

Alfiero & Lucia Palestroni Foundation, Inc.

A Tax Exempt Private Foundation
333 Sylvan Avenue, Suite # 100
Englewood Cliffs, NJ 07632
Phone (201) 568-8000 Fax (201) 568-6973
E-mail: info@palestroni.com

2024 ALFIERO & LUCIA PALESTRONI FOUNDATION GRANT APPLICATION

Use this format only to apply for a grant

1. Name of Organization: _____ Crossroads4Hope
2. Address of Headquarters Office: _____ 3 Crossroads Drive, Bedminster, NJ 07921
3. Telephone: _____ 973-210-7471 _____ Fax: _____
E-mail: _____ akent@crossroads4hope.org _____
Website: _____ https://crossroads4hope.org/ _____
4. Date
Organized: _____ 2001 _____
5. Date and Place of Incorporation: _____ 3/5/02 _____
6. Federal Tax Exempt Status: _____
501©(3) _____
Please include IRS Code Determination and a Copy of IRS letter as Exhibit 1.
7. Staff Head
Name: Amy Sutton
Title: _____ CEO _____
Volunteer or Compensated: _____ Compensated _____
Amount of Compensation/Benefits (if any): \$150,000 _____
8. Staff Head
Name: _____
Title: _____
Volunteer or Compensated: _____
Amount of Compensation/Benefits (if any): _____

Kindly list Officer/Members or the Board of Directors with Compensation/Benefits (if any) if they serve as Management as Exhibit 2.

9. Chief Purpose of the Organization:

Crossroads4Hope, A Network of Cancer Support is THE safe place for people to turn first to restore their whole being and family. We embrace all people touched by cancer—previvors, patients, survivors, caregivers, family members (especially children), and loved ones. We take on the cancer journey together with individuals, helping them move through their health crisis to become activated to take control of their health and care through access to resources and programs of support, education, wellbeing, and hope, always offered at no charge to individuals and families.

10. Brief History of the Organization

Crossroads4Hope is a network of cancer support that embraces all people touched by cancer—patients, caregivers, family (especially children) and loved ones—empowering individuals through access to resources, as well as programs of support, education, wellbeing, and hope. We integrate the disciplines of social work, child life, public health, and other mental and allied health professionals to create a more significant impact in the community oncology health space; to provide the highest level of social and emotional support; and offer the widest range of assistance and resources to support our members. We are committed to upholding the dignity of all people through cultural humility and respect for race, ethnicity, gender identification, sexual orientation, and income difference.

Our founders, four local women who had both professional and personal experiences with the disease, believed that social and emotional support should be available to all people facing cancer regardless of where they are on their journey, and the services should always be free of charge. In 2002, they created an independent 501(c)(3) organization that they named Hope Springs, and in 2004, they believed they would most successfully meet the needs of the community by affiliating with a national non-profit cancer support organization. For over 15 years, we worked within that structure and were limited to a six-county region in central New Jersey. More significantly, we were limited in our ability to innovate. Therefore, in September 2020, our Board of Trustees determined that to best uphold the vision of our founders, and to best meet the changing needs of the untold numbers of people dealing with cancer every day, we needed to end our licensing agreement with the national non-profit. On February 1, 2021, we became Crossroads4Hope: A Network of Cancer Support

11. Brief Description of the Organization's Programs in the Most Recent Year:

Please include descriptive materials, publications, etc. as Exhibit 3.

12. Names of Six Major Contributors: (to Support4Families)

Please include amount of support given by each last year.

1. _Bayer Fund Amount_ \$125,000 (Support4Families)
2. _Margaret A Darrin Charitable Trust Amount_ \$500,000 (3 year capacity grant of 1.5M)
3. _Gilead Amount_ \$125,000 (focused on mbC outreach)
4. _Gilead Amount_ \$100,000 (focused on outreach)
5. _BeiGene Amount_ \$50,000 (outreach)
6. _Somerset Hills Community Fund Amount_ \$45,000 (outreach)

13. Three Most Important Needs for Funding by the Palestroni Foundation and the amount you seek for each:

Please list in order of priority.

1. _Crossroads4Hope (CR4H) is grateful for the opportunity to submit this proposal for \$20,000 to the Alfiero and Lucia Palestroni Foundation to underwrite a portion of our comprehensive Support4Families (S4F) program, which addresses the psychosocial, psychoeducational, mind body wellness programming for children and parents, and the community. Our work helps to “close the cancer care gap” for all individuals affected by cancer, especially children and families.

Crossroads4Hope is committed to its vision to be THE safe space where a person turns first when affected by cancer to restore one’s whole being and family. Key to achieving this vision is our work supporting children, youth, and parents. Support4Families, an initiative launched in 2018, is a key component of our evidence-based programs focusing on addressing the emotional and social needs of children, youth, and parents as individuals and as a family unit. We tailor the delivery of psychosocial support, education, resources, and other interventions that families need in the face of a cancer health crisis, helping to reduce distress, improve coping and communication skills and the ability for individuals at any age to self-advocate. These skills are especially essential for children and hold value in their lives beyond cancer with the increasing mental health challenges that young people face today.

Support4Families offers youth and family direct support; community focused education and outreach; and resources for professionals to ensure that children facing a direct or indirect cancer diagnosis are supported using age and developmentally appropriate language and approaches: the program is managed by a certified child life specialist and draws on best practices in delivering a family centered program. Through outreach to community institutions including schools, NGOs, government organizations, and healthcare providers, and as part of our overall outreach strategies to vulnerable populations, we expect to increase our referrals to our Support4Families program in 2023 and to provide our services to more children and families experiencing a cancer diagnosis directly or indirectly through a loved one. All of our programs are always offered free of charge and for as long as a member needs them.

Outreach:

Since 2021, we have been implementing our unique approach to expanding access to our services into vulnerable and under-resourced communities. Our public health team is forming partnerships with community resource organizations, faith-based institutions, and medical centers, and delivering programs and education to normalize conversations about cancer and activate individuals to access routine screenings and preventative care.

In 2022, we launched our Health Champion Program to train, activate, and mobilize lay community members as "first responders," helping us build trust and ensure faster connections to our services, making a greater impact. Most people do not know what to do or say when someone is diagnosed with cancer. Champions gain a deeper understanding of cancer and its emotional and social impact, enabling them to provide effective and timely support and connect individuals to our team of professionals (social workers, child life specialists, public health professionals and oncology registered dietitians), thereby expanding our reach and impact.

Participants in Health Champion Workshops learn how to:

- Provide information about cancer and the importance of prevention and screenings to help normalize conversations about cancer in low-income communities
- Teach the importance of shared treatment decision-making and how to prepare to talk with a doctor through our My Voice Matters Program
- Activate people to make timely referrals to Crossroads4Hope, including enrollment in our MyGo2Support Program – our 24/7 direct-to-mobile support platform that combines intelligent design with CR4H's programs.

MyGo2Support: CR4H's innovative MyGo2Support Program (MG2S) seamlessly delivers ongoing supportive care to individuals directly to a phone without needing to login to an app. The program curates care pages and messages specific to an individual's persona and includes weekly distress screenings to identify the individuals that need immediate clinical intervention. When patients escalate, our team of allied health professionals proactively reach out within 24 hours to prevent these escalations from changing health outcomes. The program is available in English and Spanish. MyGo2Support amplifies our team's impact, filling critical gaps in care – between medical appointments and event gaps within the healthcare system itself.

Support Groups: Delivered at no charge to all affected by cancer, for as long as they wish, our oncology support groups provide critical psychosocial intervention for cancer patients, survivors, caregivers, family, and friends across the cancer continuum: from diagnosis to survivorship and beyond, to bereavement for those left behind. Our groups are a safe place of connection where people feel less alone; our research demonstrates that the groups decrease depression and stress, as well as improve quality of life. Support groups are ongoing throughout the year and are regularly scheduled on a weekly, bimonthly, or monthly basis in an "open group" format, with new members joining as they identify the need. Each session is typically 1.5 hours long with 5-12 participants per session. Since the Covid-19 pandemic, all our support groups are offered virtually via a HIPAA compliant video conferencing platform. The groups are facilitated by a

licensed mental health professional (social workers, child life specialists, and psychologists), specially trained to work with people affected by cancer. We have had some in person groups at our campus in Bedminster, but most of them have continued to be held virtually. As we grow our reach to support more members across the state of NJ and beyond to establish a strong national footprint, these virtual support groups truly support members wherever they are and do not confine us to only those who can drive to our physical location. Through these groups, people with cancer are empowered to partner with their healthcare team to make treatment decisions and take control of how they will live with cancer: from diagnosis through treatment to survivorship and beyond. Family and caregivers are supported in their journey with the Friends and Family, Parent, and Bereavement support groups.

In 2023 we added a bilingual Spanish support group that is held virtually twice a month and facilitated by our bilingual social worker.

14. Are Funds Donated to or Raised by the Organization Passed on to Other Charities?
If yes, please list the charities and the amounts given to each in the last two years.
n/a

15. Gross Income in 2023: \$1,363,316
Program Expense in 2023: \$1,172,841
Management and General Costs in 2023: \$75,299
Fund Raising Costs in 2023: \$222,015
Please note that 2024 has not been audited yet

16. Copy of the Most Recent Financial Audit or Year End Financial Report.
Please enclose as Exhibit 4.

17. Copy of the Most Recent IRS 990 and Schedule A..
Please enclose as Exhibit 5.

18. Copy of Current Budget.
Please enclose as Exhibit 6.

19. Copy of the Current Annual Report if available.
Please enclose as Exhibit 7.

PLEASE ENCLOSE ANY OTHER DOCUMENTATION WHICH YOU FEEL WOULD BE OF INTEREST AND/OR ASSISTANCE TO THE TRUSTEES AS EXHIBIT 8.

WE REQUIRE ONE FULL SET OF GRANT APPLICATION AND ATTACHMENTS IN ORDER TO PROCESS APPLICATION. WE ALSO ASK THAT YOU SEND THE APPLICATION ELECTRONICALLY TO INFO @PALESTRONI.COM

PLEASE SEND THE ONE COPY OF THE GRANT APPLICATION ALONG WITH ALL REQUESTED MATERIALS TO:

Alfiero & Lucia Palestro Foundation, Inc.
Attn: Kristine Sayrafe, Foundation Manager
333 Sylvan Avenue, Suite 100
Englewood Cliffs, NJ 07632

AS TRUSTEES MEET THROUGHOUT THE YEAR TO CONSIDER GRANT APPLICATIONS, WE ENCOURAGE YOU TO SEND THE COMPLETED FORMS AND EXHIBITS AT YOUR EARLIEST CONVENIENCE.

March 4, 2025

Kristine Sayrafe
Executive Director
Alfiero and Lucia Palestroni Foundation
333 Sylvan Ave
Englewood Cliffs, NJ 07632-2724

Dear Ms. Sayrafe,

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Assessment of Need for the Project

The reality is that hearing, “You have cancer” brings unprecedented emotional, social, spiritual, physical, and financial burdens for all those affected within a family unit— patients and their loved ones. Families also face an ever-increasing myriad of challenges, including cancer care that has become highly specialized, complex, and costly. Cancer makes life difficult for families with children.

Of the over 2 million adults who are diagnosed with cancer annually, 25% will also be raising school-aged children. For children and adolescents, cancer is the leading disease-related cause of death. For adolescents and teens, there are also significant unmet needs at the local and national level around access to psychosocial support when facing a cancer diagnosis or the cancer diagnosis/death of a family member. Add to these already staggering statistics, the number of children who have lost a loved one (parent, sibling, grandparent, aunt, uncle, other relative or close friend) to cancer, and the fact that few if any cancer-specific options exist for emotional, mental, and physical support provided by licensed professionals.

In addition to the numbers of adults and children who are impacted, where you live may mean the difference between life and death despite the significant progress in cancer prevention, diagnosis, and treatment. An equity gap is creating barriers for people seeking cancer care. Cancer is a disease that can affect anyone but does not affect everyone equally, citing a variety of social and structural barriers that limit access to treatment and effective prevention and survival. (ACS, 2021)

Other factors that create a disproportionate burden on children and families facing cancer, include:

- Co-morbidities - 48% of cancer survivors, 8.1 million people primarily in the age range where people are also raising children, ages 18 to 44 years old, are living with three or more chronic health conditions due in large part to lifestyle. These chronic disease conditions correlate with increased psychological distress, healthcare utilization, cost, financial distress, and poorer health outcomes.

- **Financial Toxicity** - Today, cancer patients are 2.5 times more likely to file for bankruptcy after being diagnosed. Cancer care is one of the costliest healthcare specialties in the United States. Cancer treatments are expensive; insurance coverage is often inadequate, and as of 2021, 64% of uninsured adults said that it was because the cost of coverage was too high. Cancer survivors have higher out-of-pocket healthcare costs, even years after initial diagnosis, than individuals without a cancer history. Between 22% and 64% of cancer patients report being stressed or concerned about paying for their medical expenses.
- **An Ongoing Healthcare Crisis** - The U.S. healthcare system remains in crisis, made worse by the pandemic. Care delivery is highly fragmented, costs are at an all-time high, and a severe workforce shortage exists. Health technology and widening socioeconomic inequities are leading to ever-broadening healthcare disparities perpetuating the status quo for vulnerable and underserved patient populations with the ultimate burden of late-stage diagnoses and higher-than-average mortality rates. The healthcare system's failure impacts people's lives, families, and already overburdened communities.

Driving our sense of urgency is the reality that lives are in the balance, which has a ripple effect within families and communities. At Crossroads4Hope, we are working to "Close the Cancer Care Gap" by bringing about systemic change that improves the quality of life for all cancer patients, survivors, and caregivers. Change starts with reimagining the role of social work, a profession rooted in social justice and focused on addressing the needs of people, families, and communities, not the disease. It is our experience that social workers, working alongside other practitioners, such as child life and public health professionals and enabled by technology and innovative models of public health outreach, can reduce the burden and barriers to care caused by cancer that is tearing at the fabric of millions of people's lives and the communities where they live.

Crossroads4Hope's Response: Empowering Families and Communities:

Together, we take on the cancer journey with all those impacted as they move through and beyond cancer. Our evidence-based framework and interventions address the health crisis caused by cancer; decrease distress and isolation; increase a sense of control; address health disparities; and increase awareness and access to psychoeducational resources, enabling patients and families to embrace healthy behaviors and gain hope, meaning, and a new attitude towards cancer. We fill people's "toolboxes" with knowledge, skills, and resources needed throughout their lifetime. We give people the confidence to self-advocate and take control of their health and well-being.

Our Overall Approach:

Since 2018, we have focused on building internal competence, programmatic depth, and outreach capabilities to effectively respond to the growing needs of children and families facing cancer. We have built a unique interdisciplinary team that encompasses social work and public health professionals, registered oncology dietitians, and certified child life specialists and trained allied health professionals that specialize in education and therapeutic play for children experiencing trauma due to acute or chronic illness, loss, and/or bereavement. In fact, Crossroads4Hope is a leader in how we utilize certified child life specialists, a profession with a limited scope of practice and historically found within pediatric healthcare environments. By empowering these professionals, under the guidance of social work in a community-based setting, they can develop and implement innovative, family-focused, age-appropriate approaches that strengthen each family members' skills and transform crisis into hope. In 2024, our focus on fully integrating child life specialists within our public health community outreach efforts to bring our expertise to those families most at risk caused an increase in requests by organizations in the community for our expertise. On July 17th, Caitlin Novelli, C.C.L.S. presented to 15 case workers at Emmanuel Cancer Foundation and empowered them with language and knowledge of child development and how to support kids at each stage of their childhood. She provided the case workers serving children across the state of NJ with activities to do in homes with kids who have a cancer diagnosis. As we continue to establish our presence as a leader in child life work expanding our reach from our conference to school presentations, online evergreen content, and printable resources, we can transfer our skills to scale our impact.

For children and youth facing their own diagnosis or the diagnosis or death of a loved one from cancer, we help them cope with and recover from the effects of cancer and draw from these skills throughout their lives. Social programming allows for a non-threatening point of entry for children and families affected by cancer and the opportunity for us to provide wrap-around support to those who may have additional psychosocial needs.

According to the Association of Child Life Professionals, "By maintaining and advancing a patient-and-family-centered healthcare environment, Certified Child Life Specialists mitigate pediatric medical traumatic stress and improve mental health outcomes for infants, children, adolescents and emerging adults, and families." We have brought their skills into the community to give families tools that they can use throughout their life as a foundation for coping that extends beyond a cancer diagnosis. Which is why we

are committed to increasing the reach of this work.

As we work with families, we are increasingly supporting from a multidisciplinary way as evidenced by a recent case supporting a family with a young father's advanced stage colorectal diagnosis. As we support the father through one-on-one support and group support as part of the men's group, we are also working with his wife and small children in age and developmentally appropriate ways. Our social work and child life specialists work collaboratively to support the family through all stages of a diagnosis to ensure that the entire family is supported. This family has chosen to have sessions with each parent and their young school-aged child, switching between parents. They spend time together sharing their feelings and acknowledging any concerns or fears that arise, giving them each the opportunity to connect with their child with the support of a professional.

In early 2024, our team began to work with Chris, another young man with an advanced colorectal diagnosis along with his wife, Mary, and his two young children, Jack and Kate, aged 6 and 4. Through multidisciplinary support with Certified Child Life Specialists and social work, our team has navigated the complexities of living with an advanced cancer diagnosis while raising young children, providing resources, tools, and support to the entire family unit. In the spring of 2024, Mary gave birth to a third child amidst her role of caregiver to her husband, highlighting another layer of difficulty in a younger person's advanced cancer diagnosis. Our team remains in contact with the family and will continue to check in and provide support throughout the year, as needed. His mother recently wrote to us: "I can't emphasize enough what an amazing resource you have been for Jack and our family. You helped get us through a rough time and I am grateful to have you in our corner for whatever comes next. "

In 2025, we will continue to integrate child life into our outreach work, increasing awareness of our programs and services through multi-disciplinary program delivery with public health educators and our registered oncology dietitian. Increased development of recorded digital content and expansion of our Spanish resources has expanded access to our work. As we integrate our Support4Families program into communities, we are continuing to deepen our needs assessment of each partner to determine the best point of entry program or support. For example, a recent presentation about skin cancer education to a family center in New Brunswick was a less threatening entry point by taking about sunscreen safety than diving right into a conversation cancer, but then had a natural progression to talk more about cancer. Nutrition programs have similarly been well received by community partners.

As a direct result of our public health outreach efforts, in 2024, the team scheduled 65 different education events in the community, reaching nearly 5,000 people. All these events become entry points for families with children facing cancer, and the community partnerships we create become natural points of referrals into our direct to mobile program, MyGo2Support, and our wrap around psychosocial support programs. This is why we are continuing to embed child life specialists in our outreach efforts. We continue to see an increase in our Spanish speaking members, who are supported by our bilingual social worker and child life team. This has resulted in better tools and resources to help these families understand cancer in ways that empower their ability to self-advocate.

As an example, a Spanish speaking member came to us with hesitancy in disclosing a cancer diagnosis to her children. After speaking with our child life specialists about disclosure, we followed up by sending a care package containing books that addressed cancer in age and developmentally appropriate ways. A few weeks later, we followed up and asked if the books were helpful and whether she decided to disclose her diagnosis to her children; she informed the team that they were most helpful to her because she really did not understand her diagnosis because no one had explained it to her in an accessible way. These books gave her the courage to speak with her children. Our team is committed to ensuring that everyone has access to information about what is happening to their body or their loved one in a way that is appropriate for them. Our child life specialists often educate families about the benefits for children when a cancer diagnosis is disclosed to them, as we find for people of any age, knowledge can be so powerful.

All our efforts combined with our growing use of technology as an enabler, and virtual programming capability has positioned us to effectively support families in **14 states**.

Through both our new digital member record form and ongoing HAYD surveys, we have conducted digital social needs screenings where individuals were triaged to our social work team for timely intervention due to the following areas:

- 31% reported lacking companionship, regardless of income
- 48% reported that in the next 2 months, they might not have stable housing
- 12% reported that problems getting childcare make it difficult to work or study
- 28% reported that they needed to see a doctor but could not because of cost.
- 31% reported that lack of transportation kept them from medical appointments, work or school

- 19% reported needing help reading hospital materials

The growing complexities within family systems, including mental health and health disparities, continue to create barriers to care that complicate a cancer diagnoses, including: a lack of insurance, access to treatment, transportation, childcare, health literacy, and financial constraints. Our team provides culturally competent support, programs, resources and navigation and referral services to help address these issues. Thanks to generous donations from individuals in our community, we have developed two unmet needs funds— two for the families of pediatric cancer patients and one for single women with children facing a cancer diagnosis totaling \$140,342.28 in cash funds and another \$100,000 pledged. Since these funds were developed, we have distributed over \$100,000, with \$33,750 distributed to children and families in 2024 alone. As we expand our reach into more under-resourced communities as part of our overall outreach initiatives, we expect to experience an increased demand for these funds, and they will become a strategic point of entry. Referrals for support from these funds which come from community organizations, schools, and hospitals often result in more engagement in our other programs because prior to distributing the funds, we do a full social work assessment to determine related needs of the recipient. While this fund is not included in our proposal to you, it represents another level of our growing programs offering families that expands the way we can help transform the cancer experience for children, youth, and families.

Because parents coping with cancer are busy, our MyGo2Support, program powered by GoMo Health is a direct-to-mobile go-to resource that integrates best practices in patient activation, psychosocial support, and behavioral health into a unique health management and psychosocial support system. The program offers personalized digital cancer resources and support, as well as access to our mental health and allied health professionals for further intervention when needed through bi-directional chat functionality. CR4H has developed a specific track for parents raising children that delivers tailored messaging delivered seamlessly within their lived environment, whenever they need it. Embedded within the MyGo2Support program is the ongoing, subtle monitoring of distress and risk for depression using validated measurement tools to triage to our social work and child life professionals for intervention response.

Goals and Objectives:

The Alfiero and Lucia Palestroni Foundation is enabling Crossroads4Hope to change lives, reducing the burden of cancer on children and families, empowering them with the knowledge, tools, and skills needed to cope with a health-related crisis such as cancer and to move through and beyond the diagnosis.

With continued support from you, we will:

- Continue to integrate child life specialists within our public health community outreach efforts, specifically within vulnerable communities in New Jersey to create points of entry to our program and bring our expertise to those families most at risk. Through this effort, we can then normalize conversations around cancer within families and identify those in need as far upstream as possible, so we can address social determinants of health before they become barriers to care.
- Respond effectively to the increase in referrals we are experiencing for children and families. The level of complexity families with young children are facing requires intensive and highly personalized support, psychoeducation, interventions, and resources to move them through and beyond the diagnosis of an adult or child. Our team draws on a multi-disciplinary approach to support the entire family.
- Expand the development of age-appropriate, wrap around programs and interventions delivered by our certified child life specialists that help the family effectively move through a health crisis and along the cancer journey, together. With the anticipated opening of the Mark Lipschutz Center for Nutrition and Family, this effort will prepare us to open the Stepping Stone Clubhouse with an expanded offering for families that can be delivered onsite and virtually within this new space.
- Expand access to our digital programs including those that educate professionals, and for parents, our MyGo2Support, a unique 24/7 digital, direct to mobile support program.
- Continue to serve as a thought leader in how to support children and families affected by cancer through the delivery of our Annual Conference on Cancer and community presentations to school professionals.

Outcomes and Evaluation Measures:

- We will measure the # of new record forms; # of youth records forms submitted; attendance hours; # of sessions; # of people attending our Annual Conference on Cancer in March 2025 # of community events catered to children and families; Data from our annual survey (parent responses)

- Anticipated Results-Families: We expect to see a growth by at least 10% of our program demonstrated by increased participation by children and families; new therapeutic activities with appropriate education about coping mechanisms and technique; child life curated support boxes distributed according to specific need and age of the child affected.
- Anticipated Results-Professionals: We expect to support 10% more professionals in our S4F outreach programs; expanded enrollment in Mighty Networks Professional Hub; increased enrollment in the Conference on Cancer; increased geographical reach; growth of education connections.

Key Staff:

Katherine Schaible, MSW, LSW, Senior Director, Program and Impact

As Senior Director, Program & Impact, Katherine Schaible is responsible for both the strategic vision and daily operations of Crossroads4Hope's comprehensive program of support. Since Katherine joined the team in 2015, she has been the driving force behind the growth of our mission through strategic outreach initiatives and the integration of our use of technology in a community-based model for oncology psychosocial care. Ms. Schaible is bilingual and provides support, education, and training to Crossroads4Hope's members in both English and Spanish. She holds a Bachelor of Arts in Social Work from Siena College and a master's in social work from Boston University with specializations in Group Dynamics and Trauma-Informed Practice. Prior to joining Crossroads4Hope, Ms. Schaible lived for several years in Ecuador, where she co-operated an after-school program for neglected children, taught ESL, and liaised with the US Department of State to promote Higher Education among aspiring international students. Katherine draws on this expertise every day in her role at Crossroads4Hope, managing a growing team of interdisciplinary support staff and mentoring next-generation professionals, and acting as the catalyst for change in vulnerable communities across New Jersey, and beyond.

Rachel Werner, MS, CCLS, Outreach and Program Manager

Rachel Werner joined Crossroads4Hope in May 2020 as a Child and Youth Program Coordinator, providing direct services to families facing cancer. In 2021, she was named Outreach and Program Manager, managing the Support4Families and Outreach initiatives. Ms. Werner is a Certified Child Life Specialist (CCLS) with clinical and administrative experience ranging from work in hospital settings, educational organizations, and international non-profits. In 2024, she transitioned to her current role, Manager, Program Development & Delivery. She graduated from Monmouth University with a bachelor's degree in psychology and later obtained her master's degree in child life from Bank Street College of Education. Ms. Werner completed her clinical education experiences at Stony Brook Children's Hospital and Winthrop University Medical Center, now NYU Winthrop Hospital. After obtaining her certification, she spent two years living and working in Israel where she created and implemented a child life position at Save a Child's Heart, a non-profit organization providing life-saving cardiac care for children from developing countries. In addition, she has used her clinical skills on medical missions in both Ethiopia and India. Ms. Werner is passionate about widening the reach of psychosocial care around the world and has spent time educating students and advocating for the expansion of services in the United States, Israel, and Romania. She has also presented her work on both regional and international platforms. Werner continues her work towards this mission through Child Life United, an organization focused on supporting the growth of psychosocial care services internationally while providing professionals and students opportunities to learn from locally sustained efforts, as the Director of Child Life United Together, Child Life United's virtual education, networking, and professional development platform.

Caitlin Novelli, BA, CCLS, Youth and Families Program Coordinator

Caitlin Novelli is a Certified Child Life Specialist (CCLS) with over fifteen years clinical experience providing family-centered psychosocial support in various settings. She has additional training in Child Life Disaster Relief and as a Life is Good Playmaker. Throughout her tenure, she has advocated for, developed, and implemented programming to meet the social, emotional, and developmental needs of the children and families she had worked with. As Crossroads4Hope's Youth and Families Program Coordinator, Ms. Novelli facilitates individual, family, and group interventions, addressing psychosocial needs and providing follow-up as needed.

She coordinates the development and delivery of educational workshops, social events, and support programs for children, teens, families, and community professionals. Ms. Novelli aims to make cancer education and coping strategies accessible through tailored language and concrete tangible activities.

Katie Fesenmaier, Certified Child Life Specialist, per diem

As a seasoned Certified Child Life Specialist (CCLS) with over 10 years of experience, Katie has supported children and families in various healthcare settings. Her background includes eight years at Rady Children's Hospital in San Diego, where she worked in inpatient surgical, outpatient dialysis and infusion, and NICU settings and two years in Houston hospitals, working in pediatric and PICU units, where she completed an international clinical practicum in Cape Town, South Africa. Katie currently works at Treasure Coast Community Health in Vero Beach, Florida, providing child life services in elementary

school and medical settings. Through her per-diem work at Crossroads4Hope, Katie offers age and developmentally appropriate interventions to children, teens, and families navigating the cancer journey.

Jessica Olivera, Social Worker, MSW, Bilingual

Jessica Olivera holds a Bachelor of Arts Degree in Family and Child Studies from Montclair State University (2007) and a Master of Social Work from Rutgers University (2015). After graduating, she worked as an Interim Administrative Specialist for the Children in Court program, coordinating the Child Review Board. She has since spent over 14 years in various roles at a nonprofit organization, consistently focusing on children and families. Concurrently, Jessica serves as a Bilingual Social Worker at Crossroads4Hope, providing psychosocial interventions for Spanish speaking individuals and families, and facilitates the Latino Support Group. With her first-hand experience and deep understanding of the unique needs within the Hispanic/Latino population, Jessica is an advocate for people affected by cancer, striving for social and medical justice for all.

Jennifer Kershima-Biam, MPH, Outreach Manager

Jennifer Kershima-Biam manages the day-to-day outreach initiatives and scheduling. She earned MPH from University of Sheffield, UK and BSc Human Anatomy from University of Maiduguri, Nigeria. Jennifer has extensive experience working in public health, starting in Nigeria working on HIV prevention and care programs before spending 5 years in the UK supporting the Somali Community. Prior to moving to the United States in 2017, Jennifer worked for the UN Joint Health and Nutrition Program in Somalia for two years. She moved to the United States in 2017 and joined Crossroads4Hope in 2022.

Siclali Flores, Public Health, Outreach Coordinator

Siclali Flores is a bilingual outreach coordinator dedicated to promoting health equity through her active engagement in community outreach initiatives. She earned her BS in Public Health Education from William Paterson University in May 2021 and is currently pursuing her master's in health administration at Rutgers University in New Brunswick. Siclali serves as the community scholar at the Edward J. Bloustein School of Planning and Public Policy at Rutgers University, where she focuses on diversity, equity, inclusion, and belonging (DEIB) programming. Her role includes expanding the directory of community partners, conducting DEIB-related research, and identifying unmet needs within the school.

As an outreach coordinator for Crossroads4Hope, Siclali serves as a vital community liaison, fostering collaborations with organizations, government agencies, and community groups to create impactful partnerships. She manages and maintains these relationships across North New Jersey, actively raising health awareness to enhance community health outcomes. Siclali contributes to strategic planning by facilitating needs assessments and executing cancer awareness and prevention programs, which aim to improve program efficacy, align with organizational objectives, and normalize conversations around cancer.

Kyle Jachim, MSW, LSW

Kyle Jachim graduated with a master's degree in social work from Rutgers University in 2019. Since then, Kyle has pursued a certification in Oncology Social Work and currently manages the social work department at Crossroads4Hope. He facilitates the caregiver support group, conducts individual intake and one-on-one sessions with people impacted by cancer and is instrumental in developing the framework for clinical support at Crossroads4Hope.

Hillary B. Sachs, MS, RD, CSO, CDN

Hillary completed her undergraduate education at Cornell University in Education and Nutritional Sciences, her master's degree in clinical nutrition at New York University, and board certification in oncology nutrition through the Commission on Dietetic Registration. Her past roles have included Nutrition Manager at Northwell Health's Cancer Institute, Professor of Nutrition at Hofstra University, and owner and founder of Hillary Sachs Nutrition, LLC. Hillary is a regular speaker at nutrition conferences and health seminars.

Continued support from the Alfiero and Lucia Palestroni Foundation will allow CR4H to significantly enhance the growth of our program and empower children and families by equipping them with the knowledge, tools, and skillsets for coping with a health-related crisis such as cancer.

Sincerely,

Ann

Ann Kent
Director of Corporate and Foundation Relations



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
PO Box 2508
Cincinnati, OH 45201

CROSSROADS4HOPE
3 CROSSROADS DRIVE
BEDMINSTER, NJ 07921

Date:
August 7, 2021
Employer ID number:
22-3804609
Form 990 required:
990, Yes
Person to contact:
Name: Melissa D Fields
ID number: 0194416

Dear Sir or Madam:

We're responding to your request dated March 12, 2021, about your tax-exempt status.

We issued you a determination letter in April 2002, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC 170(b)(a)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax-deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period.

- Form 990, Return of Organization Exempt From Income Tax
- Form 990-EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific time).

Thank you for your cooperation.

Sincerely,

Stephen A. Martin

Stephen A. Martin
Director, Exempt Organizations Rulings and Agreements

Letter 4168 (Rev. 09-2020)
Catalog Number 66666G



Pankaj Amin
Managing Director, SC
Ventures

Joel Beetsch, Ph.D.
Patient Advocate and
Biopharmaceutical Expert

Evan Berkley
President, Arize

Jennifer Bruner
Vice Chair, Secretary
Director, PLM and Sourcing
Technologies, Abercrombie &
Fitch Co.

Kristina DiPalo
Elysian Communications, LLC

Christopher Fornal
Treasurer
Director, BlackRock

Jonathan Hirschfeld
Vice Chair
Partner, PwC

Josephine Iglesias-Grana
Partner, PwC

Sandra Kennedy
Vice President, Area Manager,
Provident Bank (Ret.)

Debbie Lynch, Ph.D.
Executive Partner, Gartner

Rachel Lipschutz, Esq.
Philanthropist

Michael Mullen, Esq.
Partner, Schenck, Price, Smith
& King

Kristen Pagano
Vice President, Human
Resources Resonetics

Eric Raes
Vice President
AKRF

Govi Rao
CEO, Phase Change Solutions

Tom Schaible
Partner, Schaible Russo Financial

Simone Sloan, RPh MBA
CEO, Your Choice Coach

Amy Sutton
CEO, Crossroads4Hope

Kathleen Toomey, MD
Director, Steeplechase Cancer Center

Ralph Weaver
Past Board Chair
Founding President & CEO, East West
Connection

Lisa Zukauskas
Board Chair
Chief Procurement Officer, Organon
(Ret.)



"This organization has been a great pillar in my life. They provided me with the necessary resources to move forward in many aspects of my life that were stuck. I cannot thank Crossroads4Hope enough."

Isabel Cristina Osorio Puerta (Survivor, CR4H Member)

Our Mission

Our network embraces all people touched by cancer — the diagnosed and their loved ones — to become empowered to take control of their health and care, through programs of support, resources, education, wellbeing, and hope.



Our Vision

Our vision is to be THE safe space where people turn first to restore one's whole being and family.

Programs & Services



- Individual & Group Support
- Nutrition Programs
- Mind & Body Classes
- Educational Workshops
- Support4Families
- My Voice Matters: Treatment-Decision Support
- Resources & Referrals
- Financial Assistance



When Cancer Puts You at a Crossroads... You Are Not Alone.



crossroads4hope.org/support4families/

Support4Families

Crossroads4Hope's Support4Families program provides individuals and families with social and emotional support specific to children, teens, and parents/caregivers at any point in their cancer journey. Our interdisciplinary team of social workers and child life specialists put into practice a family-centered approach to care that includes consulting with schools and community professionals to ensure individualized care for each family is best suited for their needs.

MyGo2Support

Crossroads4Hope's MyGo2Support (MG2S) is a complimentary, mobile support program designed to put our resources into your hands 24/7, so no matter who you are, where you live, or where you are in your journey with cancer, you have access to personalized support and resources, when and where you need it most.



crossroads4hope.org/mygo2support/



crossroads4hope.org/support-groups/

Individual & Group Support

Support at Crossroads4Hope ranges from family interventions to decision support about treatments to building a coping toolkit and learning about coping strategies. Whether you are looking for individual support, to join a support group, or support for your family, we are here to help you through every step of your cancer journey. At Crossroads4Hope, you are never alone.

CROSSROADS4HOPE
FINANCIAL STATEMENTS
FOR THE YEARS ENDED
DECEMBER 31, 2023 AND 2022
WITH INDEPENDENT AUDITOR'S REPORT

CROSSROADS4HOPE
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CPAs • CONSULTING • WEALTH MANAGEMENT
PERSONAL FINANCIAL PLANNING

INDEPENDENT AUDITOR'S REPORT

*To the Board of Trustees of
Crossroads4Hope
Bedminster, New Jersey*

Opinion

We have audited the accompanying financial statements of Crossroads4Hope (a nonprofit organization), which comprise the statements of financial position as of December 31, 2023 and 2022, and the related statements of activities, functional expenses, and cash flows for the years 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 Crossroads4Hope as of December 31, 2023 and 2022, and the changes in its net assets and its cash flows for the years 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 Crossroads4Hope 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 these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes 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 Crossroads4Hope to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with generally accepted auditing standards, 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 Crossroads4Hope'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 Crossroads4Hope'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.

Tropeano & McGrady, P.C.

*Whitehouse Station, NJ
October 14, 2024*

CROSSROADS4HOPE
STATEMENTS OF FINANCIAL POSITION
FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022

	<u>2023</u>	<u>2022</u>
ASSETS		
<i>Current Assets:</i>		
Cash and cash equivalents	\$ 2,027,537	\$ 2,334,128
Pledges receivable, current portion	279,037	132,870
Prepaid expenses	14,064	10,176
Total Current Assets	<u>2,320,638</u>	<u>2,477,174</u>
<i>Fixed Assets:</i>		
Office equipment	34,662	34,662
Facility improvements	259,786	259,786
Building and land	577,463	564,238
	<u>871,911</u>	<u>858,686</u>
Less: accumulated depreciation	424,228	411,702
Total Fixed Assets	<u>447,683</u>	<u>446,984</u>
<i>Other Assets:</i>		
Investments	566,491	501,217
Pledges receivable, net of current portion	105,000	160,000
Total Other Assets	<u>671,491</u>	<u>661,217</u>
TOTAL ASSETS	<u>\$ 3,439,812</u>	<u>\$ 3,585,375</u>
 LIABILITIES AND NET ASSETS		
<i>Current Liabilities:</i>		
Accounts payable	\$ 11,492	\$ 20,216
Deferred contribution	-	30,000
Total Current Liabilities	<u>11,492</u>	<u>50,216</u>
<i>Net Assets:</i>		
Without donor restrictions	778,294	1,586,684
With donor restrictions	2,650,026	1,948,475
Total Net Assets	<u>3,428,320</u>	<u>3,535,159</u>
TOTAL LIABILITIES AND NET ASSETS	<u>\$ 3,439,812</u>	<u>\$ 3,585,375</u>

See Accompanying Notes and Independent Auditor's Report

CROSSROADS4HOPE
STATEMENTS OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2023 WITH COMPARATIVE TOTALS FOR 2022

	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>All Funds 2023</u>	<u>All Funds 2022</u>
<i>Revenues, Gains, and Support:</i>				
Contributions	\$ 71,259	\$ 1,021,846	\$ 1,093,105	\$ 1,849,135
Special events	90,702	-	90,702	138,788
Investment gain (loss)	145,163	-	145,163	(70,215)
Other income	34,346	-	34,346	-
Assets with donor restrictions released from restriction	320,295	(320,295)	-	-
Total Revenues, Gains, and Support	<u>661,765</u>	<u>701,551</u>	<u>1,363,316</u>	<u>1,917,708</u>
<i>Expenses:</i>				
Program	1,172,841	-	1,172,841	955,475
Management and general	75,299	-	75,299	52,247
Fundraising	222,015	-	222,015	105,191
Total Expenses	<u>1,470,155</u>	<u>-</u>	<u>1,470,155</u>	<u>1,112,913</u>
Increase (Decrease) in Net Assets	(808,390)	701,551	(106,839)	804,795
Net Assets at Beginning of Year	<u>1,586,684</u>	<u>1,948,475</u>	<u>3,535,159</u>	<u>2,730,364</u>
Net Assets at End of Year	\$ <u><u>778,294</u></u>	\$ <u><u>2,650,026</u></u>	\$ <u><u>3,428,320</u></u>	\$ <u><u>3,535,159</u></u>

See Accompanying Notes and Independent Auditor's Report

CROSSROADS4HOPE
STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2022

	<i>Without Donor Restrictions</i>	<i>With Donor Restrictions</i>	<i>All Funds 2022</i>
<i>Revenues, Gains, and Support:</i>			
<i>Contributions</i>	\$ 419,020	\$ 1,430,115	\$ 1,849,135
<i>Special events</i>	138,788	-	138,788
<i>Investment income</i>	(70,215)	-	(70,215)
<i>Assets with donor restrictions released from restriction</i>	369,586	(369,586)	-
<i>Total Revenues, Gains, and Support</i>	<u>857,179</u>	<u>1,060,529</u>	<u>1,917,708</u>
<i>Expenses:</i>			
<i>Program</i>	955,475	-	955,475
<i>Management and general</i>	52,247	-	52,247
<i>Fundraising</i>	105,191	-	105,191
<i>Total Expenses</i>	<u>1,112,913</u>	<u>-</u>	<u>1,112,913</u>
<i>Increase (Decrease) in Net Assets</i>	(255,734)	1,060,529	804,795
<i>Net Assets at Beginning of Year</i>	<u>1,842,418</u>	<u>887,946</u>	<u>2,730,364</u>
<i>Net Assets at End of Year</i>	<u><u>\$ 1,586,684</u></u>	<u><u>\$ 1,948,475</u></u>	<u><u>\$ 3,535,159</u></u>

See Accompanying Notes and Independent Auditor's Report

CROSSROADS4HOPE
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2023

	<u><i>Program Activities</i></u>	<u><i>Supporting Activities</i></u>		
	<u><i>Support & Education</i></u>	<u><i>Management & General</i></u>	<u><i>Fundraising</i></u>	<u><i>Total Expenses</i></u>
<i>Salaries and wages</i>	800,732	7,564	134,876	943,172
<i>Payroll taxes</i>	68,051	643	11,466	80,160
<i>Employee benefits</i>	28,936	999	742	30,677
<i>Bank and credit card fees</i>	-	168	7,664	7,832
<i>Professional fees</i>	-	38,625	-	38,625
<i>Insurance</i>	14,977	12,494	676	28,147
<i>Occupancy</i>	25,815	244	4,350	30,409
<i>General program expenses</i>	119,371	-	-	119,371
<i>Special events</i>	-	-	36,497	36,497
<i>Depreciation</i>	10,702	97	1,727	12,526
<i>Equipment rental</i>	-	4,396	-	4,396
<i>Office</i>	4,386	9,386	-	13,772
<i>Technology</i>	33,113	-	11,003	44,116
<i>Marketing</i>	4,878	-	-	4,878
<i>Fund development</i>	1,880	-	13,014	14,894
<i>Grants</i>	50,036	-	-	50,036
<i>Travel</i>	4,814	228	-	5,042
<i>Bad debt</i>	5,000	-	-	5,000
<i>Conferences and training</i>	150	455	-	605
<i>Total Functional Expenses</i>	\$ <u>1,172,841</u>	\$ <u>75,299</u>	\$ <u>222,015</u>	\$ <u>1,470,155</u>

See Accompanying Notes and Independent Auditor's Report

CROSSROADS4HOPE
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2022

	<u><i>Program Activities</i></u>	<u><i>Supporting Activities</i></u>			
	<u><i>Support & Education</i></u>	<u><i>Management & General</i></u>	<u><i>Fundraising</i></u>	<u><i>Total Expenses</i></u>	
<i>Compensation of director</i>	\$ 107,262	\$ 5,959	\$ 5,959	\$ 119,180	
<i>Salaries and wages</i>	531,567	1,979	33,036	566,582	
<i>Payroll taxes</i>	51,453	639	3,141	55,233	
<i>Employee benefits</i>	25,634	1,008	613	27,255	
<i>Bank and credit card fees</i>	552	-	3,938	4,490	
<i>Professional fees</i>	-	25,684	-	25,684	
<i>Insurance</i>	15,277	3,150	264	18,691	
<i>Occupancy</i>	34,184	425	2,087	36,696	
<i>General program expenses</i>	99,835	-	-	99,835	
<i>Special events</i>	-	-	39,377	39,377	
<i>Depreciation</i>	22,433	279	1,369	24,081	
<i>Equipment rental</i>	4,738	59	289	5,086	
<i>Office</i>	2,097	12,602	734	15,433	
<i>Technology</i>	29,099	-	4,049	33,148	
<i>Marketing</i>	12,089	-	1,378	13,467	
<i>Fund development</i>	-	-	8,957	8,957	
<i>Grants</i>	18,750	-	-	18,750	
<i>Travel</i>	142	224	-	366	
<i>Conferences and training</i>	363	239	-	602	
<i>Total Functional Expenses</i>	\$ <u>955,475</u>	\$ <u>52,247</u>	\$ <u>105,191</u>	\$ <u>1,112,913</u>	

See Accompanying Notes and Independent Auditor's Report

CROSSROADS4HOPE
STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022
INCREASE (DECREASE) IN CASH

	<u>2023</u>	<u>2022</u>
<i>Cash Flows From Operating Activities:</i>		
<i>Increase (decrease) in net assets</i>	\$ (106,839)	\$ 804,795
<i>Adjustments to reconcile changes in net assets to net cash provided by (used in) operating activities:</i>		
<i>Depreciation</i>	12,526	24,081
<i>(Gain) loss on sale of investments included in investment income</i>	(47,572)	2,018
<i>Unrealized (gain) loss on investments included in investment income</i>	(11,535)	81,322
<i>(Increase) decrease in operating assets:</i>		
<i>Prepaid expenses</i>	(3,888)	(9,972)
<i>Pledges receivable</i>	(91,167)	(224,120)
<i>Increase (decrease) in operating liabilities:</i>		
<i>Accounts payable</i>	(8,724)	16,401
<i>Deferred Contribution</i>	(30,000)	(8,750)
<i>Net Cash Provided By (Used In) Operating Activities</i>	<u>(287,199)</u>	<u>685,775</u>
<i>Cash Flows From Investing Activities:</i>		
<i>Proceeds from sale of investments</i>	200,905	86,772
<i>Purchase of investments</i>	(207,072)	(247,375)
<i>Acquisitions of fixed assets</i>	(13,225)	(35,530)
<i>Net Cash Used In Investing Activities</i>	<u>(19,392)</u>	<u>(196,133)</u>
<i>Net Increase (Decrease) in Cash and Cash Equivalents</i>	(306,591)	489,642
<i>Cash and Cash Equivalents, Beginning of Year</i>	<u>2,334,128</u>	<u>1,844,486</u>
<i>Cash and Cash Equivalents, End of Year</i>	<u><u>\$ 2,027,537</u></u>	<u><u>\$ 2,334,128</u></u>

See Accompanying Notes and Independent Auditor's Report

CROSSROADS4HOPE
NOTES TO FINANCIAL STATEMENTS

Note A – Summary of Significant Accounting Policies:

Nature of Activities

Crossroads4Hope (the Organization) is an independent not-for-profit organization that was established in 2001 and - until February 1, 2021 - was affiliated with a national organization known as Cancer Support Community. As an affiliate, the Organization paid dues on a sliding scale based upon revenues. On February 1, 2021 the Organization disaffiliated from the national organization and renamed itself Crossroads4Hope. The primary objective of Crossroads4Hope is to provide psychosocial support and education programs, completely free of charge, to cancer patients, their families, and friends. The Organization began providing these programs and services in November 2004.

