

Return of Organization Exempt From Income Tax

Form 990

Department of the Treasury
Internal Revenue ServiceUnder 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.

OMB No. 1545-0047

2024

Open to Public
Inspection

A For the 2024 calendar year, or tax year beginning _____ and ending _____

B Check if applicable:	C Name of organization WINTRISS TECHNICAL SCHOOLS INC Doing business as THE LEAGUE OF AMAZING PROGRAMMER		D Employer identification number 20-4744610
<input type="checkbox"/> Address change	Number and street (or P.O. box if mail is not delivered to street address) 12625 HIGH BLUFF DRIVE	Room/suite #113	E Telephone number 858-284-0481
<input type="checkbox"/> Name change	City or town, state or province, country, and ZIP or foreign postal code SAN DIEGO, CA 92130-2053		G Gross receipts \$ 643,766.
<input type="checkbox"/> Initial return	F Name and address of principal officer: ERIC BUSBOOM SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Final return/terminated			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Amended return			If "No," attach a list. See instructions
<input type="checkbox"/> Application pending			H(c) Group exemption number
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: JOINTHELEAGUE.ORG	
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: 2006 M State of legal domicile: CA	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TEACH KIDS COMPUTER PROGRAMMING TO PREPARE THEM FOR SCIENCE AND TECHNOLOGY CAREERS OF THE 21ST	
	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 6
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 6
	5 Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5 15
	6 Total number of volunteers (estimate if necessary)	6 0
	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)	119,180. 249,877.
	9 Program service revenue (Part VIII, line 2g)	397,320. 393,757.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	232. -2,036.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0. 0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	516,732. 641,598.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0. 0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	329,847. 283,160.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
	b Total fundraising expenses (Part IX, column (D), line 25)	50.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	233,215. 203,884.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	563,062. 487,044.
19 Revenue less expenses. Subtract line 18 from line 12	-46,330. 154,554.	
Net Assets or Fund Balances	Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	200,297. 213,120.
	21 Total liabilities (Part X, line 26)	173,822. 32,091.
	22 Net assets or fund balances. Subtract line 21 from line 20	26,475. 181,029.

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 ERIC BUSBOOM, PRESIDENT		Date
	Type or print name and title		
Paid	Preparer's name ZETH M. MACY	Preparer's signature ZETH M. MACY	Date Check <input type="checkbox"/> if self-employed
			PTIN P00922103
Preparer Use Only	Firm's name SCHETTLER MACY & ASSOCIATES		Firm's EIN 47-2177559
	Firm's address 110 COUNTRY ESTATES CIRCLE, SUITE 2 RENO, NV 89511		Phone no. (775) 624-9108

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

LHA For Paperwork Reduction Act Notice, see the separate instructions.

432001 12-10-24

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SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION