

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

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

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

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.

Type or	Name of exempt organization or other filer, see instructions.			Taxpaye	ridentificatio	n number (TIN)
print	NT STUDENTS RUN AMERICA				95-44	30502
File by the due date for filing your	le by the Je date for Ing your 5252 CREBS AVENULE					
return. See instructions.	City, town or post office, state, and ZIP code. For a for TARZANA, CA 91356	oreign add	ress, see instructions.			
Enter the	Return Code for the return that this application is for (file	e a separa	te application for each return)			
Applicat	ion	Return	Application			Return
ls For		Code	Is For			Code
Form 990) or Form 990-EZ	01	Form 1041-A			08
Form 472	20 (individual)	03	Form 4720 (other than individual)			09
Form 990)-PF	04	Form 5227			10
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	0-T (trust other than above)	06	Form 8870			12
Form 990)-T (corporation) GABRIELA ARVIZU	07				
 If this box 1 I re the 	organization does not have an office or place of business is for a Group Return, enter the organization's four digit (Group Exe and atta MAX anization's , an	mption Number (GEN) I ch a list with the names and TINs of <u>X 15, 2024</u> , to file return for: d ending <u>JUN 30, 2023</u>	f this is fo all memb	r the whole g ers the exten npt organizat 	roup, check this
	his application is for Forms 990-PF, 990-T, 4720, or 6069	, enter the	tentative tax, less	0-	<u>م</u>	0.
	y nonrefundable credits. See instructions.	enter an	refundable credits and	<u>3a</u>	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, estimated tax payments made. Include any prior year overpa				3b	\$	0.
	lance due. Subtract line 3b from line 3a. Include your pa				Ψ	
	ng EFTPS (Electronic Federal Tax Payment System). See	•		3c	\$	0.
	If you are going to make an electronic funds withdrawal				1 1	
LHA F	or Privacy Act and Paperwork Reduction Act Notice.	see instru	ictions.		Form 8	868 (Rev. 1-2022)

				IC DISCLOSURE (OMB No. 1545-0047
	00	n	Return of Orgar	ization Exempt		ncome rax		
Forr	Form 990 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)					2022		
		the Treasury		curity numbers on this form Form990 for instructions an	-	•		Open to Public
		ue Service 2022 calend		/		UN 30, 202	2	Inspection
_	heck if		f organization			D Employer iden		on numbor
	oplicable		rorganization				uncau	on number
	Address change	STUD	ENTS RUN AMERICA					
	Name Doing business as 95-4430502							
	Initial		and street (or P.O. box if mail is not de	elivered to street address)	Room/suite	E Telephone num	ber	
	Final return/		CREBS AVENUE			818-654	-33	60
	termin- ated	City or t	own, state or province, country, and	ZIP or foreign postal code		G Gross receipts \$		3,034,120.
	Amende return	IARA	ANA, CA 91356			H(a) Is this a group	o returr	
	Applica tion pending		nd address of principal officer: GAE	BRIELA ARVIZU		for subordina		
		SAME	AS C ABOVE			H(b) Are all subordinate		
			X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	1 '		See instructions
	Vebsite		S://WWW.SRLA.ORG/	appointion Other		H(c) Group exemp	-	
		Summarv	X Corporation Trust A	ssociation Other	L Year	of formation: 1993	M St	ate of legal domicile: CA
			e the organization's mission or most	t significant activities: CHA	LLENGE	INDERSERVE	ופ ת	TCONDARY
e			S TO STAY IN SCHOOL					
Governance		Check this bo		ontinued its operations or disp				
ver			ting members of the governing body				3	23
			lependent voting members of the go				4	21
s S			of individuals employed in calendary				5	11
itie			of volunteers (estimate if necessary)				6	1600
Activities &			d business revenue from Part VIII, co				7a	0.
◄			business taxable income from Form				7b	0.
						Prior Year		Current Year
e	8 (Contributions	and grants (Part VIII, line 1h)			2,374,867		2,806,873.
nue	9 F	Program servi	ce revenue (Part VIII, line 2g)			89,520		94,431.
Revenue			come (Part VIII, column (A), lines 3, 4			17,898		52,196.
	11 (Other revenue	e (Part VIII, column (A), lines 5, 6d, 8d	c, 9c, 10c, and 11e)			•	41,120.
			- add lines 8 through 11 (must equal)	2,482,285		2,994,620.
			milar amounts paid (Part IX, column			60,400		76,100.
			to or for members (Part IX, column (A				•	0.
ses			r compensation, employee benefits (<u>457,715</u> 0		476,093.
Expenses			undraising fees (Part IX, column (A),	<u> </u>	467.	0	•	0.
БХр			ing expenses (Part IX, column (D), lin			1,670,361		2,360,991.
_			es (Part IX, column (A), lines 11a-11d s. Add lines 13-17 (must equal Part I			2,188,476		2,913,184.
			expenses. Subtract line 18 from line			293,809		81,436.
s or ces		levenue less	expenses. Subtract line 10 from line	12		ginning of Current Yea		End of Year
ets c anci	20 1	Total assets (F	Part X, line 16)			2,061,666		2,192,648.
Assets d Balanc	21 7	,	(Part X, line 26)			60,903		112,102.
Net			fund balances. Subtract line 21 from	1 line 20		2,000,763		2,080,546.
Pa		Signature				• •	1	
Unde	er penal	ties of perjury,	I declare that I have examined this return	, including accompanying sched	ules and stateme	ents, and to the best of	my kno	wledge and belief, it is
true,	correct	, and complete	Declaration of preparer (other than offic	<u>er) is based on all information of</u>	which preparer	has any knowledge.		
			\square	ably			05/0	2/2024
Sigr	•	Signature of of		4000002-9441-94		Date		
Her			<u>A ARVIZU, PRESIDEN</u>	T/CEO				
		Type or print n	ame and title	T		,		
		Print/Type pre		Preparer's signature		Date Check		PTIN
Paid	- F		BLO LOPEZ, CPA	JUAN PABLO LOP	EZ, CPO	5/01/24 self-em		P01367411
Prep		Firm's name		GROUP		Firm's EIN	81-	2737245
	Only	Eirm's address	3500 WEST OLIVE A	VENUE SUTTE 68	30			

	BURBANK, CA 91505	Phone no. 818 - 840 - 7075
May the IRS	G discuss this return with the preparer shown above? See instructions	X Yes No
232001 12-13-2	LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form 990 (2022)

2022

		430502	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	
1	Briefly describe the organization's mission: CHALLENGE UNDERSERVED SECONDARY STUDENTS TO STAY IN SCHOOL AND		
	EXPERIENCE THE BENEFITS OF GOAL-SETTING, CHARACTER DEVELOPMEN		<u>r</u>
	MENTORING AND IMPROVED HEALTH BY PROVIDING THEM WITH A LIFE-C	HANGING	
	EXPERIENCE: COMPLETING THE LA MARATHON.		
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	XNo
	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	XNo
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	d by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the to revenue, if any, for each program service reported.	tal expenses, ar	ıd
4a		94,	431.)
14	STUDENTS RUN LA (SRLA) CREATES A SAFE, SUPPORTIVE COMMUNITY A	<u>ד 185+</u>	<u> </u>
	PUBLIC SCHOOLS, WELCOMING MORE THAN 2,500 STUDENTS TO TRAIN A		E
	THEIR TEACHERS TO COMPLETE THE LOS ANGELES MARATHON. THROUGH		<u> </u>
	TRANSFORMATIVE EXPERIENCE, SRLA STUDENTS DISCOVER THEIR BEST		
	LEARN HOW TO SET AND ACHIEVE PERSONAL AND ACADEMIC GOALS, ANI	<u> </u>	
	THE RESILIENCY TO OVERCOME LIFE'S OBSTACLES. EACH YEAR, STUDE		JME
	ACTIVE TEN OR MORE HOURS A WEEK; MORE THAN 95% OF THE STUDENT		
	ATTEMPT THE MARATHON COMPLETE THE 26.2-MILE COURSE; MORE THAN		
	THE SENIORS IN SRLA GRADUATE FROM HIGH SCHOOL; MORE THAN 90%		<u> </u>
	GRADUATES HAVE PLANS TO ATTEND COLLEGE, WITH MORE THAN 75% OF		
	BEING AMONG THE FIRST GENERATION OF THEIR FAMILIES TO GO TO C	OLLEGE.	
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 2,762,238.		
		Form 9	90 (2022)
232002	2 12-13-22		
	4		

2022.05090 STUDENTS RUN AMERICA 4025___1

Form	990	(2022)
	330	

 Form 990 (2022)
 STUDENTS
 RUN
 AMERICA

 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)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 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? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			77
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
~	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			х
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		х
0	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		х
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	<u> </u>		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		х
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
u	Part VI	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	1.0		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
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? If "Yes," complete Schedule F, Parts I and IV	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? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			v
~~	complete Schedule G, Part III	19		<u>x</u> x
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
	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</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		х
232000	12-13-22		990	2022)
-02000		1 0111	(

232003 12-13-22

5

Form	aan	(2022)
FUIII	990	(2022)

 Form 990 (2022)
 STUDENTS RUN AMERICA
 95-4430502
 Page 4

 Part IV
 Checklist of Required Schedules (continued)
 Vac
 Na

	r		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
_	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
	Schedule J	23		X
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			77
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
		25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
6	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
7	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? If "Yes," complete Schedule L, Part III	27		X
8	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	L
)	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
5a	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		7	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
8	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 22			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	х	
2004		Form		(2022
	6		`	
05	01 150364 4025 2022.05090 STUDENTS RUN AMERICA		40	25
_				

Form	990 (2022) STUDENTS RUN AMERICA	95-4430	502	P	age 5
Par	t 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 11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	
			3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		Х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac	ction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th				
		~ 	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributi				
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		Х
			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
•	to file Form 8282?		7c		х
Ь	If "Yes," indicate the number of Forms 8282 filed during the year	7d	10		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	ll	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
g	If the organization received a contribution of qualified intellectual property, did the organization mero		79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		- 11		
0		-	8		
0			0		
9	Sponsoring organizations maintaining donor advised funds.		0.0		
a L			9a		
b			9b		
10	Section 501(c)(7) organizations. Enter:	100			
	Initiation fees and capital contributions included on Part VIII, line 12	10a	-		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-		
11	Section 501(c)(12) organizations. Enter:				
	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			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	I I			
	organization is licensed to issue qualified health plans	13b	-		
С	Enter the amount of reserves on hand	13c			
14a			14a		<u>X</u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b	ļ	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		X
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				
232005	12-13-22		Form	990	(2022)
	7				

18120501	150364	4025

7 2022.05090 STUDENTS RUN AMERICA 4025__1

Form 990	(2022)
----------	--------

95-4430502 Page 6

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

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

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

			Yes	No
19	Enter the number of voting members of the governing body at the end of the tax year 1a 2	3	103	
14	If there are material differences in voting rights among members of the governing body, or if the governing	-		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	-		
2		2		x
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision	-		
3		3		x
4		4		X
4 5		5		X
		6	_	X
6 70	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
7a		7		x
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a		
D		76		x
0	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
8		8a	x	
a b	The governing body? Each committee with authority to act on behalf of the governing body?	86		<u> </u>
9			23	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		x
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		- 23
	This Section B requests information about policies not required by the internal Revenue Code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		•	<u> </u>
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11		
	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	12	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe		-	
-	on Schedule O how this was done	12	x	
13	Did the organization have a written whistleblower policy?	13		
14	Did the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15	a X	
	Other officers or key employees of the organization	15	5 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?	16	a	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?	16	b	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CA			
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	/) availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (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	ıd fina	ncial	
	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			
	GABRIELA ARVIZU - 818-654-3360			
	5252 CREBS AVENUE TARZANA CA 91356			

232006 12-13-22

8 2022.05090 STUDENTS RUN AMERICA Form **990** (2022)

4025___1

Form 990	(2022)
----------	--------

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

(A)	(B)		(C)		(D)	(E)	(F)			
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	box, unless person is officer and a directo		s both	n an	compensation	compensation	amount of	
	week		cer an	uau	recio	n/trus	lee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	ll trus		/ee	mpen		1099-NEC)	1033-1120)	and related
	below	dual t	nstitutional trustee	5	mplo	sst col	er			organizations
	line)	Indivi	Instit	Officer	Key employee	Highest compensated employee	Former			
(1) MARSHA CHARNEY	40.00									
EXECUTIVE DIRECTOR		Х		Х				35,000.	0.	2,985.
(2) ERIC SPEARS	15.00									
DIRECTOR/SR CORDINATOR		Х						16,500.	Ο.	0.
(3) JOHN MACALLISTER	5.00									
PRESIDENT		Х		Х				0.	Ο.	0.
(4) ROBERT KESSEL	5.00									
CO-VICE PRESIDENT		Х		Х				0.	0.	0.
(5) STEVEN MILLER	5.00									
CO-VICE PRESIDENT		Х		Х				0.	0.	0.
(6) FREDERIC MANDELL	5.00									
SECRETARY		Х		Х				0.	0.	0.
(7) CHARLES WERT	5.00									
TREASURER		Х		Х				0.	0.	0.
(8) ALVARO CORTES	5.00									
DIRECTOR		Х						0.	0.	0.
(9) NATHAN CRAIR	5.00									
DIRECTOR		Х						0.	0.	0.
(10) MICHAEL CURRY	5.00									
DIRECTOR		Х						0.	0.	0.
(11) ROXANNE M. DIAZ	5.00									
DIRECTOR		Х						0.	0.	0.
(12) BECCA DOTEN	5.00									
DIRECTOR		Х						0.	0.	0.
(13) GISELA FRIEDMAN	5.00									
DIRECTOR		Х						0.	0.	0.
(14) ADRIANA GARCIA	5.00									
DIRECTOR		Х						0.	0.	0.
(15) BETH GORDIE	5.00									
DIRECTOR		Х						0.	0.	0.
(16) MICHELLE WHANG KIM	5.00									
DIRECTOR		Х						0.	0.	0.
(17) RICHARD LEWIS	5.00								_	
DIRECTOR		Х						0.	0.	0.
232007 12-13-22										Form 990 (2022)

232007 12-13-22

Form 990 (2022)

	990 (2022) STUDENTS	RUN AME	ERI	CA						95-4430	502	Page 8
Par	VII Section A. Officers, Directors, True	stees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)		
(A) (B) Name and title Average hours per week					ss per	ition more son is	l than c s both r/trust	an	(D) Reportable compensation	(E) Reportable compensation from related	Estir amo	(F) mated punt of
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest compensated employee	Former	from the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compe fror organ and r	ther ensation n the nization related izations
(18) DIRE	RUSSELL MEYER	5.00	x						0.	0.		0.
	KRISTINE MICHIE	5.00										<u> </u>
DIRE			х						0.	0.		0.
(20)	VERONICA PEREZ	5.00										
DIRE	CTOR		х						0.	0.		0.
(21)	BRIAN PFEFFER	5.00										
DIRE	CTOR		х						0.	0.		Ο.
(22)	LARRY RAWSON	5.00										
DIRE	CTOR		Х						0.	0.		0.
(23)	MURPHY REINSCHREIBER	5.00										
DIRE	CTOR		Х						0.	0.		0.
(24)	MARK SHINDERMAN	5.00										
DIRE			Х						0.	0.		0.
	HELEN YNIGUEZ	5.00								0		•
DIRE	CTOR		Х						0.	0.		0.
	.								51,500.	0.	2	005
	Subtotal								<u> </u>	0.		<u>,985.</u> 0.
	Total from continuation sheets to Part V								51,500.	0.	2	,985.
	Total (add lines 1b and 1c) Total number of individuals (including but i											,905.
2	compensation from the organization		056	IISLE	uau	ove	<i>y</i> wii		ceived more than \$100,			0
	compensation nom the organization										Y	es No
	Did the organization list any former officer											X
	line 1a? If "Yes," complete Schedule J for s										3	
4	For any individual listed on line 1a, is the s and related organizations greater than \$15										4	x
5	Did any person listed on line 1a receive or	accrue comper	nsati	on fr	om a	any	unre	late	ed organization or individ	lual for services		
	rendered to the organization? If "Yes," cor	nplete Schedule	e J fo	or su	ich p	bers	on .				5	X
	ion B. Independent Contractors											
	Complete this table for your five highest co the organization. Report compensation for	•	•							· ·	tion from	1
	(A) Name and business	address	NC	ONE	2				(B) Description of s	ervices ((C) Compens	ation
					_							
	Total number of independent contractors (\$100,000 of compensation from the organ	•	ot lin	nitec	l to t	thos C		ted	above) who received mo	ore than		