Financial Statement Presentation

The Organization has presented its financial statements in accordance with generally accepted accounting principles for not-for-profit organizations. Under this guidance, the Organization is required to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions. In addition, the Organization is required to present a statement of cash flows.

The net assets of the Organization consist of the following fund groups:

Without donor restrictions

Includes unrestricted resources available for supporting the Organization's stated operating objectives. As of December 31, 2023, net assets without donor restrictions totaled \$778,294. As of December 31, 2022, net assets without donor restrictions totaled \$1,586,684.

With donor restrictions

The Capital Campaign includes donor-restricted resources for use in making necessary capital improvements to the property, which was purchased in December 2010. In 2019, the Organization began classifying certain donor-restricted resources for other restricted purposes. These restrictions include funds raised as part of the Strategic Campaign specified for programs such as Nutrition, Outreach, Patient Centered Care, Support4Families, Capital Building, Program General, and Unmet Needs. As of December 31, 2023, net assets with donor restrictions totaled \$2,650,026. As of December 31, 2022, net assets with donor restrictions totaled \$1,948,475.

Contributions

The Organization reports gifts of cash and other assets as increases in net assets without donor restrictions or net assets with donor restrictions depending on the nature of the restrictions. When a donor restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions.

Special Events

Revenues from special events are recognized upon receipt. Special events include proceeds from Inspiring Hope, Wings of Hope, and other community events.

CROSSROADS4HOPE
NOTES TO FINANCIAL STATEMENTS

Note A – Summary of Significant Accounting Policies (Continued):

Expense Allocations

Expenses that directly carry out program activities are allocated to the applicable programs on a specification identification basis and certain other indirect expenses are allocated to the programs as deemed appropriate. Some expenses incurred are attributable to more than one program or supporting function. Therefore, these expenses require allocation on a reasonable basis that is consistently applied.

Investments

Investments are stated at fair value as determined by their quoted market prices. Donated investments are valued at the fair market value of the investment at the date of donation. Investment income or loss (including realized gains and losses on investments, interest and dividends) is included in the change in net assets without donor restrictions unless the income or loss is restricted by the donor.

The Organization classifies its investments into Level 1, which refers to securities traded on an active market, Level 2, which refers to securities not traded on an active market but for which observable market inputs are readily available or Level 3 securities where there is a contractual restriction, and Level 3, which refers to securities not traded on an active market and for which no significant observable market inputs are available. At December 31, 2023 and 2022, the Organization's portfolio of investments was classified as Level 1.

Property and Equipment

Buildings and improvements, and equipment are stated at cost or, in the case of donated assets, at the fair market value of the asset at the date of donation. Donated property and equipment are reported as support without donor restrictions unless the donor has restricted the donated asset to a specific purpose. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire property and equipment are reported as support with donor restrictions. Absent donor stipulations regarding how long those donated assets must be maintained, the Organization reports expirations of donor restrictions when the donated or acquired assets are placed in service as instructed by the donor. The Organization reclassifies net assets with donor restrictions to net assets without donor restrictions at that time.

Depreciation is calculated using the straight-line method over the estimated useful lives of the assets, as follows:

Building	39 Years
Facility improvements	10 years
Furniture and fixtures	7 years
Office equipment	5 years

Upon sale or other disposition of property, the cost and accumulated depreciation with respect to such property are eliminated from the accounts and the gains or losses thereon are reflected in income.

Subsequent Events

Subsequent events were evaluated through October 14, 2024, which is the date the financial statements were available to be issued.

CROSSROADS4HOPE
NOTES TO FINANCIAL STATEMENTS

Note A – Summary of Significant Accounting Policies (Continued):

Income Tax Status

The Organization is a nonprofit corporation as described in Section 501(c)(3) of the Internal Revenue Code and is exempt from income taxes on its exempt income under Section 501(a) of the Code.

Cash and Cash Equivalents

The Organization classifies all highly liquid financial instruments with an original maturity of three months or less as cash equivalents.

Pledges Receivable

As of December 31, 2023, donor pledges for programs totaling \$384,037 had not been received. Of this total, \$279,037 is set to be collected during the tax year-ending 2024. The remaining \$105,000 is set to be collected in two payments of \$55,000 and \$50,000 during the tax years-ending 2025 and 2026, respectively.

As of December 31, 2022, donor pledges for programs totaling \$292,870 had not been received. Of this total, \$132,870 was set to be collected during the tax year-ended 2023. The remaining \$160,000 was set to be collected in two payments of \$55,000 each during the tax years-ending 2024 and 2025, respectively, and one payment of \$50,000 during the tax year ending 2026.

Deferred Contribution

During the year ended December 31, 2021, there were three pledges receivable totaling \$38,750 that were restricted. During the year ended December 31, 2022, \$8,750 was received from one of the three pledges. During the year ended December 31, 2023, the remaining \$30,000 was received and still considered restricted. Consequently, the deferred contribution amount for the tax years-ended December 31, 2023 and 2022 is zero and \$30,000, respectively.

Accounting Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to 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.

Recognition of Donor Restricted Contributions

Support that is restricted by the donor is reported as an increase in net assets without donor restrictions if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in net assets with donor restrictions depending on the nature of the restriction. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions.

Accrued Compensated Absences

Employees of the Organization are entitled to paid personal time (which must be taken during the current year), sick days, and other time off depending on job classification, length of service, and other factors – e.g., earned New Jersey sick days. The amount of compensation for future absences is immaterial and, accordingly, no liability has been recorded in the accompanying financial statements. The Organization's policy is to recognize the costs of compensated absences when paid to employees.

CROSSROADS4HOPE
NOTES TO FINANCIAL STATEMENTS

Note A – Summary of Significant Accounting Policies (Continued):

Advertising Costs

The Organization’s policy for non-direct response advertising costs is to expense them as incurred. There were no advertising costs charged to expense for the years ended December 31, 2023 and 2022.

Note B – Marketable Securities:

Marketable securities consist of debt securities, mutual funds, and exchange traded funds included in “Investments” on the Statement of Financial Position. For purposes of determining realized gains and losses, the cost of investments sold is based upon specific identification.

Realized gains and losses are included under Investment income on the Statement of Activities. During the year ended December 31, 2023, the Organization sold \$200,905 of investments resulting in a realized gain of \$47,572. During the year ended December 31, 2022, the Organization sold \$86,722 of investments resulting in a realized loss of \$2,018.

Note C – Fair Value Measurements:

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, Fair Value Measurements and Disclosures, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Organization has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;*
- Quoted prices for identical or similar assets or liabilities in inactive markets;*
- Inputs other than quoted prices that are observable for the asset or liability;*
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.*
- If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.*

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability’s fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

CROSSROADS4HOPE
NOTES TO FINANCIAL STATEMENTS

Note C – Fair Value Measurements (Continued):

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

Marketable Securities:

Valued at the daily closing price as reported by the fund. Mutual funds held by the Organization are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Organization are deemed to be actively traded.

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

The following table sets forth by level, within the fair value hierarchy, the Organization's assets at fair value as of December 31, 2023 and 2022:

Assets at Fair Value as of December 31, 2023				
	Level 1	Level 2	Level 3	Total
Investment cash	\$ 1,073	\$ --	\$ --	\$ 1,073
Money market	42,978	--	--	42,978
Mutual funds	276,678	--	--	276,678
Exchange traded funds	245,762	--	--	245,762
Total securities	566,491	--	--	566,491
Total assets at fair value	\$ 566,491	\$ --	\$ --	\$ 566,491

Assets at Fair Value as of December 31, 2022				
	Level 1	Level 2	Level 3	Total
Investment cash	\$ 7,246	\$ --	\$ --	\$ 7,246
Debt securities	19,946	--	--	19,946
Money market	45,716	--	--	45,716
Mutual funds	223,810	--	--	223,810
Exchange traded funds	204,499	--	--	204,499
Total securities	501,217	--	--	501,217
Total assets at fair value	\$ 501,217	\$ --	\$ --	\$ 501,217

CROSSROADS4HOPE
NOTES TO FINANCIAL STATEMENTS

Note D – Liquidity:

The Organization's financial assets as of the balance sheet date include cash and marketable securities as detailed below.

	<u>2023</u>	<u>2022</u>
Cash	\$ 2,027,537	\$ 2,334,128
Investments - Cash	1,073	7,246
Investments - Securities	565,418	493,971
Total Investments	<u>566,491</u>	<u>501,217</u>
 Total	 <u>\$ 2,594,028</u>	 <u>\$ 2,835,345</u>

As part of the Organization's liquidity management, it invests cash in excess of daily requirements in debt securities, mutual funds, and exchange traded funds (see Notes B and C).

Note E – Concentrations of Credit Risk Arising from Cash Deposits in Excess of Insured Limits:

The Organization maintains its cash balances at several financial institutions located in New Jersey. Accounts at each institution are insured by the Federal Deposit Insurance Corporation up to \$250,000. At December 31, 2023, the Organization's uninsured cash balances total \$1,300,722.

Note G – Employee Retention Credit:

In the year ending December 31, 2023, the Organization determined it was eligible for the employee retention credit under the C.A.R.E.S. Act. The Organization filed to claim the credit for the second, third, and fourth calendar quarters of 2020 totaling \$17,952, \$4,890, and \$20,285, respectively. They also filed to claim the credit for the first, second, and third calendar quarters of 2021 totaling \$55,134, \$54,697, and \$57,010, respectively. The total credit amount of \$209,698 will be recognized as grant revenue in the tax year it is received.

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

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print File by the due date for filing your return. See instructions.	Name of exempt organization, employer, or other filer, see instructions. CROSSROADS4HOPE	Taxpayer identification number (TIN) 22-3804609
	Number, street, and room or suite no. If a P.O. box, see instructions. 3 CROSSROADS DRIVE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BEDMINSTER, NJ 07921	

Enter the Return Code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
Plan Number _____
Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **AMY SUTTON**

3 CROSSROADS DRIVE - BEDMINSTER, NJ 07921

Telephone No. **908-658-5400**

Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15**, 20 **24**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
☒ calendar year 20 **23** or
☐ tax year beginning _____, 20 _____, and ending _____, 20 _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

Form **8868** (Rev. 1-2024)

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Department of the Treasury
Internal Revenue Service

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

2023

Open to Public
Inspection

A For the 2023 calendar year, or tax year beginning		and ending		
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization CROSSROADS4HOPE		D Employer identification number 22-3804609	
	Doing business as		E Telephone number 908-658-5400	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 3 CROSSROADS DRIVE			
	City or town, state or province, country, and ZIP or foreign postal code BEDMINSTER, NJ 07921			
	F Name and address of principal officer: AMY SUTTON 3 CROSSROADS DRIVE, BEDMINSTER, NJ 07921			G Gross receipts \$ 1,510,114.
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 J Website: N/A			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 2001	M State of legal domicile: NJ	

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: WE PROVIDE PSYCHOSOCIAL SUPPORT AT NO CHARGE TO ALL PEOPLE AFFECTED BY CANCER.		
	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	24
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	23
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	19
	6	Total number of volunteers (estimate if necessary)	6	350
	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	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 1,961,283.	Current Year 1,154,763.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	15,268.	138,627.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-12,737.	27,794.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,963,814.	1,321,184.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	18,750.
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)	768,250.	1,054,007.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b		Total fundraising expenses (Part IX, column (D), line 25)	186,417.	
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	290,697.	330,516.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,077,697.	1,434,559.
19		Revenue less expenses. Subtract line 18 from line 12	886,117.	-113,375.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 3,585,375.	End of Year 3,439,811.
	21	Total liabilities (Part X, line 26)	50,216.	11,492.
	22	Net assets or fund balances. Subtract line 21 from line 20	3,535,159.	3,428,319.

