of Financial Position.

The Organization adopted the standard effective July 1, 2022, and recognized and measured leases existing at, or entered into after, July 1, 2022 (the beginning of the adoption period) using a modified retrospective approach, with certain practical expedients available.

The Organization is a lessee in several noncancellable operating leases for office spaces, equipment, and automobiles. The Organization determines if an arrangement is a lease, or contains a lease, at the inception of a contract and when the terms of an existing contract are changed. The Organization recognizes a lease liability and ROU asset at the commencement date of the lease. The lease liability is initially and subsequently recognized based on the present value of its future lease payments. The discount rate is the implicit rate if it is readily determinable or other the Organization uses a risk-free discount rate. The implicit rates of the leases are not readily determinable and accordingly, the Organization used a risk-free discount rate using a period comparable with that of the individual lease terms. Lease cost for lease payments is recognized on a straight-line basis over the lease term.

The Organization has elected, for all underlying classes of assets, to not recognize ROU assets and lease liabilities for short-term leases that have a lease term of twelve months or less at lease commencement and do not include an option to purchase the underlying asset that the Organization is reasonably certain to exercise. The Organization recognizes lease costs associated with the short-term leases on a straight-line basis over the lease term.

As a result of the adoption of the new lease accounting guidance, the Organization recognized on July 1, 2022, a lease liability of \$4,033,327, which represents the present value of the remaining operating lease payments discounted using a risk-free discount rate with a weighted average of 2.16%, and a ROU asset of \$3,997,424 (see Note 4).

NOTE 3 – PROPERTY AND EQUIPMENT

Property and equipment are summarized as follows:

Buildings	\$ 21,742,637	(40 years)
Furniture and equipment	217,248	(5-7 years)
Construction in progress	<u>4,536,468</u>	
	26,496,353	
Accumulated depreciation	<u>(8,347,686)</u>	
	18,148,667	
Land	<u>929,306</u>	
Net book value	<u>\$ 19,077,973</u>	

The buildings have been pledged to secure their respective mortgages. Depreciation expense for the year ended June 30, 2023 was \$543,566.

OUTREACH DEVELOPMENT CORPORATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2023

NOTE 4 – LEASES

The Organization is a lessee in various noncancellable operating leases for buildings, office equipment, and automobiles as follows:

- A) In January 2008, the Organization signed a ten-year lease for one of its programs in Bellport, NY. The lease had two five-year renewal options. In July 2018, the Organization exercised its first five-year option, and the lease was scheduled to expire on June 30, 2023. In July 2023, the Organization exercised its final five-year option. The current lease is from July 1, 2023, to June 30, 2028. The lease calls for monthly payments of \$15,392 with annual escalations.
- B) In November 2021, the Organization signed a ten-year lease for one of its programs in Greenpoint, Brooklyn. The lease is from January 1, 2022, to December 31, 2031. The lease calls for monthly rents of \$13,884 with annual escalations.
- C) In October 2012, the Organization signed a ten-year lease for one of its programs in Brentwood, NY. The lease was scheduled to expire on October 31, 2022. In October 2022, the Organization extended the lease from November 1, 2022, to October 31, 2027. The lease calls for monthly rental payments of \$14,750 with annual escalations.
- D) The Organization leases seven vehicles with three-year leases with maturity dates ranging from 2023 to 2025. The monthly lease payments range from \$400 to \$700 with a total annual cost of approximately \$43,000. The leases are treated as operating leases.
- E) The Organization leases various equipment (copiers, faxes, etc.) for its operational use. The leases are generally for thirty-nine months with maturity dates ranging from 2023 to 2026. The annual lease cost is approximately \$85,000. The leases are treated as operating leases.

As of June 30, 2023, the total Right-of-use asset and lease liabilities are as follows:

Right-of-use assets – operating	\$ 3,997,424
Less: Accumulated amortization	<u>(610,471)</u>
Right-of-use assets – operating -net	<u>\$ 3,386,953</u>
Lease liabilities – operating	<u>\$ 3,499,386</u>

Total lease costs for the year ended June 30, 2023, amounted to \$ 689,358. The weighted average of the remaining lease term and weight-average discount rate are 6.37 years and 2.16%, respectively.

The future minimum lease payments under operating leases are as follows:

<u>Year Ending June 30,</u>	<u>Amounts</u>
2024	\$ 628,807
2025	602,847
2026	605,907
2027	609,896
2028	497,663
Thereafter	<u>789,801</u>
Total lease payments	\$ 3,734,921
Less interest	<u>(235,535)</u>
Present value of lease liabilities	<u>\$ 3,499,386</u>

OUTREACH DEVELOPMENT CORPORATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2023

NOTE 5 – LONG-TERM DEBT

Long-term debt is summarized as follows:

	<u>Total Long - Term Debt</u>	<u>Current Portion</u>	<u>Long-Term Portion</u>
A) \$	5,969,000	\$ -	\$ 5,969,000
B)	1,690,407	1,690,407	-
C)	4,579,500	-	4,579,500
D)	2,955,288	-	2,955,288
	<u>\$ 15,194,195</u>	<u>\$1,690,407</u>	<u>\$ 13,503,788</u>

- A) This represents advances from the NYS Office of Addiction Services and Supports on a capital contract to renovate the residential facility in Brentwood, NY. As part of the capital contract, upon completion, ODC has agreed to participate in a bond issue authorized by the New York State Dormitory Authority. As of June 30, 2023, the outstanding balance on the loan was \$5,969,000. There is no scheduled maturity of this loan.
- B) This represents advances from the NYS Office of Addiction Services and Supports on a capital contract to renovate the residential facility in Richmond Hill, NY. As part of the capital contract, upon completion, ODC has agreed to participate in a bond issue authorized by the New York State Dormitory Authority. As of June 30, 2023, the outstanding balance on the loan was \$1,690,407. Subsequent to the fiscal yearend, the capital project was canceled and \$1,127,112 which included \$7,079 of interest, was repaid to the funder. The Organization also recognized a grant revenue and expense in the amount of \$570,373.
- C) This represents advances from the NYS Office of Addiction Services and Supports on a capital contract to renovate the residential facility in Brentwood, NY. As part of the capital contract, upon completion, ODC has agreed to participate in a bond issue authorized by the New York State Dormitory Authority. As of June 30, 2023, the outstanding balance on the loan was \$4,579,500. There is no scheduled maturity date for this loan.
- D) This represents advances from the NYS Office of Addiction Services and Supports on a capital contract to construct a community residential facility for young adults in Brentwood, NY. As part of the capital contract, upon completion, ODC has agreed to participate in a bond issue authorized by the New York State Dormitory Authority. As of June 30, 2023, the outstanding balance on the loan was \$2,955,288. There is no scheduled maturity date for this loan.

NOTE 6 – GOVERNMENT REIMBURSEMENT CONTRACTS

Government reimbursement contracts consist of the following:

NYS Office of Addiction Services & Supports	\$ 13,361,022
County of Suffolk Department of Alcoholism And Substance Abuse Services	971,734
NYS Department of Health	403,687
Research Foundation for Mental Health	1,283,034
Brentwood Union Free School District	217,450
Western Suffolk BOCES	155,000
United States Department of Health	290,559
Federal Emergency Management Agency	10,000
Total	<u>\$ 16,692,486</u>

OUTREACH DEVELOPMENT CORPORATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2023

NOTE 7 – GOVERNMENT WELFARE PROGRAMS AND CLIENT FEES

Government welfare programs consist of the following:

Public Assistance	\$ 272,329
Breakfast and Lunch program	141,874
Food stamps	<u>54,006</u>
Total	<u>\$ 468,209</u>

Client fees consist of the following:

Medicaid	\$ 5,044,216
Medicaid managed care	4,482,080
Private insurance	1,409,108
Client payments	677,540
Medicare	<u>74,727</u>
Total	<u>\$ 11,687,671</u>

NOTE 8 – EMPLOYEE BENEFIT PLAN

ODC has a non-contributory defined contribution plan covering all employees who meet age and service requirements. The Organization makes monthly contributions to the plan and the total pension expense of \$795,972 is included in payroll taxes and fringe benefits in the Statements of Functional Expenses of these financial statements.

NOTE 9 – DEFERRED COMPENSATION

ODC has a Section 457 deferred compensation plan calling for quarterly payments of 2% to 8% of the officers' salaries, according to years of service, to be deposited with the Organization's agent. A deferred compensation expense of \$138,928 has been included in payroll taxes and fringe benefits in the Statements of Functional Expenses of these financial statements. As of June 30, 2023, the deferred compensation liability balance was \$37,447 and is included in accounts payable in the Statements of Financial Position of these financial statements.

NOTE 10 – POST-RETIREMENT BENEFITS PAYABLE

In 2008, the Board of Directors of ODC established a supplemental post-retirement benefits plan (the "Plan") for two of its officers. Upon reaching both 25 years of service and 55 years of age, these officers are eligible at retirement for one year of compensation and lifetime medical, dental, and long-term care insurance coverage. The medical portion of this benefit converts to supplemental coverage when each officer becomes eligible for Medicare coverage. For every additional year of service above 25 years, these officers are entitled to an additional two weeks of compensation. As of June 30, 2023, the estimated actuarial liability for these benefits is \$218,975.