Form 990 (2022)

232008 12-13-22

and Control Interconnection Interconnectio	Pai	τν	/111					K. A P				
Total revenue Related or exempt function revenue Point ac and patients meanue Perman each patients meanue Perm				Check if Schedule U	conta	ains a respor	ise	or note to any lin		(B)	(C)	(D)
and Sections and Sections and Sections sections<									Total revenue	Related or exempt	Unrelated	Revenue excluded
Bit Pederated campaigns 1a 1a 1a 1b 1b 1b 1c										function revenue	business revenue	sections 512 - 514
Botol Mombership Ques Ib d Heated organizations Ib Ic Id	s s	1	2	Federated campaigns		1a						
Business Code Business Code b 6 611710 94,431. 94,431. c 6 611710 94,431. 94,431. g Total Add lines 2a:7 94,431. 94,431. 94,431. g Total Add lines 2a:7 94,631. 94,431. 94,431. g Total Add lines 2a:7 94,431. 94,431. 94,431. g Total Add lines 2a:7 94,631. 94,431. 94,431. g Total Add lines 2a:7 104,431. 104,431. 104,431. g <	ant	•										
Business Code Business Code 0 <td>Ω^B</td> <td></td>	Ω ^B											
Business Code Business Code 0 <td>ifts Ir A</td> <td></td>	ifts Ir A											
Business Code Business Code 0 <td>, G nila</td> <td></td> <td></td> <td>•</td> <td></td> <td></td> <td></td> <td>36,500.</td> <td></td> <td></td> <td></td> <td></td>	, G nila			•				36,500.				
Business Code Business Code b 6 611710 94,431. 94,431. c 6 611710 94,431. 94,431. g Total Add lines 2a:7 94,431. 94,431. 94,431. g Total Add lines 2a:7 94,631. 94,431. 94,431. g Total Add lines 2a:7 94,431. 94,431. 94,431. g Total Add lines 2a:7 94,631. 94,431. 94,431. g Total Add lines 2a:7 104,431. 104,431. 104,431. g <	Sir					· · ·		•				
Business Code Business Code b	ber					e 1 f	2,	770,373.				
Business Code Business Code b	<u>i</u> tri		g	Noncash contributions included in	lines 1	a-1f 1g \$	1,	242,865.				
Business Code Business Code b	and		h	Total. Add lines 1a-1f					2,806,873.			
Operation Description Description <thdescription< th=""> <thdescription< th=""> <</thdescription<></thdescription<>												
Instruction 94,431. g Total. Add lines 2a.21 94,431. a threstment income (including dividends, interest, and other similar amounts) 52,087. 4 income from investment of tax-exempt bond proceeds 52,087. 5 Royalties 6a 6 Gross rents 6a 6 Gross rents 6a 6 Gross amount from sales of assets other than inventory 7a 7 Gross amount from sales of assets other than inventory 7a 7 Gross income from fundraising events and sales expenses 7b 39,500. c Cain or (loss) Cot 109. 10 8 Gross income from fundraising events including \$ of contributions reported on line 10; See Part V, line 18 Ba 9b 9 Gross income from gaming activities. See Part V, line 18 9b 9b 9b 9 Gross sold of inventory, less returns and allowances 10a 10a 10a 9 Gross sales of inventory, less returns and allowances 10a 10a 10a 11 a	ø	2	а	RACE FEES				611710	94,431.	94,431.		
g Total. Add lines 2.9.21 94,431. 3 Investment income (including dividends, interest, and other similar amounts) 52,087. 4 Income from investment of tax-exempt bond proceeds 52,087. 5 Royalties 6a 6 Gross rents 6a 6 Gross rents 6a 6 Gross amount from sales of assets other than income or (loss) 0.0 Securities 7 a Gross amount from sales of assets other than invertor ra Gross income from liveristing events (not including \$ to 109. 109. 8 a Gross income from liveristing events (not including \$ of contributions reported on line 10; See Part IV, line 18 9a 9 Gross income from gaming activities. See Part IV, line 19 9b 9 Less: direct expenses 9a 9 Gross sales of inventory, less returns and allowances 9b 0 Gross sales of inventory, less returns and allowances 10a 0 All other revenue 10a 0 Allowances 900099 41,120. 0 Allowances 900099 41,120.	e vic		b									
9 Total. Add lines 2a21 94,431. 9 Total. Add lines 2a21 94,431. 1 Investment income (including dividends, interest, and other similar amounts) 52,087. 4 Income from investment of tax exempt bond proceeds 52,087. 5 Royatties 60 6 Gross rents 60 6 Rest income or (loss) 60 7 Gross amount from sales of assets other than inventory tasses other than inventory assets income from fundraking events (not including \$ of 0.9. 10.9. 8 Gross income from fundraking events occurritivutions reported on line 10; See Part IV, line 18 9 9 Gross income from gaming activities. See Part IV, line 18 9 9 Gross sets of inventory, less returns and allowances 9 10 Gross sole of inventory, less returns and allowances 10 11 MISCELLANEOUS REVENUE 8 9 Occus from sales of inventory exit and allowances 10 12 Total. Add lines 11a11d 21, 924, 620.	Sei		с									
9 Total. Add lines 2a21 94,431. 9 Total. Add lines 2a21 94,431. 1 Investment income (including dividends, interest, and other similar amounts) 52,087. 4 Income from investment of tax exempt bond proceeds 52,087. 5 Royatties 60 6 Gross rents 60 6 Rest income or (loss) 60 7 Gross amount from sales of assets other than inventory tasses other than inventory assets income from fundraking events (not including \$ of 0.9. 10.9. 8 Gross income from fundraking events occurritivutions reported on line 10; See Part IV, line 18 9 9 Gross income from gaming activities. See Part IV, line 18 9 9 Gross sets of inventory, less returns and allowances 9 10 Gross sole of inventory, less returns and allowances 10 11 MISCELLANEOUS REVENUE 8 9 Occus from sales of inventory exit and allowances 10 12 Total. Add lines 11a11d 21, 924, 620.	am		d									
Instruction 94,431. g Total. Add lines 2a.21 94,431. a threstment income (including dividends, interest, and other similar amounts) 52,087. 4 income from investment of tax-exempt bond proceeds 52,087. 5 Royalties 6a 6 Gross rents 6a 6 Gross rents 6a 6 Gross amount from sales of assets other than inventory 7a 7 Gross amount from sales of assets other than inventory 7a 7 Gross income from fundraising events and sales expenses 7b 39,500. c Cain or (loss) Cot 109. 10 8 Gross income from fundraising events including \$ of contributions reported on line 10; See Part V, line 18 Ba 9b 9 Gross income from gaming activities. See Part V, line 18 9b 9b 9b 9 Gross sold of inventory, less returns and allowances 10a 10a 10a 9 Gross sales of inventory, less returns and allowances 10a 10a 10a 11 a	nge B		е									
3 Investment income (including dividends, interest, and other similar amounts) 52,087. 52,08 4 Income from investment of tax exempt bond proceeds 5 52,08 5 5 Royatties (i) Real (ii) Personal 52,087. 52,08 6 a Gross rents 6a (ii) Personal 52,087. 52,08 6 a Gross rents 6a (iii) Personal 52,087. 52,08 7 a Gross rents 6a (iii) Personal 52,087. 52,08 6 a Gross rents 6a (iii) Personal 52,087. 52,08 6 a Gross rents 6a (iii) Personal 52,087. 52,08 7 a Gross rents 6a (iii) Personal 52,087. 52,08 7 a Gross mount from sales of meeting of closs (iii) Other 7a 39,609. 50 6 b closs: cost or the bais and sales expenses 7b 39,500. 109. 10 8 a Gross income from fundraising events 0 0 100	P		f	All other program service	rever	nue						
a income from investment of tax-exempt bond proceeds 52,087. 52,087. 5 Royalties (i) Personal 5 5 6 a Gross rents 6a (ii) Personal 5 6 a Gross rents 6a (iii) Personal 5 6 a Gross rents 6a (iii) Personal 5 6 a Gross rents 6a (iii) Other 5 7 a Gross amount from sales of assets other than income or (loss) (iii) Other 5 7 a Gross income from tundrasing events 10.9. 10 6 a Gross income from tundrasing events 10.9. 10 8 a Gross income from gaming activities. 6b 10.9. 9 a Gross income from gaming activities. 9 9 10 9 a Gross income or (loss) from gaming activities. 10.9. 10 9 a Gross income from gaming activities. 9 10 10 a Gross income from gaming activities. 10 10 10 a Gross income			g	Total. Add lines 2a-2f					94,431.			
4 Income from investment of tax-exempt bond proceeds		3		•	•							
S Royatties (i) Real (ii) Personal 6 a Gross rents 6 a (i) Real (ii) Personal 6 a Gross rents 6 b (i) Real (ii) Personal 6 b 6 c (ii) Other (iii) Personal (iii) Personal 7 a Gross amount from sales of assets other than inventory b (iii) Securities (iii) Other 7 a Gross income from fundraising events occinitions reported on line 1c). See Part IV, line 18 (iii) Personal (iii) Personal 8 a Gross income from fundraising events occinitions reported on line 1c). See Part IV, line 18 (iii) Other 109 - 100 9 a Gross income from gaming activities. See Part IV, line 19 ga ga ga ga 9 a Gross alaes of inventory, and allowances (iventory, lise returns and allowances (iventory, lise returns and allowances Ioa Gross sales of inventory, Business Code Business Code 9 a 900099 41, 120. 41, 120. 41, 120. 10 a Gross alaes of inventory Business Code 900099 41, 20. 41, 20. <t< td=""><td></td><td></td><td></td><td>other similar amounts)</td><td></td><td></td><td></td><td></td><td>52,087.</td><td></td><td></td><td>52,087.</td></t<>				other similar amounts)					52,087.			52,087.
6 a Gross rents 6 a (i) Real (ii) Personal b Less: rental expenses 6 b 6 c 6 c c Rental income or (loss) 6 c 6 c 6 c d Net rental income or (loss) 6 c 6 c 6 c a Gross amount from sales of asses other than inventory 7 a Gross amount from sales of asses other than inventory 7 a Gross amount from sales of asses other than inventory 7 a Gross income from fundraising events (not including \$ or of contributions reported on line 1c). See 109 · 109 · d Net gain or (loss) of contributions reported on line 1c). See 8 a 8 a 9 a g Gross income from fundraising events		4				•		roceeds				
6 a Gross rents 6a 0 b Less: rental expenses 6b 0 6 c 0 0 7 a Gross amount from sales of assets other than inventory 0 Securities (i) Securities (ii) Other asset 7 a Gross amount from sales of assets other than inventory 0 Securities (ii) Other asset 0 7 a Gross amount from sales of assets other than inventory 10.9 10.9 10.9 10.9 8 a Gross income from thundraising events 0 10.9 10.9 10 8 a Gross income from fundraising events 0 10.9 10 9 a Gross income from gaming activities. See 9a 9a 9a 9a 9 a Gross income from gaming activities. See 9a 9a 9a 9a 10 a Gross sales of inventory, less returns and allowances 10a MISCELLANEOUS REVENUE Business Code 9a 9a 1a MISCELLANEOUS REVENUE Business Code 90009.9 41,120. 41,120. 12 Total revenue. See instructions 2,994,620. 94,431. 0. 93,31		5		Royalties								
b Less: rental expenses 6b 6c c Rental income or (loss) 6c 6c d Net rental income or (loss) 6c 6c 7 Gross amount from sales of assets other than inventory 7a 39, 609. 7b b Less: cost or other basis of assets other than inventory 7a 39, 500. 7c 109. c Gain or (loss) 7b 39, 500. 7c 109. 10 d Net gain or (loss) 7b 39, 500. 7c 109. 10 a Gross income from fundraising events (not including \$s						(I) Real		(II) Personal				
c Rertal income or (loss) 6c		6	а									
d Net rental income or (loss)												
7 a Gross amount from sales of assets other than inventory ⁽ⁱ⁾ Securities ⁽ⁱⁱ⁾ Other a Gross icouter than inventory ⁽ⁱ⁾ 39,609. ⁽ⁱⁱ⁾ 39,500. ⁽ⁱⁱ⁾ 39,500. c Gain or (loss) ⁽ⁱⁱ⁾ 239,500. ⁽ⁱⁱ⁾ 109. ⁽ⁱⁱ⁾ 109. ⁽ⁱⁱ⁾ 109. d Net gain or (loss) ⁽ⁱⁱ⁾ 239,500. ⁽ⁱⁱ⁾ 109. ⁽ⁱⁱ⁾ 109. ⁽ⁱⁱ⁾ 109. 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See ⁽ⁱⁱ⁾ 209. </td <td></td>												
assets other than inventory Ta 39,609. b Less: cost or other basis and sales expenses Ta 39,609. c Gain or (loss) Tc 109. 10 c Gain or (loss) Tc 109. 10 d Net gain or (loss)		_			^{;)}							
Bold Less: cost or other basis and sales expenses Tb 39,500. 109. C Gain or (loss) To 109. 109. Bold Ross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 Ba 109. 10 Bold Ross income from gaming activities. See Part IV, line 19 Ba 9a 9b 9b 9 a Gross income from gaming activities. See Part IV, line 19 9a 9b 9b 9b 10 a Gross alse of inventory, less returns and allowances 10a 10b 10b 10c 10 a Gross sold goods sold 10b 10b 10c 10c 10c 11 a MISCELLANEOUS REVENUE Business Code 900099 41,120. 41,120. 11 a MISCELLANEOUS REVENUE 900099 41,120. 41,120. 12 Total revenue. See instructions 2,994,620. 94,431. 0. 93,31		'	а		-	.,						
and sales expenses Tb 39,500. c Gain or (loss) To 109. 10 d Net gain or (loss) 0 109. 10 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 Ba Ba b Less: direct expenses Bb 0 0 c Net gain or (loss) from fundraising events 9 9 Gross income from gaming activities. See Part IV, line 19 9a 9a 9b 0			Ŀ.		<i>1</i> a	59,00	<i>.</i>					
c Gain or (loss) 7c 109. 109. 109. 10 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See 8a 109. 10 9 a Gross income from gaming activities. See Part IV, line 19 8a 9a 9a 9 a Gross solicome from gaming activities. See Part IV, line 19 9a 9a 9a 10 a Gross sales of inventory, less returns and allowances 10a 10a 10a 10 a Gross sales of inventory, less returns and allowances 10a 10b 10b 11 a MISCELLANEOUS REVENUE 900099 41,120. 41,120. 11 a MISCELLANEOUS REVENUE 900099 41,120. 41,120. 12 Total revenue. See instructions 2,994,620. 94,431. 0. 93,31	ø		D		76	39 50	٥					
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a 8a 8a b Less: direct expenses 8b 8b	nue		~			10	9.					
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a 8a 8a b Less: direct expenses 8b 8b	leve								109.			109.
B including \$ of contributions reported on line 1c). See Part IV, line 18	P	8					·····		1001			
contributions reported on line 1c). See 8a Part IV, line 18 8b b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses b Less: direct expenses 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold t 10b c MISCELLANEOUS REVENUE b Susiness Code 900099 41,120. c Image: See instructions c <td>Ę</td> <td>U</td> <td>u</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Ę	U	u									
Part IV, line 18 Ba b Less: direct expenses Bb c Net income or (loss) from fundraising events	•			•								
b Less: direct expenses Bb c Net income or (loss) from fundraising events						-	8a					
c Net income or (loss) from fundraising events			b									
Part IV, line 19 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities 0 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 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory 10a generative 900099 41,120. 41,120. 41,120. 12 Total revenue. See instructions 2,994,620. 94,431. 0. 93,31							ts					
Part IV, line 19 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities 0 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 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory 10a generative 900099 41,120. 41,120. 41,120. 12 Total revenue. See instructions 2,994,620. 94,431. 0. 93,31		9		. ,		•						
b Less: direct expenses 9b Image: Segment and allowances Image: S				Part IV, line 19			9a					
10 a Gross sales of inventory, less returns and allowances 10a 10a b Less: cost of goods sold 10b 0b c Net income or (loss) from sales of inventory 0 0 11 a MISCELLANEOUS REVENUE Business Code 0 b c 0 0 0 c All other revenue 0 0 0 e Total. Add lines 11a-11d 41,120. 0. 93,31			b	Less: direct expenses			9b					
and allowances 10a b Less: cost of goods sold c Net income or (loss) from sales of inventory 11 a MISCELLANEOUS REVENUE b Business Code c 900099 c 41,120. d All other revenue e Total revenue. See instructions 12 Total revenue. See instructions			с	Net income or (loss) from	gami	ng activities						
b Less: cost of goods sold 10b 10b 10b 10b 10b 11a MISCELLANEOUS REVENUE Business Code 900099 41,120 41,120 41,120 41,120 120		10	а	Gross sales of inventory,	less r	eturns						
c Net income or (loss) from sales of inventory Business Code 41,120. 11 a MISCELLANEOUS REVENUE 900099 41,120. b				and allowances			10a					
Business Code Image: Code state			b	Less: cost of goods sold			10b					
11 a MISCELLANEOUS REVENUE 900099 41,120. 41,12 b			с	Net income or (loss) from	sales	of inventor	y					
e Total. Add lines 11a-11d 41,120. 12 Total revenue. See instructions 2,994,620. 94,431. 0. 93,31	s											
e Total. Add lines 11a-11d 41,120. 12 Total revenue. See instructions 2,994,620. 94,431. 0. 93,31	e e	11	а	MISCELLANEOUS	R	EVENUE		900099	41,120.			41,120.
e Total. Add lines 11a-11d 41,120. 12 Total revenue. See instructions 2,994,620. 94,431. 0. 93,31	enu		b									
e Total. Add lines 11a-11d 41,120. 12 Total revenue. See instructions 2,994,620. 94,431. 0. 93,31	Sev											
e Total. Add lines 11a-11d 41,120. 12 Total revenue. See instructions 2,994,620. 94,431. 0. 93,31	Mis								11 100			
										04 421	0	02 216
232009 12-13-22 Form 990 (2					UNS				4,334,040.	J4,4J⊥•	J 0.	Form 990 (2022)

Form 990 (2022)

11

4025___1

95-4430502 Page 9

STUDENTS RUN AMERICA Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons			(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	76 100	76 100		
~	individuals. See Part IV, line 22	76,100.	76,100.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16 Benefits paid to or for members				
4 5	Compensation of current officers, directors,				
5	trustees, and key employees	54,985.	43,987.	5,499.	5,499
6	Compensation not included above to disqualified	54,505.		5,455.	5,455
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	373,277.	298,622.	37,328.	37,327
8	Pension plan accruals and contributions (include	57572770		5775200	577527
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	14 035.	11 230	1 403.	1 402
10	Payroll taxes	14,035. 33,796.	<u>11,230.</u> 27,036.	1,403.	<u> </u>
11	Fees for services (nonemployees):		2770301		5,500
	Management				
b	Legal				
	Accounting	21,585.	17,268.	3,238.	1,079
	Lobbying			0,2001	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	3,288.	2,630.	494.	164
g	Other. (If line 11g amount exceeds 10% of line 25,	0,2001			
9	column (A), amount, list line 11g expenses on Sch 0.)	137,176,	109,741.	20,576.	6.859
12	Advertising and promotion	137,176. 2,977.		20,0,00	6,859 2,977 2,389
13	Office expenses	47,472.	41,355.	3,728.	2.389
14	Information technology	_ , , _ , _ ,	,	• / · = • ·	_,
15	Royalties				
16	Occupancy	1,957.	1,663.	196.	98
17	Travel	1,957. 9,423.	8,010.	942.	471
18	Payments of travel or entertainment expenses	- /			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	46,999.	39,949.	7,050.	
20	Interest			,	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,580.	3,043.	358.	179
23	Insurance	32,870.	27,940.	3,287.	1,643
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				·
а	RACE COSTS	1,763,908.	1,763,908.		
b	TRANSPORTATION	289,756.	289,756.		
c		,			
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,913,184.	2,762,238.	87,479.	63,467
26	Joint costs. Complete this line only if the organization	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	. ,	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

232010 12-13-22

Check here

18120501 150364 4025

if following SOP 98-2 (ASC 958-720)

12 2022.05090 STUDENTS RUN AMERICA

4025___1

Form 990 (2022) STUDENTS RUN AMERICA Part X Balance Sheet

95-4430502 Page 11

		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			369,165.	1	257,536.
	2	Savings and temporary cash investments			100,108.	2	331,087.
	3	Pledges and grants receivable, net	62,330.	3	26,080.		
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subs	antial co	ontributor, or 35%			
		controlled entity or family member of any of the	se perso	ins		5	
	6	Loans and other receivables from other disquali	fied pers	sons (as defined			
		under section 4958(f)(1)), and persons described	l in sect	ion 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			209,399.	8	225,897.
As	9				34,478.	9	19,764.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	52,161. 42,808.			
	b	Less: accumulated depreciation	10b	42,808.	11,849.	10c	9,353. 1,322,931.
	11	Investments - publicly traded securities			1,274,337.	11	1,322,931.
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ	2,061,666.	16	2,192,648.		
	17	Accounts payable and accrued expenses		L	903.	17	7,066.
	18	Grants payable			60,000.	18	38,000.
	19	Deferred revenue				19	67,036.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subs					
iab.		controlled entity or family member of any of the		F		22	
-	23	Secured mortgages and notes payable to unrela		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	s 1 7-24).	Complete Part X			
		of Schedule D			60 002	25	112 102
	26	Total liabilities. Add lines 17 through 25			60,903.	26	112,102.
ŝ		Organizations that follow FASB ASC 958, che	ck here	• X			
nce	07	and complete lines 27, 28, 32, and 33. Net assets without donor restrictions			1,750,640.	27	2,055,546.
ala	27				250,123.	27	25,000.
ар	28	Net assets with donor restrictions			230,123.	20	23,000.
'n		Organizations that do not follow FASB ASC 9	58, cne	CK nere			
Net Assets or Fund Balances	20	and complete lines 29 through 33.				29	
ets	29	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or ex					
SSE	30					30	
et⊿	31	Retained earnings, endowment, accumulated in		E E E E E E E E E E E E E E E E E E E	2,000,763.	31 32	2,080,546.
ž	32	Total net assets or fund balances			2,061,666.	32	2,192,648.
	33	Total liabilities and net assets/fund balances .			2,001,000.	33	

Form 990 (2022)

Form	990 (2022) STUDENTS RUN AMERICA	95-	4430502	Pag	_{ge} 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,994	1,62	20.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,913	3,18	84.
3	Revenue less expenses. Subtract line 2 from line 1	3	81	.,43	36.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,000),7(<u>63.</u>
5	Net unrealized gains (losses) on investments	5	-1	.,6!	<u>53.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,080),54	46.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		<u>2</u> c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u>3a</u>		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			000	

Form **990** (2022)

Department of the Treasury Internal Revenue Service

(Form 990)

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
2022
Open to Public Inspection