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		Date		
	AMY SUTTON, CEO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	BRIDGET HARTNETT	BRIDGET HARTNETT	11/11/24		P01429163
Preparer Use Only	Firm's name	Firm's EIN			
	CLIFTONLARSONALLEN LLP	41-0746749			
	Firm's address	Phone no.			
	293 EISENHOWER PARKWAY, 2ND FLOOR	973-994-9494			
	LIVINGSTON, NJ 07039				

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X****1** Briefly describe the organization's mission:

NO ONE IS PREPARED TO FACE CANCER. CROSSROADS4HOPE, A NETWORK OF CANCER SUPPORT IS A 501(C)(3) WORKS TO ENSURE THAT NO ONE FACES CANCER ALONE NO MATTER WHO YOU ARE OR WHERE YOU LIVE. CROSSROADS4HOPE IS WHAT COMES NEXT WHEN CANCER IMPACTS YOU AND YOUR FAMILY. WE TAKE ON THE

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 ☒ 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 ☒ 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 \$ 1,167,839. including grants of \$ 50,036.) (Revenue \$)

HEADQUARTERED IN NEW JERSEY, OUR ORGANIZATION HAS BEEN AN INDEPENDENT 501(C)(3) CORPORATION SINCE ITS INCEPTION DELIVERING MORE THAN 128,000 HOURS OF SERVICES AT NO CHARGE, TO MORE THAN 20,000 INDIVIDUALS.

AT CROSSROADS4HOPE, THREE THINGS ARE ESSENTIAL: ENSURING WE DELIVER WHAT PATIENTS AND FAMILIES NEED TODAY TO BE ABLE TO TAKE CONTROL OF THEIR HEALTH AND CARE; SECOND, KEEPING AN EYE ON THE FUTURE AND THE INNOVATION AND RESOURCES NEEDED FOR US TO REALIZE OUR PROMISE TO THE COMMUNITY TO TAKE ON THE CANCER JOURNEY WITH ALL THOSE WHO ARE AFFECTED, WHEN AND WHERE THEY NEED US MOST; AND THIRD, ENSURING THE VISION OF OUR FOUNDER'S REMAIN IN THE FOREFRONT OF OUR THINKING, THAT SOCIAL AND EMOTIONAL SUPPORT IS AN ESSENTIAL PART OF CARE AND SHOULD BE

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,167,839.Form **990** (2023)

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>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2 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>	3	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>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	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>	7	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>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	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>	10	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>	11a 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>	11b	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>	11c	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>	11d	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>	11e	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>	11f 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>	12a 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>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	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>	16	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. See instructions</i>	17	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>	18 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>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	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>	22 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>	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	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>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	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>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	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>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	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>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	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>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
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>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38 X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	1a 29	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c 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	19
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? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a 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	X
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? If "No," provide an explanation on Schedule O	14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 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

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	24													
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.														
b Enter the number of voting members included on line 1a, above, who are independent		23												
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2											X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?				3										X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?					4									X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?						5								X
6 Did the organization have members or stockholders?							6							X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?								7a						X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?									7b					X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?										8a			X	
b Each committee with authority to act on behalf of the governing body?											8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O												9		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed NJ

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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
AMY SUTTON - 908-658-5400
3 CROSSROADS DRIVE, BEDMINISTER, NJ 07921

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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 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) AMY SUTTON CEO	55.00			X				151,283.	0.	12,935.
(2) LAURA ATWELL VICE PRESIDENT, PHILANTHROPY	40.00				X			120,000.	0.	0.
(3) AL RUSSO BOARD MEMBER	1.00	X						0.	0.	0.
(4) ANTHOULA STEFANOU BOARD MEMBER	1.00	X						0.	0.	0.
(5) BRIAN CAIN BOARD MEMBER	1.00	X						0.	0.	0.
(6) CHRISTOPHER FORNAL SECRETARY	2.00	X		X				0.	0.	0.
(7) PANKAJ AMIN BOARD MEMBER	1.00	X						0.	0.	0.
(8) JOSEPHINE IGLESIAS-GRANA BOARD MEMBER	1.00	X						0.	0.	0.
(9) EVAN BERKLEY BOARD MEMBER	1.00	X						0.	0.	0.
(10) JACK MICALI BOARD MEMBER	1.00	X						0.	0.	0.
(11) JENNIFER BRUNER VICE CHAIR	2.00	X		X				0.	0.	0.
(12) MICHAEL MULLEN BOARD MEMBER	1.00	X						0.	0.	0.
(13) KEVIN KELLY BOARD MEMBER	1.00	X						0.	0.	0.
(14) KRISTINA DI PALO IMMEDIATE PAST PRESIDENT	1.00	X		X				0.	0.	0.
(15) KRISTEN PAGANO BOARD MEMBER	1.00	X						0.	0.	0.
(16) LYNN ARNOLD BOARD MEMBER	1.00	X						0.	0.	0.
(17) MERRILEE LOGUE BOARD MEMBER	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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			
(18) ERIC RAES BOARD MEMBER	1.00	X						0.	0.	0.
(19) NANCY DOWD BOARD MEMBER	1.00	X						0.	0.	0.
(20) RACHEL LIPSHULTZ BOARD MEMBER	1.00	X						0.	0.	0.
(21) RALPH WEAVER BOARD CHAIR	10.00	X		X				0.	0.	0.
(22) GOVI RAO BOARD MEMBER	1.00	X						0.	0.	0.
(23) SANDRA KENNEDY BOARD MEMBER	1.00	X						0.	0.	0.
(24) TOM SCHAIBLE BOARD MEMBER	1.00	X						0.	0.	0.
1b Subtotal								271,283.	0.	12,935.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								271,283.	0.	12,935.

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

2

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		
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	0	

Form 990 (2023)

Part VIII Statement of RevenueCheck 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	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c	61,657.					
	d Related organizations	1d						
	e Government grants (contributions)	1e						
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	1,093,106.					
	g Noncash contributions included in lines 1a-1f	1g	\$					
	h Total. Add lines 1a-1f							1,154,763.
Program Service Revenue			Business Code					
	2 a							
	b							
	c							
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			91,055.			91,055.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	6a	(i) Real (ii) Personal					
	b Less: rental expenses ...	6b						
	c Rental income or (loss)	6c						
	d Net rental income or (loss)							
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities (ii) Other					
	b Less: cost or other basis and sales expenses	7b						
	c Gain or (loss)	7c						
	d Net gain or (loss)							
	8 a Gross income from fundraising events (not including \$ 61,657. of contributions reported on line 1c). See Part IV, line 18	8a		29,045.				
	b Less: direct expenses	8b		35,597.				
	c Net income or (loss) from fundraising events			-6,552.			-6,552.	
	9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b							
c Net income or (loss) from gaming activities								
10 a Gross sales of inventory, less returns and allowances	10a							
b Less: cost of goods sold	10b							
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	11 a <u>INSURANCE REIMBURSEMENT</u>		Business Code	900099	34,346.		34,346.	
	b							
	c							
	d All other revenue							
	e Total. Add lines 11a-11d				34,346.			
	12 Total revenue. See instructions				1,321,184.	0.	0.	166,421.

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 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	50,036.	50,036.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	164,218.	148,306.	7,793.	8,119.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	791,889.	664,577.		127,312.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,376.	3,376.		
9 Other employee benefits	14,365.	13,408.	770.	187.
10 Payroll taxes	80,159.	68,050.	643.	11,466.
11 Fees for services (nonemployees):				
a Management				
b Legal	706.		706.	
c Accounting	34,600.		34,600.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	5,000.		5,000.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	3,320.		3,320.	
12 Advertising and promotion	4,878.	4,878.		
13 Office expenses	13,775.	4,386.	9,389.	
14 Information technology	44,116.	33,113.		11,003.
15 Royalties				
16 Occupancy	30,409.	25,815.	244.	4,350.
17 Travel	5,042.	4,814.	228.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	605.	150.	455.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	12,525.	10,702.	97.	1,726.
23 Insurance	28,147.	14,977.	12,494.	676.
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 GENERAL PROGRAM	119,371.	119,371.		
b FUND DEVELOPMENT	14,894.	1,880.		13,014.
c BANK AND CREDIT CARD FE	7,832.		168.	7,664.
d EQUIPMENT RENTAL	4,396.		4,396.	
e All other expenses	900.			900.
25 Total functional expenses. Add lines 1 through 24e	1,434,559.	1,167,839.	80,303.	186,417.
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 SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	-3.
	2 Savings and temporary cash investments	2,334,128.	2	2,027,537.
	3 Pledges and grants receivable, net	292,870.	3	384,037.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	10,176.	9	14,065.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 871,912.		
	b Less: accumulated depreciation	10b 424,228.		
	11 Investments - publicly traded securities	446,984.	10c	447,684.
	12 Investments - other securities. See Part IV, line 11	501,217.	11	566,491.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11		14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	3,585,375.	15		
Liabilities	17 Accounts payable and accrued expenses	3,585,375.	16	3,439,811.
	18 Grants payable	20,216.	17	11,492.
	19 Deferred revenue		18	
	20 Tax-exempt bond liabilities		19	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		21	
	23 Secured mortgages and notes payable to unrelated third parties		22	
	24 Unsecured notes and loans payable to unrelated third parties		23	
	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	30,000.	24	
	26 Total liabilities. Add lines 17 through 25	50,216.	25	0.
	27 Net assets or fund balances	50,216.	26	11,492.
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	1,586,684.	27	778,294.	
28 Net assets with donor restrictions	1,948,475.	28	2,650,025.	
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		29		
30 Paid-in or capital surplus, or land, building, or equipment fund		30		
31 Retained earnings, endowment, accumulated income, or other funds		31		
32 Total net assets or fund balances	3,535,159.	32	3,428,319.	
33 Total liabilities and net assets/fund balances	3,585,375.	33	3,439,811.	

Form 990 (2023)

Part XI Reconciliation of Net AssetsCheck 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	1,321,184.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,434,559.
3	Revenue less expenses. Subtract line 2 from line 1	3	-113,375.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,535,159.
5	Net unrealized gains (losses) on investments	5	11,535.
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	-5,000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3,428,319.

Part XII Financial Statements and ReportingCheck 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		<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>	
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.	<input checked="" type="checkbox"/>	
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? _____		<input checked="" type="checkbox"/>
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 _____		

Form 990 (2023)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

CROSSROADS4HOPE

Employer identification number

22-3804609

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		
Total						

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1035283.	1313533.	2068904.	1961283.	1154763.	7533766.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1035283.	1313533.	2068904.	1961283.	1154763.	7533766.
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)						810,295.
6 Public support. Subtract line 5 from line 4.						6723471.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	1035283.	1313533.	2068904.	1961283.	1154763.	7533766.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		7,603.	14,995.	15,268.	91,055.	128,921.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					34,346.	34,346.
11 Total support. Add lines 7 through 10						7697033.
12 Gross receipts from related activities, etc. (see instructions)					12	
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 2023 (line 6, column (f), divided by line 11, column (f))	14	87.35	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	89.79	%
16a 33 1/3% support test - 2023. 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 - 2022. 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 - 2023. 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 - 2022. 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"/>

Schedule A (Form 990) 2023

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. 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 - 2022. 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>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c 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>		
b 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>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <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>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <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>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <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>		
b 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? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
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? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

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	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<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).		

