Form	990-EZ

Department of the Treasury Internal Revenue Service

# **Short Form**

OMB No. 1545-0047

# **Return of Organization Exempt From Income Tax**

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

Do not enter social security numbers on this form, as it may be made public. Go to *www.irs.gov/Form990EZ* for instructions and the latest information. Open to Public Inspection

A F	or the	2023 calenda	ar year, or tax year beginning	01/01/2023	and ending		12	/31/2023	}			
B	heck if ap	plicable:	C Name of organization				D Emp	oyer ider	ntification number			
	Address cl	ess change REAL LIFE SKILLS INC						47-2171861				
	Name chai	change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E							E Telephone number			
	nitial retur	655 INDIA ST UNIT 306							-921-1139			
	-inal returr Amended i	n/terminated	City or town, state or province, country, and	d ZIP or foreign postal code			F Grou	up Exem	ption			
	Application		San Diego, CA 92101				Nun	nber				
G /	ccount	ing Method:	Cash 🖌 Accrual Other (spe	cify):		н	Check	if the o	organization is <b>not</b>			
I V	Vebsite	reallifesk	ills.org						ch Schedule B			
			eck only one) - 🗹 501(c)(3) 🗌 501(c)	( ) (insert no.) 4947(	a)(1) or 🗌 52 <sup>°</sup>	7	(Form 9	90).				
			Corporation Trust	Association 0								
LA	dd lines	s 5b, 6c, and	7b to line 9 to determine gross receipts	s. If gross receipts are \$200,0	00 or more, or							
(Pai	t II, colu	umn (B)) are \$	500,000 or more, file Form 990 instead	d of Form 990-EZ				. \$	50,850			
	art I		e, Expenses, and Changes in									
			the organization used Schedule									
	1		ons, gifts, grants, and similar amou					1	50,850			
	2		ervice revenue including governme					2	0			
	3	-	ip dues and assessments					3	0			
	4	Investment	•					4	0			
	5a		ount from sale of assets other than		5a	• •	0	-				
	b		or other basis and sales expenses		5b		0					
	-		ss) from sale of assets other than ir				v	5c	0			
	6		Id fundraising events:		ionn mile eug	• •	• •		<b>U</b>			
	а	Gross inco	ome from gaming (attach Sche	dule G if greater than								
ue		\$15,000) .			6a		0					
Revenue	b	Gross inco	me from fundraising events (not in	cluding \$	0 of contri	ibutio	ons					
Зе́			aising events reported on line 1) (	· · · · · · · · · · · · · · · · · · ·								
-		sum of suc	ch gross income and contributions	exceeds \$15,000)	6b		0					
	с	Less: direc	t expenses from gaming and fundr	aising events	6c		0					
			e or (loss) from gaming and fund	•	a and 6b an	d su	btract					
		line 6c) .						6d	0			
	7a	Gross sale	s of inventory, less returns and allo	wances	7a		0					
			•		7b		0					
			it or (loss) from sales of inventory (		a)			7c	0			
	8		nue (describe in Schedule O) .					8	0			
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7d	c, and 8				9	50,850			
	10		similar amounts paid (list in Scheo					10	0			
	11	Benefits pa	aid to or for members					11	0			
ŝ	12		ther compensation, and employee					12	40,802			
Expenses	13		al fees and other payments to inde					13	2,606			
pel	14		y, rent, utilities, and maintenance					14	800			
Щ	15		ublications, postage, and shipping					15	368			
	16		enses (describe in Schedule O) .s					16	7,861			
	17		enses. Add lines 10 through 16 .					17	52,437			
6	18		(deficit) for the year (subtract line 1					18	-1,587			
iets	19		or fund balances at beginning of	,					.,			
Ass			ar figure reported on prior year's ref					19	76,714			
Net Assets	20	-	nges in net assets or fund balances					20	0			
Ž	21		or fund balances at end of year. C					21	75,127			
<b>F</b>	Paperv		ion Act Notice, see the separate inst		Cat. No. 1064				Form <b>990-EZ</b> (2023)			