T

Nam	Iame of the organizationEmployer identification numberSTUDENTS RUN AMERICA95-4430502											
Pa	rt I	S.										
The	organ	ization is not a private found	ation because it is: (I	or lines 1 through 12, cl	neck only o	one box.)						
1		A church, convention of chu	urches, or associatio	n of churches described	in sectio	n 170(b)(1	l)(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	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental u	nit describe	ed in			
		section 170(b)(1)(A)(iv). (C	Complete Part II.)									
6		A federal, state, or local gov	ernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).					
7	X	An organization that normal	lly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from th	e general p	public described in			
		section 170(b)(1)(A)(vi). (C	omplete Part II.)									
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Part	t II.)							
9		An agricultural research org	anization described	in section 170(b)(1)(A)(i	i x) operate	ed in conju	inction with a	land-grant	college			
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the r	name, city	, and state of	the college	or			
		university:										
10		An organization that normal	lly receives (1) more	than 33 1/3% of its supp	ort from co	ontributior	ns, membersh	ip fees, and	d gross receipts from			
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no i	more than	33 1/3% of its	s support fi	rom gross investment			
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	ifter June 30, 1975.			
		See section 509(a)(2). (Cor	mplete Part III.)									
11		An organization organized a	and operated exclusi	vely to test for public saf	ety. See	section 50)9(a)(4).					
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform th	he function	ns of, or to ca	rry out the	purposes of one or			
		more publicly supported org	ganizations describe	d in section 509(a)(1) o	r section &	509(a)(2).	See section &	509(a)(3). (Check the box on			
		lines 12a through 12d that of	describes the type o	f supporting organization	and com	plete lines	12e, 12f, and	12g.				
а		Type I. A supporting orga	nization operated, s	upervised, or controlled I	by its supp	orted org	anization(s), ty	pically by	giving			
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	f the direc	tors or trustee	es of the su	ipporting			
		organization. You must c	omplete Part IV, Se	ections A and B.								
b		Type II. A supporting orga	anization supervised	or controlled in connect	ion with its	s supporte	d organizatio	n(s), by hav	ving			
		control or management o	f the supporting orga	anization vested in the sa	ame persoi	ns that co	ntrol or manag	ge the supp	ported			
		organization(s). You mus	t complete Part IV,	Sections A and C.								
С] Type III functionally inte	grated. A supporting	g organization operated i	in connect	ion with, a	and functional	ly integrate	ed with,			
		its supported organizatior	n(s) (see instructions)). You must complete F	Part IV, Se	ctions A,	D, and E.					
d] Type III non-functionally	integrated. A supp	orting organization operation	ated in cor	nnection w	ith its suppor	ted organiz	zation(s)			
		that is not functionally int	egrated. The organiz	ation generally must sati	isfy a distri	ibution rec	quirement and	an attentiv	/eness			
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V .					
е		Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type	I, Type III				
		functionally integrated, or	Type III non-function	nally integrated supportir	ng organiza	ation.						
f	Ente	er the number of supported o	organizations									
g		vide the following information			(iv) Is the orga	nization listed						
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of support (see ir		(vi) Amount of other support (see instructions)			
		organization		above (see instructions))	Yes	No	support (see ii	istructions)	support (see instructions)			
	-											
Tota	I						l					

Schedule A (Form 990) 2022

STUDENTS RUN AMERICA

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.)

260									
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	2623147.	2258815.	1680575.	2374867.	2806873.	11744277.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge	13,800.	13,800.			13,800.			
	Total. Add lines 1 through 3	2636947.	2272615.	1694375.	2388667.	2820673.	11813277.		
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,						0075010		
	column (f)						2975310.		
	Public support. Subtract line 5 from line 4.						8837967.		
	Section B. Total Support								
	ndar year (or fiscal year beginning in)	(a) 2018 2636947.	(b)2019 2272615.	(c)2020 1694375.	(d) 2021 2388667.	(e) 2022	(f) Total 11813277.		
	Amounts from line 4	2030947.	227201J.	1094575.	2300007.	2020073.			
8	8 Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,	28,690.	26,617.	22,223.	25,941.	52 087	155,558.		
•	and income from similar sources Net income from unrelated business	20,050.	20,017.	22,223.	23,7410	52,007.	133,330.		
9									
	activities, whether or not the business is regularly carried on								
10	Other income. Do not include gain								
10	or loss from the sale of capital								
	assets (Explain in Part VI.)								
11	Total support. Add lines 7 through 10						11968835.		
		etc. (see instruction	ins)			12	389,929.		
							,		
	3 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								
Sec	ction C. Computation of Publi								
	Public support percentage for 2022 (I			olumn (f))		14	73.84 %		
	Public support percentage from 2021		-			15	66.06 %		
	33 1/3% support test - 2022. If the o					ore, check this bo	x and		
	stop here. The organization qualifies	as a publicly supp	orted organization				X		
b	stop here. The organization qualifies as a publicly supported organization Image: Comparison comparison b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box								
	and stop here. The organization qual	lifies as a publicly s	upported organiza	ation					
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10%	or more,		
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	r e. Explain in Part '	VI how the organiz	ation		
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	blicly supported or	rganization				
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or		
	more, and if the organization meets the	ne facts-and-circum	istances test, cheo	ck this box and st	op here. Explain ir	n Part VI how the			
	organization meets the facts-and-circl	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	ation			
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s		
						Schedule A	(Form 990) 2022		

232022 12-09-22

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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
J	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disgualified persons						
t	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						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		•		•	•	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses						
	and ited after lune 20 1075						
_							
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regulated approximation of the second opposed on the second opposed						
12	regularly carried on Other income. Do not include gain or loss from the sale of capital						
40	assets (Explain in Part VI.)			1			
	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the	L organization's fi	ret eacond third	fourth or fifth to:	l	1 501(c)(3) organ	l
14		0			-		
Sec	ction C. Computation of Publi	ic Support Per					<u></u>
	Public support percentage for 2022 (column (f))		15	%
16	Public support percentage from 2021					16	%
	ction D. Computation of Invest						
17				ine 13 column (f))		17	%
18	Investment income percentage from					18	%
	33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box a	-					
r	33 1/3% support tests - 2021. If the						3%. and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
-	23 12-09-22		···- · · , · •	, , ,			dule A (Form 990) 2022
			1 7	,			· · · · · · · · · · · · · · · · · · ·

2022.05090 STUDENTS RUN AMERICA

1

Yes No

Part IV Supporting Organizations

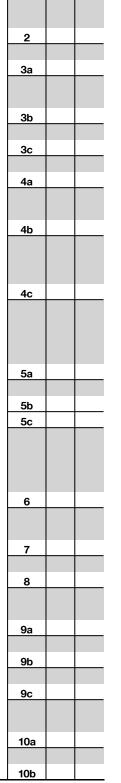
(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and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

Section A. All Supporting Organizations

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

18

232024 12-09-22



Schedule A (Form 990) 2022

Dart IV	Supporting Orac	anizations (continue	
		anizations (continua	α

1

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			

	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
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

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization

	Dervis	eu. ur c	Unitionec	i line supi	JULIII	Ulganization	
Sectio	n C.	Type	II Supp	porting	Orga	nizations	

 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
 Image: Control organization or trustees during the tax year also a majority of the directors or trustees of each of the organization was vested in the same persons that controlled or managed
 Image: Control organization or trustees during the tax year also a majority of the directors or trustees of each of the supporting organization was vested in the same persons that controlled or managed
 Image: Control organization or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors during the tax year also a majority of the di

			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 org	anization used to satisfy	the Integral Part Test durin	a the year (see instructions).
-				

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с		The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see 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.
- 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.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.* 232025 12-09-22

3b | | Schedule A (Form 990) 2022

2a

2b

3a

18120501 150364 4025

19 2022.05090 STUDENTS RUN AMERICA

4025 1

Yes No

	Schedule A	(Form	990)	2022
--	------------	-------	------	------

1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	n Nov. 20, 1970 (<i>explain in</i> l	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2022

232026 12-09-22

Schedule A (Form 990) 2022

Section D - Distributions

3

7

8

9

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

21

2022.05090 STUDENTS RUN AMERICA

Schedule A (Form 990) 2022

1 Amounts paid to supported organizations to accomplish exempt purposes

organizations, in excess of income from activity

6 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6.

Distributable amount for 2022 from Section C, line 6

4 Amounts paid to acquire exempt-use assets

(provide details in Part VI). See instructions.

10 Line 8 amount divided by line 9 amount

2 Amounts paid to perform activity that directly furthers exempt purposes of supported

5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)

Administrative expenses paid to accomplish exempt purposes of supported organizations

Distributions to attentive supported organizations to which the organization is responsive

1

2

3 4

5 6

7

8 9

10

Current Year

4025___1

Schedule A	(Form 990) 2022	STUDENTS	RUN	AMERICA	95-4430502 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D,	, 2, 3b, 3c, 4b, 4c, lines 2 and 3; Part	5a, 6, 9a IV, Sect	lanations required by Part II, line 10; Part II, line 17a or a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 ion E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V	17b; Part III, line 12; and 2; Part IV, Section C, , Section B, line 1e; Part V,
	Section D, lines 5, 6, and (See instructions.)	8; and Part V, Sec	tion E, lii	nes 2, 5, and 6. Also complete this part for any addition	al information.
232028 12-09-2	22			22	Schedule A (Form 990) 2022

223451 11-15-22

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

95-4430502

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

STUDENTS RUN AMERICA

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

General Rule

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

Special Rules

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

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

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

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).