Schedule A (Form 990) 2023

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 - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018			
b	From 2019			
c	From 2020			
d	From 2021			
e	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2019			
b	Excess from 2020			
c	Excess from 2021			
d	Excess from 2022			
e	Excess from 2023			

Schedule A (Form 990) 2023

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

Schedule B
(Form 990)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

CROSSROADS4HOPE

Employer identification number

22-3804609

Organization type (check one):

Filers of:**Section:**

Form 990 or 990-EZ

☒ 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 foundationCheck 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**☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

CROSSROADS4HOPE

22-3804609

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
<u>1</u>		\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>		\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

CROSSROADS4HOPE**22-3804609****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
<u>7</u>		\$ <u>35,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>8</u>		\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>9</u>		\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>10</u>		\$ <u>65,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

22-3804609

Part II

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

Name of organization

Employer identification number

CROSSROADS4HOPE**22-3804609****Part III**

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

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

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

CROSSROADS4HOPE

Employer identification number

22-3804609

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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2023

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

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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 in 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					
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					

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:

(i) Unrelated organizations? ☐ Yes ☐ No

(ii) Related organizations? ☐ Yes ☐ No

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

	Yes	No
3a(i)		
3a(ii)		
3b		

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		125,629.		125,629.
b Buildings		451,835.	134,007.	317,828.
c Leasehold improvements		259,786.	255,559.	4,227.
d Equipment		34,662.	34,662.	0.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				447,684.

Schedule D (Form 990) 2023

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

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

Part X Other Liabilities

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

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

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

Schedule D (Form 990) 2023

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	1,363,316.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	11,535.
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	11,535.
3	Subtract line 2e from line 1	3	1,351,781.
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	5,000.
b	Other (Describe in Part XIII.)	4b	-35,597.
c	Add lines 4a and 4b	4c	-30,597.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	1,321,184.

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	1,470,156.
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	40,597.
e	Add lines 2a through 2d	2e	40,597.
3	Subtract line 2e from line 1	3	1,429,559.
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	5,000.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	5,000.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	1,434,559.

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 X, LINE 2:

THE ORGANIZATION IS A NONPROFIT CORPORATION AS DESCRIBED IN SECTION 501

(C)(3) OF THE INTERNAL REVENUE CODE AND IS EXEMPT FROM INCOME TAXES ON ITS

EXEMPT INCOME UNDER SECTION 501 (A) OF THE CODE.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT DIRECT EXPENSE -35,597.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT DIRECT EXPENSE 35,597.

BAD DEBT EXPENSE 5,000.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 40,597.

Part XIII	Supplemental Information <i>(continued)</i>
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[illegible]

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization

CROSSROADS4HOPE

Employer identification number

22-3804609

Part I

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** ☐ Mail solicitations
- b** ☐ Internet and email solicitations
- c** ☐ Phone solicitations
- d** ☐ In-person solicitations
- e** ☐ Solicitation of non-government grants
- f** ☐ Solicitation of government grants
- g** ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		INSPIRING HOPE (event type)	WINGS OF HOPE (event type)	NONE (total number)	
Revenue	1 Gross receipts	74,816.	15,886.		90,702.
	2 Less: Contributions	45,771.	15,886.		61,657.
	3 Gross income (line 1 minus line 2)	29,045.			29,045.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	22,544.			22,544.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	7,501.	5,551.		13,052.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				35,596.
11 Net income summary. Subtract line 10 from line 3, column (d)				-6,551.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____

c If "Yes," enter name and address of the third party:

Name _____

Address _____

- 16** Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

☐ Director/officer ☐ Employee ☐ Independent contractor

- 17** Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Part IV	Supplemental Information <i>(continued)</i>
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[illegible]

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

CROSSROADS4HOPE

Employer identification number
22-3804609

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2023

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
FINANCIAL SUPPORT FOR NON-MEDICAL EXPENSES	56	50,036.	0.	CHECKS	CHECK

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE JASON P. SCHAIBLE MEMORIAL FUND JOINED FORCES WITH CROSSROADS4HOPE IN 2019 TO ENSURE THAT FAMILIES OF PEDIATRIC CANCER PATIENTS HAVE ACCESS TO EMOTIONAL, SOCIAL, AND FINANCIAL SUPPORT. AS A RESULT, THEY HAVE PROVIDED A DONATION TO CROSSROADS4HOPE'S UNMET NEEDS FUND TO ENABLE THE ORGANIZATION TO PROVIDE FINANCIAL ASSISTANCE TO FAMILIES IN NEED OF FINANCIAL SUPPORT TO ASSIST WITH NON-MEDICAL-RELATED EXPENSES AS PART OF OUR OVERALL SUPPORT TO ADDRESS THE EMOTIONAL AND SOCIAL BURDEN OF CANCER ON THESE FAMILIES.

Part IV Supplemental Information

IN 2022, AN ANONYMOUS DONOR MADE A FIVE-YEAR COMMITMENT TO THE UNMET NEEDS FUND TO ENABLE THE ORGANIZATION TO PROVIDE FINANCIAL ASSISTANCE TO SINGLE WOMEN DIAGNOSED WITH CANCER TO ASSIST WITH NON-MEDICAL-RELATED EXPENSES AS PART OF OUR OVERALL SUPPORT TO ADDRESS THE EMOTIONAL AND SOCIAL BURDEN OF CANCER ON THESE WOMEN.

ALL TRANSACTIONS ARE MONITORED AND APPROVED BY THE BOARD.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

CROSSROADS4HOPE

Employer identification number

22-3804609

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 checked="" 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

1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2023

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.

[illegible]

Part III	Supplemental Information
-----------------	---------------------------------

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

CROSSROADS4HOPE

Employer identification number

22-3804609

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CANCER JOURNEY WITH INDIVIDUALS OF ANY AGE, INCLUDING PEOPLE DIAGNOSED,
CAREGIVERS AND LOVED ONES. WE AIM TO IMPROVE PEOPLE'S QUALITY OF LIFE
THROUGH ACCESS TO A ROBUST NETWORK OF SUPPORT, INFORMATION, RESOURCES,
AND PROFESSIONALS WHO UNDERSTAND AND CAN FILL THE CRITICAL GAPS IN CARE
THAT SO OFTEN OCCUR BETWEEN MEDICAL APPOINTMENTS AND WITHIN THE
HEALTHCARE SYSTEM ITSELF.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

AVAILABLE TO ALL PEOPLE FACING CANCER PATIENTS, CAREGIVERS, FAMILY, AND
LOVED ONES, SURVIVORS, AND THE BEREAVED REGARDLESS OF WHERE THEY
RECEIVE THEIR CARE, OR WHERE THEY CALL HOME, AND ALWAYS AT NO CHARGE TO
INDIVIDUALS.

AS EXPERTS IN PSYCHOSOCIAL SUPPORT AND PATIENT ACTIVATION, WE MOVE
PEOPLE THROUGH A HEALTH CRISIS CAUSED BY CANCER TO BECOME ACTIVE WITH
THE BEHAVIORS THAT HELP THEM TAKE CONTROL OF THEIR HEALTH AND CARE. LED
BY THE PROFESSION OF SOCIAL WORK, OUR TEAM INCLUDES OTHER MENTAL HEALTH
AND ALLIED HEALTH PROFESSIONALS, INCLUDING CHILD LIFE SPECIALISTS,
REGISTERED DIETITIANS, PUBLIC HEALTH PROFESSIONALS, AND HEALTH AND
WELLNESS INSTRUCTORS. OUR "MEMBERS" INCLUDE PREVIVORS, CANCER PATIENTS,
SURVIVORS, CAREGIVERS, FAMILY MEMBERS, FRIENDS, AND LOVED ONES,
REGARDLESS OF AGE, TYPE OF CANCER, STAGE OR PLACE OF TREATMENT, RACE,
ETHNICITY, COUNTRY OF ORIGIN/CITIZENSHIP, LANGUAGE, SEXUAL ORIENTATION,
INSURANCE, OR VETERAN STATUS. PROGRAMS ARE DELIVERED IN PERSON AT OUR
BEDMINSTER LOCATION, AT PARTNER ORGANIZATIONS, AND VIRTUALLY. PROGRAMS

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization	Employer identification number
CROSSROADS4HOPE	22-3804609

FALL UNDER THE FOLLOWING CATEGORIES:

INDIVIDUAL AND GROUP SUPPORT

NAVIGATION AND REFERRALS, INCLUDING TO ADDRESS BASIC NEEDS SUCH AS
FOOD AND HOUSING INSECURITY, FINANCIAL CONDITIONS, TRANSPORTATION, AND
CHILDCARE.

DECISION SUPPORT

EDUCATIONAL AND NUTRITION WORKSHOPS

MIND BODY CLASSES

ACTIVITIES THAT BUILD SOCIAL CONNECTIONS

FINANCIAL ASSISTANCE FOR FAMILIES FACING PEDIATRIC CANCER OR SINGLE
WOMEN WITH CANCER.

FAMILIES COPING WITH PEDIATRIC CANCER

SINGLE WOMEN AFFECTED BY CANCER

MYGO2SUPPORT, A DIGITAL PROGRAM THAT PROVIDES 24/7 DIRECT-TO-MOBILE,
PERSONALIZED RESOURCES AND SUPPORT ACROSS THE ENTIRE CANCER JOURNEY FOR
PATIENTS AND THEIR LOVED ONES WITHOUT EVER HAVING TO DOWNLOAD AN APP.

THE CHALLENGES HEALTHCARE CONTINUES TO EXPERIENCE, INCLUDING STAFFING
SHORTAGES AND DOWNWARD PRESSURES ON REIMBURSEMENTS, HAVE REDUCED
AVAILABLE RESOURCES FOR PEOPLE AFFECTED BY CANCER. CROSSROADS4HOPE
CONTINUES TO EXPERIENCE INCREASED DEMAND FOR OUR SERVICES AND WILL
INCLUDE VIRTUAL PROGRAMMING AS A STANDARD DELIVERY METHOD.

WE HAVE BEEN CONSCIOUS OF OUR APPROACH TO TRANSFORMING OUR ORGANIZATION
AND THE CANCER EXPERIENCE, UNDERSTANDING THAT TECHNOLOGY WOULD BE
REQUIRED TO ENABLE US TO SCALE OUR REACH, ESPECIALLY WITHIN COMMUNITIES
THAT LACK ACCESS TO CARE, SUPPORT, AND RESOURCES. TODAY, PEOPLE ARE
CONNECTING TO US FROM ACROSS NEW JERSEY, 44 STATES, AND FOUR COUNTRIES.

Name of the organization

CROSSROADS4HOPE

Employer identification number

22-3804609

OUR PUBLIC HEALTH TEAMS ARE EMBEDDING THEMSELVES INTO LOW-INCOME AND MARGINALIZED COMMUNITIES TO ADDRESS THE BURDEN OF CANCER ON THE COMMUNITY'S TERMS. SINCE 2013, WE HAVE BEEN ACTIVELY LISTENING AND LEARNING FROM OUR MEMBERS ACROSS DIVERSE BACKGROUNDS TO ROUND OUT OUR RESEARCH ON THE CANCER EXPERIENCE IN VULNERABLE COMMUNITIES. AS A RESULT, WE DEVELOPED A UNIQUE APPROACH TO OUTREACH ROOTED IN SOCIAL WORK, IMPLEMENTED BY PUBLIC HEALTH, AND SUPPORTED BY CHILD LIFE TO ENSURE THAT VULNERABLE INDIVIDUALS, FAMILIES, AND COMMUNITIES HAVE ACCESS TO RELEVANT SUPPORT, TOOLS, AND RESOURCES TO TRANSFORM THE CANCER EXPERIENCE. WE ARE SCALING OUR HEALTH CHAMPION PROGRAM AND TRAINING LAY COMMUNITY MEMBERS WHO ARE OFTEN THE FIRST TO BECOME AWARE OF SOMEONE COPING WITH CANCER IN THEIR COMMUNITY. THEY LEARN WHAT THEY CAN DO AND SAY AND HOW TO REFER PEOPLE TO CROSSROADS4HOPE. WE ARE ALSO TRANSFERRING KNOWLEDGE ON HOW TO TALK WITH A DOCTOR ABOUT TREATMENT OPTIONS, INCLUDING CLINICAL TRIALS. INDIVIDUALS FROM CHURCHES, LIBRARIES, SOCIAL SERVICE AGENCIES, AND OTHER NON-PROFIT ORGANIZATIONS AND THE BROADER COMMUNITY, AS WELL AS WITHIN COMPANIES, ARE SIGNING UP TO BECOME CHAMPIONS. BY PARTNERING WITH CROSSROADS4HOPE, THEY ARE MAKING IT POSSIBLE FOR US TO EXTEND THE REACH OF OUR RESOURCES IN RELEVANT WAYS THAT ADDRESS THE LAYERS OF COMPLICITY THAT CREATE BARRIERS TO ACCESSING TIMELY CARE, SUPPORT, AND RESOURCES.