Form 990	D-EZ (2023)					Page <b>2</b>
Part	Balance Sheets (see the instructions t	for Part II)				:
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part II....		<u>/</u>
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			76,887		75,558
	Land and buildings				23	0
	Other assets (describe in Schedule O) See.Sch			520	-	242
25	Total assets			77,407		75,800
	Total liabilities (describe in Schedule O) See So			693		673
	Net assets or fund balances (line 27 of column			76,714	27	75,127
Part I	Statement of Program Service Accom Check if the organization used Schedule	• •		,		Expenses
What is	s the organization's primary exempt purpose?	See Schedule O, Sta	• •		(Re	equired for section
						1(c)(3) and 501(c)(4)
as mea	be the organization's program service accompli- asured by expenses. In a clear and concise m s benefited, and other relevant information for ea	anner, describe the				ganizations; optional for ners.)
28 <u>s</u>	ee Schedule O for Service Accomplishments					
<u>(0</u> 29	Grants \$ 0) If this amount	includes foreign gra	ints, check here .	🗌	28	a 52,437
(0	Grants \$ ) If this amount	includes foreign gra	ints, check here .	🗌	29	a
30						
<u>`</u>		includes foreign gra			30	a
	ther program services (describe in Schedule O)					
		includes foreign gra			31	
	otal program service expenses (add lines 28a				32	
Part I					nstru	uctions for Part IV)
	Check if the organization used Schedule				•	<u> []</u>
	(a) Name and title	<b>(b)</b> Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employ benefit plans, and deferred compensation	1	e) Estimated amount of other compensation
Richar	d Karlson	24.00	0		0	0
Presid						
Susan		2.00	0		0	0
Secret	· ·				_	
	son Devadhason	2.00	0		0	0
Treasu		24.00	37 500		_	
	Robins	24.00	37,500		0	0
	ive Director, Program Director & Facilitator Menser	1.00	0		0	0
	member	1.00	0		0	0
	alomino	1.00	0		0	0
	Member	1.00			Ĭ	Ŭ
		-				
					Τ	
		-				
					+	
		1				

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Part	V Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this			
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	00		
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed	33		~
54	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O. See instructions	34		V
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		~
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	05-		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	35c		<b>/</b>
00	during the year? If "Yes," complete applicable parts of Schedule N	36		~
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions <b>37a 0</b>			•
b	Did the organization file Form 1120-POL for this year?	37b		~
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were			
_	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		~
	If "Yes," complete Schedule L, Part II, and enter the total amount involved	-		
39 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities	-		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911:0; section 4912:0; section 4955:0			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	401-		
с	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed	40b		V
U	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line			
	40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40		
41		40e		V
42a	The constitution is been as in our of the transformer of the transform	10-02	1-1139	<u> </u>
		921		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		~
	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
с	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		~
-	If "Yes," enter the name of the foreign country:			-
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here			
	and enter the amount of tax-exempt interest received or accrued during the tax year			
44a	Did the organization maintain any denor advised funds during the year? If "Vee." Form 000 must be		Yes	No
74d	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		~
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44b		~
c	Did the organization receive any payments for indoor tanning services during the year?	44c		~
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	444		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	44d 45a		~
чла b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	100		•
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ. See instructions	45b		V

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			Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition			
	to candidates for public office? If "Yes," complete Schedule C, Part I	46		~

Part VI	Section 501(c)	(3) Organizations	Only
	AU 5044		_

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lin	es
50 and 51.	

	Check if the organization used Schedule O to respond to any question in this Part VI			
			Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax			
	year? If "Yes," complete Schedule C, Part II	47		~
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		~
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		~
b	If "Yes," was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	<b>(b)</b> Average hours per week devoted to position	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	
None			

f Total number of other employees paid over \$100,000 . . .

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

. .

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		
d Total number of other independent contractors each receiving	over \$100,000	

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a

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

Sign	Signature of officer			Date			
Here	Richard Karlson, President						
	Type or print name and title						
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date		Check if if self-employed	PTIN	
Use Only	Firm's name			Firm's EIN			
				Phone no.			
May the IRS	discuss this return with the prepar	er shown above? See instructions .			[	Yes	No

SCHEDULE A (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	
2023	

**Open to Public** 

		Inspection
-		

#### Name of the organization REAL LIFE SKILLS INC

Department of the Treasury Internal Revenue Service

Employer identification number
47-2171861

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

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

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

g Provide the following information about the supported organization(s)

<b>9</b>								
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
			Yes	No				
(A)								
(B)								
(C)								
(D)								
(E)								
Total								

#### Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to gualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (d) 2022 (c) 2021 (e) 2023 (f) Total Gifts, grants, contributions, and 1 membership fees received. (Do not include any "unusual grants.") . . Tax revenues levied for the 2 organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities 3 furnished by a governmental unit to the organization without charge . . . . Total. Add lines 1 through 3 . . . 4 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . **Public support.** Subtract line 5 from line 4 6 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 7 Amounts from line 4 . . . . . . 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . . Net income from unrelated business 9 activities, whether or not the business is regularly carried on . . . . . . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 12 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) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) . . . . % 14 14 15 15 % 331/3% support test-2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 16a 331/3% support test-2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check h 17a 10%-facts-and-circumstances test-2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported $\square$ b 10%-facts-and-circumstances test-2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18 instructions