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

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

STUDENTS RUN AMERICA

Name of organization

Employer identification number

Page 2

95-4430502

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 60,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll <u>83,989</u>. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 Person Payroll 150,945. Noncash X \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 X Person Payroll 125,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 Person Payroll X 481,000. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 6 X Person Payroll 60,000. Noncash \$ (Complete Part II for noncash contributions.) 223452 11-15-22 Schedule B (Form 990) (2022)

24 2022.05090 STUDENTS RUN AMERICA

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

STUDENTS RUN AMERICA

95-4430502

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$470,400.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll On Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)

18120501 150364 4025

2022.05090 STUDENTS RUN AMERICA

4025___1

Name of organization

STUDENTS RUN AMERICA

Employer identification number

Page 3

95-4430502

Part II	II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
3	3,000 BRAS, 3,699 SHIRTS, 3,546 SHORTS						
		\$150,945.	06/30/23				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
5	3,649 SWEATSHIRTS AND 3,700 RUNNING SHOES						
		\$481,000.	06/30/23				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
7	2,688 LA MARATHON ENTRY FEES						
		\$470,400.	03/17/23				
(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				
000450 11 1		\$	Cohodulo D (Ec 000) (0000)				
223453 11-15	-22		Schedule B (Form 990) (2022)				

26 2022.05090 STUDENTS RUN AMERICA 4025___1

Name of o	organization			Employer identification number				
STUDE	NTS RUN AMERICA			95-4430502				
Part III	Exclusively religious, charitable, etc., contributin from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, or Use duplicate copies of Part III if additional s	through (e) and the following line entri- charitable, etc., contributions of \$1,000 or le	v. For organizations	hat total more than \$1,000 for the year				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
Part I				· · ·				
		(e) Transfer of gift						
	Transferee's name, address, a			ansferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
·		e) Transfer of gift						
·	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
	(e) Transfer of gift							
·	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee				
223454 11-15	5-22	27		Schedule B (Form 990) (2022				
		41						

18120501 150364 4025

2022.05090 STUDENTS RUN AMERICA

4025___1

		Supplement	- Einanaial Statamanta	1	OMB No. 1	545-0047	
			al Financial Statements nization answered "Yes" on Form 990,		2022		
(Forr	n 990)		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		ZU		
	ment of the Treasury I Revenue Service		Attach to Form 990. 0 for instructions and the latest information.		Open to Inspect		
-	e of the organizatio	on			dentificatio	n number	
Der		STUDENTS RUN AMERIO			5-44305		
Pa		ations Maintaining Donor Advise n answered "Yes" on Form 990, Part IV, lin	d Funds or Other Similar Funds or Ac	counts. C	omplete if th	ne	
	organization	Tanswered Tes Offform 990, Fait IV, in		b) Funds and	other accou	ints	
4	Total number at or	ad of year		bj i unus anu		11113	
1 2		nd of year f contributions to (during year)					
3		f grants from (during year)					
4		t end of year					
5			writing that the assets held in donor advised fund	s			
	are the organizatio	n's property, subject to the organization's	exclusive legal control?		Yes	No	
6	Did the organizatio	on inform all grantees, donors, and donor a	dvisors in writing that grant funds can be used or	nly			
	for charitable purp	oses and not for the benefit of the donor o	r donor advisor, or for any other purpose conferri	ng			
Des	impermissible priva				Yes	No	
Pa			ganization answered "Yes" on Form 990, Part IV,	line 7.			
1		servation easements held by the organization					
		of land for public use (for example, recrea				a	
		f natural habitat	Preservation of a certif	ied historic si	tructure		
2		of open space	fied conservation contribution in the form of a cor	servation ear	sement on th	na last	
2	day of the tax year	o o i			t the End of th		
а				2a			
b		And and the second second from the second seco		2b			
с	-		ucture included in (a)	2c			
d							
	historic structure listed in the National Register						
3	Number of conserv	vation easements modified, transferred, rel	eased, extinguished, or terminated by the organiz	zation during	the tax		
	year						
4		where property subject to conservation eas					
5	-	tion have a written policy regarding the per			,		
•	,	orcement of the conservation easements it			Yes	└── No	
6	Staff and volunteel	r nours devoted to monitoring, inspecting,	handling of violations, and enforcing conservation	n easements	during the y	ear	
7	Amount of expense	es incurred in monitoring, inspecting, hanc	lling of violations, and enforcing conservation eas	ements durin	g the year		
8			re satisfy the requirements of section 170(h)(4)(B)(,		
•					Yes	└── No	
9		•	on easements in its revenue and expense statements that the organization's financial statements that the organization is financial statements the organ				
		ounting for conservation easements.					
Pa			Art, Historical Treasures, or Other Si	imilar Asse	ets.		
	Complete if	the organization answered "Yes" on Form	1990, Part IV, line 8.				
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and bala	nce sheet wo	orks		
	of art, historical tre	easures, or other similar assets held for put	olic exhibition, education, or research in furtheran	ce of public			
	service, provide in	Part XIII the text of the footnote to its finar	ncial statements that describes these items.				
b	-		8, to report in its revenue statement and balance				
	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:						
•			agurag or other similar agents for financial gain in				
2		received or neid works of art, historical fre unts required to be reported under FASB A	asures, or other similar assets for financial gain, p	TOVIDE			
а		•	SC 956 relating to these items.	\$			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	
232051 09-01-22	

28 2022.05090 STUDENTS RUN AMERICA

Schedule D (Form 990) 2022

Sche		S RUN AMER						95-44	30502	2 Pa	age 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	rical Tre	easures, or	Othe	r Simila	r Assets	(contir	ued)	
3	Using the organization's acquisition, accession	on, and other record	s, check a	any of the	following that	make si	ignificant ι	use of its			
	collection items (check all that apply):										
а	Public exhibition	d	I 🗌 L	oan or exc	hange progra	m					
b	Scholarly research	e	, 🗌 c	Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	ellections and explair	n how the	y further th	ne organizatio	n's exen	npt purpo	se in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, hist	orical treas	sures, or othe	r similar	assets		_		_
_	to be sold to raise funds rather than to be ma		<u>u</u>						Yes		No
Par	t IV Escrow and Custodial Arran		ete if the o	organizatic	on answered "	Yes" on	Form 990	, Part IV,	ine 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custodi								_		-
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing ta	ble:							
									Amoun		
	Beginning balance										
	Additions during the year										
-	Distributions during the year										
t	Ending balance								7.		1
	Did the organization include an amount on Fe						• • • • • • • • • • • • • • • • • • • •	L	Yes		∣No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i										
1 41		(a) Current year		ior year	(c) Two year		(d) Three y	ears hack	(e) Four	vears	hack
10	Paginning of year balance	(u) ourroint your	(5)11	ior your	(0) 100 your	o buok	(a) 11100)	ouro buon	(0) 1 001	youro	buok
1a 5	Beginning of year balance										
0	Contributions										
d	Grants or scholarships										
	Other expenditures for facilities										
e											
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent vear end balance	e (line 1a	column (a)) held as:						
a	Board designated or quasi-endowment		%	oolanni (a							
b	Permanent endowment	%									
c		<u></u> , .									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse		ation that	are held ar	nd administere	ed for th	e				
	organization by:	-							ĺ	Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								Зb		
4	Describe in Part XIII the intended uses of the	organization's endo	wment fu	nds.							
Par	t VI Land, Buildings, and Equipm	ent.									
	Complete if the organization answere	d "Yes" on Form 990), Part IV,	line 11a. S	See Form 990,	Part X,	line 10.				
	Description of property	(a) Cost or o basis (investr		.,	t or other (other)	• •	ccumulate preciation	ed	(d) Boo	k value	e
1a	Land										
b	Buildings										
с	Leasehold improvements										
	Equipment				0,180.		20,82			9,3	
	Other			2	1,981.		21,98	81.		-	0.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, columr	n (B), line 1	0c.)					9,3	53.