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

FORM 990 IS GIVEN TO ALL BOARD MEMBERS FOR REVIEW PRIOR TO FILING.

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

CONFLICT OF INTEREST POLICY IS COMPLETED AND SIGNED BY ALL TRUSTEES AT THE ANNUAL MEETING.

Name of the organization

CROSSROADS4HOPE

Employer identification number

22-3804609

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

PERFORMANCE AND COMPENSATION REVIEW ARE CONDUCTED BY THE CHAIR OF THE BOARD
FOR THE CEO. THE CEO CONDUCTS ALL OTHER STAFF REVIEWS.

FORM 990, PART VI, SECTION C, LINE 18:

THE ORGANIZATION MAKES ALL DOCUMENTS AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ALL POLICES AVAILABLE FOR INSPECTION BY THE PUBLIC
VIA PDF FILES AND THROUGH COPIES SUBMITTED TO THE NEW JERSEY DEPARTMENT OF
CONSUMER AFFAIRS.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

BAD DEBT EXPENSE -5,000.

PART XII, LINE 2C

NO CHANGE FROM THE PRIOR YEAR.

2025 Operating Budget

Expenses	
Bank Fees	\$ 11,000.00
Technology	\$ 70,584.16
Fund Development	\$ 67,500.00
Events	\$ 43,000.00
Insurance	\$ 36,249.62
Marketing Expenses	\$ 31,000.00
Office Expenses	\$ 30,571.34
Payroll Salaries	\$ 1,945,023.00
benefits /401k	\$ 68,262.50
Professional Development	\$ 11,585.00
Professional Fees	\$ 50,174.88
Program Expenses	\$ 252,453.00
travel and mileage	\$ 14,700.00
Miscellaneous (volunteer appreciation)	\$ 1,000.00
Taxes	\$ 400.00
Occupancy	\$ 42,143.15
	\$ 2,675,646.65



Crossroads4Hope®
A NETWORK OF CANCER SUPPORT
Taking On Your Cancer Journey. Together.®

2023 IMPACT REPORT

AT CROSSROADS4HOPE,

A NETWORK OF CANCER SUPPORT

We help take the worry out of cancer. Our services are offered free of charge to anyone, anywhere on their cancer journey – previvors, diagnosed, survivors, caregivers, children and young adults, palliative care, and the bereaved.

We provide individualized and group support (both in Spanish and English) for as long as needed.

We provide decision support tools to help people make decisions about their treatment and give them skills that will last a lifetime.

We offer educational workshops and nutrition counseling. Our work is rooted at the intersection of social work and public health and is lead by a team of licensed oncology social work professionals, oncology registered dietitians, public health professionals and certified child life specialists.

IN 2023...

to meet the growing need for support and help with resource navigation CR4H took on **over 5,800 individual cancer journey's, which is a 49% increase** from last year. More specifically we delivered and saw...

1,735

INDIVIDUAL SUPPORT SESSIONS HELD

53%

INCREASE IN INDIVIDUAL SUPPORT SESSIONS

71%

INCREASE IN REFERRALS FROM HOSPITALS, CANCER CENTERS, OR ONCOLOGY PRACTICES

6,985

HOURS SPENT DELIVERING CR4H PROGRAMS & SERVICES, A 21% INCREASE YOY

\$30K+

DISTRIBUTED VIA OUR UNMET NEEDS FUNDS TO INDIVIDUALS/FAMILIES

742

WELLBEING CHECKS ISSUED

TAKING ON YOUR CANCER JOURNEY. TOGETHER.



WHO WE SERVE

While we serve everyone, no matter the type of cancer, breast cancer represents 53% of cases we see followed by lung cancer, ovarian cancer, prostate, lymphoma and colorectal cancer.

64% of our members are adults and children living with or a survivor of a cancer diagnosis, while the remaining **36%** are caregivers to an adult or child family member. Our Support4Families program continues to grow, with more than **20%** of our members receiving individualized care to best suit their needs.

WHAT OUR MEMBERS SAY ABOUT CROSSROADS4HOPE

92% feel supported

90% reported decreased isolation

90% reported learning new ways to manage stress

94% gained the knowledge and skills they were seeking

82% reported decreased feelings of anxiety and depression

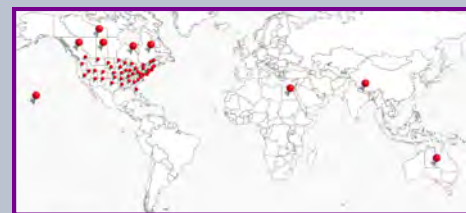
90% saw improvement in their physical abilities

80% reported an increase in social and emotional wellbeing

87% reported a reduction in treatment side effects

REACHING PEOPLE IN MARGINALIZED COMMUNITIES ACROSS NEW JERSEY

including a **450% increased reach** in our work in vulnerable communities with our community partners throughout the Garden State. In 2023, we collaborated on more than **49 events in the community** across Union, Passaic, Hudson, Mercer, Monmouth, Ocean, Middlesex, Bergen and Essex Counties.



We serve people in New Jersey and **45 other states** as well as **4 countries**.



Crossroads4Hope®
A NETWORK OF CANCER SUPPORT
Taking On Your Cancer Journey. Together.™

2023 IMPACT REPORT

WE ARE COMMITTED TO BE THE SAFE SPACE

Where a person turns first when affected by cancer to restore one's whole being and family. We take on the cancer journey with all those who are impacted, no matter who they are, where they live or wherever their journey leads. All of this is made possible by the generosity of our donors, so that anyone facing cancer never receive a bill for our programs, service, and interventions that are fundamental when living in the face of cancer.



THANK YOU FOR HELPING US LIVE UP TO OUR PROMISE TO THE COMMUNITY.



MYGO2SUPPORT

MyGo2Support is a digital direct to mobile program that proactively closes the cancer care gap. Embedded within this program are weekly subtle screenings for distress, depression and social needs.

The top escalations for our members that require our social work team to intervene are as follows:

- 21%** reported often lacking companionship.
- 14%** are worried that they may not have stable housing in the next 2 months.
- 11%** couldn't see a doctor and/or ate less than they felt they should in the last 12 months due to cost of care.
- 9%** faced challenges with transportation to medical appointments, work, and school; the same percentage needed help reading hospital materials.
- 6%** had difficulties with childcare, impacting their work and school commitments.

OUR INDIVIDUAL DONORS* (2022-2023)

\$50,000-\$99,999 Rachel Lipschutz | The Estate of Pamela Pearson

\$10,000-\$24,999 Gail Fellus and Marc Geller, PsyD. | Amy and Jonathan Hirschfeld | Tori and Michael Lefkowitz | Susan and Albert Russo

\$5,000-\$9,999 Gerry Flynn | Carrie and Christopher Fornal | Jeanne and Joseph Hughes | Josephine Iglesias-Grana | Sandra Kennedy and Marshall Morris | Lydia Nadeau, RN, MBA and Michael Mullen, Esq. | Laura and Thomas Schaible | Amy and David Sutton | Dr. Kathleen Tooney | Lisa and Michael Zukauskas

\$2,500-\$4,999 Pankaj Amin | Laura and Jim Atwell | Andrea and Evan Berkley | Mark Bode | William Freyberger | Julieanne and Patrick Higgins | Shreya Jani | Susan and Ronald Kennedy | Debbie Lynch | Arthur Roswell | Joan and William Sundheim | Phyllis von Stade

\$1,000-\$2,499 Lynn Arnold | Elizabeth Bacot | Michael Bey | Brian Cain | Brian Carroll | Nancy Dowd | Stephanie and Patrick Durbin | Joseph Fiore | William Griggs | Emily and Stephen Hirsch | Jana Jensen | Christopher King | Bob Klemm | Vickie Kontos | Jonathan Lesser | Liz Luckhurst | Cecilia and Jack Micali | Frank Midolo | Daphne Mon | Alison Mount | John Murphy | Laura Robinette | Helen and Michael Schuler | Linda Sisson and Jeff Rude | Anthoula Stefanou and James Yanek | Ellen and Michael Szot | Diane and Peter Wentworth | Kristin Williamson

\$500-\$999 Catherine Ahart | Brian Armstrong | Laura Bellome | Scott Briggs | Lynn Brotman | Erica and Phil DeMarco | Sandra and Arthur D'Italia | Melissa and Kevin Fitzgibbon | Martin Foley | Jane and Lawrence Gould | Katherine and David Hartman | John Hayes | Dr. Kenneth Hillman | Regina Johnson | Milli and Gene Kowalski | Samantha Lasky | Mary Panzano and John Bujalski | Nicole Martucci | Martin Melilli | Diane and Stu Naar | Mike Nelson | Sue and Dave Nunez | Kristen Pagano | Joe Palumbo | Juliana and William Patskin | Christine and James Petrat | Carrie Quinn | Geeta and Govi Rao | Amanda and Gary Sardo | Brian Sarisky | Teresa and Anton Scott | Harvinder Singh | Nonny and Paul Stahlin | Tzemin Sung | Jody and Alex Szopo | Krishan Thakkan | Brian and Victoria Torchen | Faye Yin, MD FACP | Karen Young

OUR CORPORATE & FOUNDATION SUPPORTERS* (2022-2023)

\$200,000+ Bristol Myers Squibb | Margaret A. Darrin Charitable Trust

\$100,000-\$199,999 The Bayer Fund | Gilead

\$50,000-\$99,999 BeiGene | Carecycle | Celia Lipton Farris and Victor W. Farris Foundation | Jason P. Schaible Memorial Fund | Somerset Health Care Foundation

\$20,000-\$49,999 The Achelis & Bodman Foundation | The Astle-Alpaugh Family Foundation | Elizabethtown Healthcare Foundation | Genmab | Giving Hope Network | Pricewaterhouse Coopers, LLP | PVH Corp. | The Tyler Foundation

\$10,000-\$19,999 BD | Black Rock Foundation | Connie Dwyer Breast Cancer Foundation | Janssen | The Hyde and Watson Foundation | The Marilyn Lichtman Foundation | The New Jersey State Bar Foundation | Alferio and Lucia Palestroni Foundation

\$5,000-\$9,999 Big Lots Foundation | Clinton Sunrise Rotary Club | Daiichi Sankyo | East West Connection | Elysian Communications, LLC | Eli Lilly and Company | Hunterdon Healthcare Foundation | Jones Lange LaSalle America, Inc. | The Plainfield Foundation | Peapack-Gladstone Bank | RWJBarnabas Health | Sanofi | Schaible's Plumbing & Heating, Inc., | Schaible Russo

***For every dollar raised, .86 goes back into providing our vital programs and services.**