### 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.)

Secti	on A. Public Support			,		/	
Calen	dar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.")	33,650	26,455	43,630	39,650	27,600	170,985
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the		- /	( <b>a</b> ) <b>a a</b>			
3	organization's tax-exempt purpose Gross receipts from activities that are not an	54,688	76,770	63,400	6,245	0	201,103
U	unrelated trade or business under section 513					23,250	23,250
4	Tax revenues levied for the					23,230	23,230
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3	88,338	103,225	107,030	45,895	50,850	395,338
/a	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
b	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	54,688	76,770	63,400	6,245	0	201,103
С	Add lines 7a and 7b	54,688	76,770	63,400	6,245	0	201,103
8	<b>Public support.</b> (Subtract line 7c from						
Sooti	line 6.)						194,235
-	dar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	(a) 2019 88,338	103,225	107,030	45,895	50,850	395,338
10a	Gross income from interest, dividends,	00,000	103,223	107,030	43,073	30,030	373,330
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
-	acquired after June 30, 1975						
с 11	Add lines 10a and 10b						
••	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
44	and 12.)	88,338	103,225	107,030	45,895	50,850	<u>395,338</u>
14	<b>14 First 5 years.</b> 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 <b>stop here</b>						
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2023 (line 8	v		3, column (f))		15	49.13 %
16							
Secti	on D. Computation of Investment In	come Percer	ntage				
17	Investment income percentage for 2023 (			-		17	0 %
18	Investment income percentage from 2022					18	0 %
19a	$33^{1/3}$ % support tests - 2023. If the organ						
Ŀ	17 is not more than $33^{1/3}$ %, check this box	-	-	-		-	
b	<b>331</b> /3% <b>support tests</b> — <b>2022.</b> If the organiz line 18 is not more than 331/3% check this l						
20	<ul> <li>line 18 is not more than 33<sup>1</sup>/<sub>3</sub>%, check this box and stop here. The organization qualifies as a publicly supported organization</li> <li>Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions</li> </ul>						
20	- mate roundation. In the organization of	a not undur a l	557 511 1110 14,	100,01100,0			(Form 990) 2023
						Schedule A	. 0111 000 2020

### 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.)

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

#### Section B. Type I Supporting Organizations

- 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, supervised, or controlled the supporting organization.

#### Section C. Type II Supporting Organizations

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

#### Section D. All Type III Supporting Organizations

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

income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

### Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- 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.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а 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.
- 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.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Yes No

1

2

1

3

2a

2b

3a

3b

Yes No

Yes No

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			ions 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
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-function	allv i	ntegrated Type III suppo	rting organization

Schedule A (Form 990) 2023

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) 2023

Schedu	le A (Form 990) 2023			Page <b>7</b>
Part	V Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organi	zations (continued)	
Sect	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e		1	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	inizations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required-	•	<i>VI</i> ) 5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2023 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	)
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required — <i>explain in Part VI</i> ). See instructions.			
3	Excess distributions carryover, if any, to 2023			
а	From 2018			
b	From 2019			
С	From 2020			
d	From 2021			
e	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	<b>Excess distributions carryover to 2024.</b> Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			
d	Excess from 2022			
e	Excess from 2023			

Schedule A (Form 990) 2023

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


# SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

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.



Employer identification number

#### REAL LIFE SKILLS INC

47-2171861

Form 990-EZ, Part III, Line (28-31) - 2023 Accomplishments: 1. We now have two active Life Skills Programs; a Secular Life Skills Course and a Faith Development Life Skills Course. Customers can choose their course, or even participate in both courses if they wish. The basic curriculum is the same with scripture content added to create a more faith-based experience for those desiring a spiritual connection. 2. In October we signed an agreement with Hope for Housing Foundation (HTHF), the non-profit arm of National CORE Renaissance, one of the largest non-profit affordable housing development corporations in the United States. They have more than 9,000 affordable housing units in five states. HTHF is a major provider of Permanent Supportive Housing in the San Diego. We are pleased to be partnering with HTHF by providing coaching and life skills services to participants in their Collaborative Housing Retention Intervention Program (CHRIP). 3. We recently received news that we will be offered a new two-year contract with the San Diego Housing Commission to provide our Online Life Skills Course with Coaching, in both individual and group settings. This a special workforce initiative grant that will serve two training groups of 20 youth per year, or 80 over the two-year program. The end goal for the program is for participants to earn Medical Assistant certification at the end of the program. Our role is to help the participants increase their life skills competencies and to provide coaching and support on a 1-1 and group setting, to provide support throughout the certification program. 4. We continue to partner with and develop programs for Project W.E.S.T., a Transformation Living Program providing housing and drug and alcohol sober living support services East County. 5. East County Transitional Living Center (ECTLC) is a premier transitional housing facility in El Cajon. We have met the CEO to discuss the potential for collaboration. She immediately understood our cognitive behavior approach and expressed her enthusiastic interest in both courses and wants to partner with Real Life Skills at ECTLC. 6. The Faith Life Skills Course was first introduced and developed for the Wednesday Ladle Bible Study and Fellowship offered by the First Presbyterian Church of San Diego. The Ladle Director has since resigned and the program is on hold until a new Director is hired. In the meantime, the Choir director, has expressed an interest in the Faith program for his homeless choir. The Ladle experience allowed us to pilot the Faith program and to develop and test out the curriculum. We now can use that curriculum with other service providers. A New Chapter for Real Life Skills Our research this year provided important learnings to jumpstart our programs. We have learned from our customers and advisors that we needed to: 1. Provide facilitators and coaches for our Online Life Skills courses. Since COVID it has been a challenge to replicate the success of the live in- person classes via a virtual platform. While agencies recognize the importance of Life Skills education for its clients, there are some challenges that require discipline and the need to coaching and the fostering of encouragement throughout the curriculum which can be a barrier for some in completing the course or for maximizing its benefit. In most cases it is offered as choice and needs to be reinforced with facilitators who are former graduates of the program, that can explain the benefits from taking the course. In time, and with proper training, it is our belief that program graduates from agencies having lived experiences will become the best facilitators and coaches. 2. Offer Customized content to meet the diverse needs of the populations we serve. This content will be further developed as we start providing services to various populations and are able to better assess the needs of each population. We anticipate there will be unique differences between transitional age youth (TAY), seniors, those with substance abuse histories, chronically homeless and veterans. Some might benefit more from the Secular versus Faith based curricula. For example, participants in the CHRIP permanent supportive housing programs often struggle with managing their finances, behaviors relating to their mental health, or lack the understanding of what it takes to be a good tenant and neighbor. Transitional Youth need consistent support and training for and access to jobs. Seniors may need to learn how to use computers. We expect to play an important role in identifying, developing or partnering with other providers, to deliver the content that will help each person have success. This information will also help us develop our program offerings and position Real Life Skills to be competitive for funding opportunities. This year we integrated our core curriculum and coaching program using software technology that has the capability to link real time live coaching with a program coach, to participants to enhance their life skills learning experience. We have also added QR codes for students to have easy access to our courses. It is these changes that have made it possible to attract our new customers and to provide a better array of services that are more likely to meet each participant's needs. We continue to work with agencies that serve individuals, transition aged youth, and families who are homeless, in transition, participating in drug & alcohol rehabilitation, and those living in poverty, seeking better job opportunities. We seek to collaborate with organizations that recognize the importance of educating clients in life skills, using cognitive behavior theory to disrupt negative thought patterns, and those willing to offer an ongoing educational program for their clients. Our goals for 2024 are: 1. Have a successful implementation of our Life Skills program with coaching with our new major customers, which will provide \$40,000 annually in revenue, to serve 32 students. 2. Add part-time staffing resources of Coaches and Facilitators. James Robins, our Executive Director will be hiring and leading a team of former graduates as coaches. 3. Pursue collaboration with agencies that include Urban Street Angels, City Tree School, Walk with me Program, and Be a Friend program. 4. Continue to develop program services and components

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

Schedule O, Statement 1	<b>REAL LIFE SKILLS INC</b>
Form: Form 990-EZ (2023)	EIN: <b>47-2171861</b>
Page: 1	Part I, Line 16
Other Expenses Structured Explanation	
Description	Amount
Insurance	3,497
Compute and Internet services	4,192
Office expenses	147
Business Licenses	25
Total:	7,861

Schedule O, Statement 2	REAL LIFE SKILLS INC
Form: Form 990-EZ (2023)	EIN: <b>47-2171861</b>
Page: 2	Part II, Line 24
Other Assets Structured Explanation	
Description	EOY Amount
Workman's Comp Deposit	242

242

Total:

Schedule O, Statement 3	REAL LIFE SKILLS INC
Form: Form 990-EZ (2023)	EIN: <b>47-2171861</b>
Page: 2	Part II, Line 26
Other Liabilities Struc	ured Explanation
Description	EOY Amount
Payroll taxes	673

673

Total:

Form: Form 990-EZ (2023)

Page: 2

#### **Primary Exempt Purpose**

#### Primary Exempt Purpose

Our purpose is to restore hope to those dealing with life challenges, resurrect lost self-esteem, and re-ignite the desire to become the best version of themselves. We do this by teaching a self-improvement program in eight dynamic one hour classes on the power of thinking and provide a clear understanding of how life choices are made. This introduces a new valuable education experience, utilizing the cognitive behavior theory approach for those in need focused on developing a new mindset that can provide a path to a better life. Our strategic focus is directed to help agencies that serve the homeless, the homeless in transition, parolees, drug & alcohol recovery, transitional youth, and low -income families seeking better job opportunities.

Part III