Schedule D (Form 990) 2022

Schedule D) (Form 990) 2022	STUDENTS	RUN	AMERICA	4

Part VII	Investments - Other Securities.			
	Complete if the organization answered "Yes" of		-	.
	tion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
. ,	al derivatives			
	held equity interests			
(3) Other				
(A)				
(B)				
(C) (D)				
(E)				
(E)				
(G)				
(H)				
	b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes" of	n Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (I	b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" o		a 11d. See Form 990, Part X, line 15.	
	(a) L	Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u> (8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line	15)		
Part X	Other Liabilities.	70.)		1
	Complete if the organization answered "Yes" of	n Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25	
1.	(a) Description of liability			(b) Book value
(1) Fed	leral income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line			
	for uncortain tax positions. In Part VIII, provide t	he taxt of the featnests t	a the organization's financial statements t	hat raparta tha

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

Schedule D (Form 990) 2022

232053 09-01-22

X

Sche	dule D (Form 990) 2022 STUDENTS RUN AMERICA			95-	4430502	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With F	Revenue per Re	turn.		
	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	3,003,	479.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	-1,653.			
b	Donated services and use of facilities	2b	13,800.			
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e	<u>12</u> , 2,991,	<u>,147.</u>
3	Subtract line 2e from line 1			3	2,991,	,332.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	3,288.			
b	Other (Describe in Part XIII.)	. 4b				
с	Add lines 4a and 4b			4c		288.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,994,	,620.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem		Expenses per F	Returi	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a					
1	Total expenses and losses per audited financial statements			1	2,923,	,696.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	. 2a	13,800.			
b	Prior year adjustments	. 2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	. 2d				
е	Add lines 2a through 2d			2e		800.
3	Subtract line 2e from line 1			3	2,909	,896.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	3,288.			
b	Other (Describe in Part XIII.)	4 b			_	
С	Add lines 4a and 4b			4c		288.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 18.)			5	2,913,	184.
Pa	rt XIII Supplemental Information.					

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

PART X, LINE 2:

THE ORGANIZATION IS CLASSIFIED AS A SECTION 501(C)(3) ORGANIZATION UNDER
THE INTERNAL REVENUE CODE OF 1986 AND SECTION 23701(D) OF THE CALIFORNIA
REVENUE AND TAXATION CODE. HOWEVER, INCOME FROM CERTAIN ACTIVITIES NOT
DIRECTLY RELATED TO THE ORGANIZATION'S TAX-EXEMPT PURPOSE IS SUBJECT TO
TAXATION AS UNRELATED BUSINESS INCOME. FOR THE YEAR ENDED JUNE 30, 2023,
THE ORGANIZATION HAD NO INCOME SUBJECT TO TAXATION AS UNRELATED BUSINESS
INCOME. IN ADDITION, THE ORGANIZATION QUALIFIES FOR THE CHARITABLE
CONTRIBUTION DEDUCTION UNDER SECTION 170(B)(1)(A) AND HAS BEEN CLASSIFIED
AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION.

232054 09-01-22

Part XIII Supplemental Information (continued)	
Schedule D (Fo	rm 990) 2022

18120501 150364 4025

SCHEDULE I Grants and Other Assistance to Organizations,								OMB No. 1	545-0047		
(Form 990)		Go	vernments, an ete if the organization	d Individua	ls in the Ŭni	ted States			20	22	
Department of the Treasury		Compr		Attach to Forn		11 IV, III 2 1 01 22.			Open to Public		
Internal Revenue Service Go to www.irs.gov/Form990 for the latest information.											
Name of the organization Employer id											
STUDENTS RUN AMERICA										30502	
Part I General Information on Grants and Assistance											
	zation maintain records t		amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	tance, and the selecti		-	_	
	award the grants or assis							<u>Σ</u>	Yes	No No	
	IV the organization's pro										
	d Other Assistance to I hat received more than \$					anization answered "Y	es" on Form 990, Parl	t IV, line 21, foi	any		
1 (a) Name and ad	ddress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of noncash assistance		rpose of g assistanc		
						other)					

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

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

Schedule I (Form 990) 2022

Schedule I (Form 990) 2022

STUDENTS RUN AMERICA

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
OLLEGE SCHOLARSHIPS	125	62,000.	0.		
EACHERS/ASSISTANTS STIPENDS	93	14,100.	0.		

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:

SCHOLARSHIPS ARE AWARDED TO GRADUATING HIGH SCHOOL SENIORS WHO HAVE TRAINED

FOR, AND PARTICIPATED IN, THE 2023 LOS ANGELES MARATHON. THE SCHOLARSHIPS

ARE AWARDED TO STUDENTS WHO HAVE SUBMITTED APPLICATIONS, MET THE SET

CRITERIA, AND HAVE BEEN SELECTED BY A GROUP OF READERS. THE SCHOLARSHIPS

ARE PAID TO EITHER THE STUDENT, FOR COLLEGE COSTS, OR TO THEIR

COLLEGE/UNIVERSITY.

STIPENDS WERE AWARDED TO THOSE WHO COMPLETED THE PLAY EQUITY FUND, BEYOND

Page 2

Sched	ule I (F	orm	990) Oplementa		STU	DENTS	RUN	AMER	ICA					95-4430	502 Page 2
Part	IV	Su	opiementa	ai inte	ormati	on									
SPO	RT,	BF	REAKING	LI	MITS	TRAII	NING.	THE	FUNDS	CAME	E FROM	THE	PLAY	EQUITY	FUND,
AND	SRI	ĹΑ	AGREED	то	DIS	BURSE	THE	MONEY	ONCE	THE	COMPL	ETED	TRAII	NING WAS	5
VER	IFI	ED.													
														Schedu	ıle I (Form 990)
232291 04-01-22															

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

30.	2022
	Open to Public
	Inspection

Employer identification number

95-4430502

Department of the Treasury Internal Revenue Service

Devit

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

STUDENTS RUN AMERICA

Pa	TT Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	termini	•	5
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	X		703,245,	WHOLESALE V	ATITE	5	
6	Cars and other vehicles			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-	
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	4	39 500.	MARKET QUOT	ΔΨΤΟ	NS	
9 10	Securities - Closely held stock						110	
11	Securities - Partnership, LLC, or							
12	trust interests Securities - Miscellaneous							
12	Qualified conservation contribution -							
13	I Bata da atu atu a							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18								
19	Collectibles							
20	Food inventory Drugs and medical supplies							
20 21								
21	Taxidermy							
	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts Other (RACE ENTRY FEES)	X	4,188	102 000	SALES PRICE			
25		X	7,100		ESTIMATED V		7	
26	· /	Δ	7,100	1,220.	ESIIMAIED V.	ALUI		
27	Other ()							
28	Other ()	ation during	 					
29	Number of Forms 8283 received by the organiz	-						
	for which the organization completed Form 828	33, Part V, L	onee Acknowledg	ement 29			V.	N
00-				and a line David I. Barris of Alexandre	h 00 th th		Yes	No
30a	During the year, did the organization receive by		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, 0	,			
	must hold for at least 3 years from the date of t		•					v
	exempt purposes for the entire holding period?					30a		X
	If "Yes," describe the arrangement in Part II.	- I'		f				v
31	Does the organization have a gift acceptance p	•	-	-	ions?	31		X
32a	Does the organization hire or use third parties of		•				.	
-	contributions?					32a	X	
	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) foi	r a type of property	r for which column (a) is cheo	cked,			

describe in Part II.

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

Schedule M (Form 990) 2022

232141 09-09-22

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

THE ORGANIZATION USED A BROKERAGE FIRM TO SELL THE SECURITIES THAT WERE

DONATED.

Schedule M (Form 990) 2022

95-4430502

Page 2

232142 09-09-22

SCHEDULE O (Form 990)

Name of the organization

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.



STUDENTS RUN AMERICA

95-4430502

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

GOAL-SETTING, CHARACTER DEVELOPMENT, ADULT MENTORING AND IMPROVED

HEALTH BY PROVIDING THEM WITH A LIFE-CHANGING EXPERIENCE: COMPLETING

THE LA MARATHON.

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

FORM 990 IS CAREFULLY REVIEWED BY THE EXECUTIVE DIRECTOR, WHO THEN PRESENTS

THE RETURN TO THE BOARD FOR APPROVAL.

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

BOARD MEMBERS ARE AWARE OF THE CONFLICT OF INTEREST POLICY AND ARE EXPECTED

TO RECUSE THEMSELVES FROM ANY MATTERS IN WHICH THERE MAY BE A CONFLICT OF INTEREST.

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

THE BOARD OF DIRECTORS DETERMINES THE SALARY OF THE EXECUTIVE DIRECTOR

BASED ON COMPARABLE SALARIES, PERFORMANCE AND THE FINANCIAL CONDITION OF

THE ORGANIZATION. THE EXECUTIVE DIRECTOR DETERMINES THE SALARY AND BENEFITS

OTHER EMPLOYEES WITH INPUT FROM THE BOARD. OF

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

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON WRITTEN REQUEST.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 10-28-22

38 2022.05090 STUDENTS RUN AMERICA