OUTREACH DEVELOPMENT CORPORATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2023

NOTE 10 – POST-RETIREMENT BENEFITS PAYABLE (Continued)

The funded status of the Plan as of June 30, 2023 is as follows:

Change in benefit obligation:	
Benefit obligation at beginning of year	\$ 207,007
Actuarial loss (gain)	11,968
Benefits paid	<u>-</u>
Benefit obligation at end of year	218,975
Fair value of plan assets	<u>-</u>
Funded status (unfunded)	\$ <u>(218,975)</u>

The amounts recognized in net assets without donor restrictions as of June 30, 2023 is as follows:

Actuarial loss (gain)	<u>\$ 11,968</u>
-----------------------	------------------

The weighted assumptions used as of and for the year ended June 30, 2023 is as follows:

Discount rate	5.10%
Rate of compensation increase	N/A
Medical care cost trend rate	5.00%
Dental care cost trend rate	4.00%
Long-term care cost trend rate	4.00%

The projected benefit payments are as follows:

<u>Year Ending June 30,</u>	<u>Amounts</u>
2024	\$ 12,800
2025	13,500
2026	14,700
2027	15,300
2028	16,600
Thereafter	<u>146,075</u>
Total	\$ <u>218,975</u>

NOTE 11 – NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions for the year ended June 30, 2023 is summarized as follows:

	<u>July 1, 2022</u>	<u>Additions</u>	<u>Releases</u>	<u>June 30, 2023</u>
Other services	<u>\$ 20,000</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 20,000</u>

OUTREACH DEVELOPMENT CORPORATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2023

NOTE 12 – RELATED-PARTY TRANSACTIONS

Outreach Development Corporation and Outreach Projects, Inc. share common management and staffing. During the fiscal year ended June 30, 2023, the following were considered to be related party transactions:

- A) OPI made restricted contributions to ODC of \$386,000.
- B) ODC leases one of its facilities from OPI calling for average annual rentals of \$314,000 on a month-to-month basis. Rents paid to OPI totaled \$319,375.
- C) ODC owed OPI for unpaid net operating transactions. A 7% interest is charged for unpaid balances. Total interest incurred with respect to this obligation was \$40,593. As of June 30, 2023, the Due to OPI reflected on the Statement of Financial Position was \$619,914.

NOTE 13 – CONTRIBUTED SERVICES

The New York City Department of Education and the Eastern Suffolk Board of Cooperative Educational Services (BOCES) contribute a significant amount of teachers' time to augment ODC's programs. The value of this time, which has not been included in the Statements of Activities or Functional Expenses, cannot be determined. In addition, a substantial number of unpaid volunteers have made significant contributions of their time to develop ODC's programs. The value of this contributed time is also not reflected in these financial statements since it does not meet the requirements to be recorded under generally accepted accounting principles in the United States of America.

NOTE 14 – COMMITMENTS AND CONTINGENCIES

The contractual agreements with various funding sources include provisions for claims and program audits in subsequent years. These audits may result in disallowance and repayment of costs previously reimbursed by the funding sources. Management estimates potential disallowances based on past experiences. Management has not established a contingency reserve to cover the cost of future disallowances, if any, in the accompanying statements of financial position.

NOTE 15 – CONCENTRATIONS

Financial instruments that potentially subject the Organization to a concentration of credit risk include cash accounts with various financial institutions that exceed the Federal Deposit Insurance Corporation ("FDIC") insurance limits. The FDIC insures deposits up to \$250,000 per depositor per insured bank. During the fiscal year ending June 30, 2023, the Organization had cash accounts that from time to time exceeded the FDIC insurance limits. Management monitors its financial risks regularly.

A concentration of risk also exists between ODC and the New York State Office of Addiction Services and Supports (OASAS). For the year ending June 30, 2023, ODC received 51% of its funding from OASAS.

NOTE 16 – ACCRUED COMPENSATED ABSENCES

ODC has a policy that allows for the accrual of unused vacation pay up to a maximum of 30 days per employee. An employee will not be reimbursed for more than 20 days of accrued vacation leave upon separation from the Organization. Unused sick leave pays lapses upon termination of employment. As of June 30, 2023, accrued compensated absences amounted to \$588,855.

OUTREACH DEVELOPMENT CORPORATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2023

NOTE 17 – LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS

The Organization regularly monitors liquidity required to meet its operating needs and other contractual commitments. The Organization has various sources of liquidity at its disposal, including cash and receivables. For the purpose of analyzing resources available to meet general expenditures over a 12-month period, the Organization considers all expenditures related to its ongoing program activities as well as the supporting services to be general expenditures.

In addition to financial assets available to meet general expenditures over the next 12 months, the Organization anticipates collecting sufficient revenue to cover general expenditures not covered by restricted resources. Refer to the statements of cash flows which identifies the sources and uses of the Organization's cash.

Financial assets available for general expenditures, that is without donor or other restrictions limiting their use, within one year of the statements of financial position date, comprise the following:

Cash	\$ 9,865,988
Receivables	3,439,434
Less: Restricted cash	(4,434,800)
Net asset with donor restrictions	<u>(20,000)</u>
Total	\$ <u>8,850,622</u>

NOTE 18 – SUBSEQUENT EVENTS

Management has evaluated, for potential recognition and disclosure, events and transactions that occurred subsequent to the date of the statement of financial position through January 8, 2024, the date the financial statements were available to be issued. Other than the item mentioned below, there were no events that have occurred subsequent to the statement of financial position date through January 8, 2024, that would require adjustment to or disclosure in the financial statements.

In July 2023, the Organization signed a five-year lease starting July 1, 2023 to June 30, 2028. The lease calls for monthly payments of \$15,392 with annual escalations.