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/Form990 for instructions and the latest information. For the 2023 calandar year, or tax year beginning

OMB No. 1545-0047 Open to Public

inspection

Department of the Treasury internal Revenue Service

C Name of organization

Check if

2023

and ending MAR 31,

APR 1,

D Employer identification number Address THE MIRACLE FOUNDATION, INC. Name Doing business as 74-2989580 Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite Final return/ termin sted E Telephone number 1506 W. 6TH STREET 512-329-8635 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amende 4,816.823. AUSTIN, TX 78703 Applica tion pending H(a) is this a group return F Name and address of principal officer: LESLIE BEASLEY for subordinates? SAME AS C ABOVE Yes X No H(b) Are all subordinates included? Tax-exempt status: X 501(c)(3) Yes No 501(c) ((insert no.) 4947(a)(1) or If "No," attach a list. See instructions www.miraclefoundation.org J Website: H(c) Group exemption number Form of organization: X Corporation Trust Association Year of formation: 2000 M State of legal domicile; TX Summary Briefly describe the organization's mission or most significant activities: A FAMILY FOR EVERY CHILD IN OUR Governance LIFETIME. If the organization discontinued its operations or disposed of more than 25% of its net assets Check this box Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 10 Activities & Total number of individuals employed in calendar year 2023 (Part V, line 2a) 4 8 5 22 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 8 8 0. b Net unrelated business taxable income from Form 990-T, Part I, line 11 7a 0. Prior Year Current Year Contributions and grants (Part VIII, line 1h) Revenue 5,116,140. 4,685,971 Program service revenue (Part VIII, line 2g) 0. 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 106,001. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 130,295 400. 557. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 5,222,541. 4,816,823 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 958,336. 339,876. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 931 497 2,898,257. 16a Professional fundralsing fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX. column (D), line 25) 549,819. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,738,660. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,898,213. 4,628,493. 5,136,346. Revenue less expenses. Subtract line 18 from line 12 594,048. Assets or Balances 319,523. Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 4,616,628. 4,339,295. 21 Total liabilities (Part X, line 26) Net 393,376. 381,989. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block 223,252. 3,957,306. 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. Signature of officer Sign Here LESLIE BEASLEY Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Chack CATHERINE AVENSON Paid P01259734 Preparer seit-employed AVENSON HAMANN CPAS Firm's EIN 46-3330935 Use Only Firm's address 7421 BURNET ROAD AUSTIN, TX 78757 Phone no. 512-693-9131 May the IRS discuss this return with the preparer shown above? See instructions X Yes LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)

Pa	74-2989580 Page 2
	Check if Schedule O contains a response
1	Briefly describe the organization's mission: A FAMILY FOR EVERY CHILD IN OUR LIFETIME.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No
3	If "Yes," describe these new services on Schedule O.
•	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	Code:)(Expenses \$1,471,137. including grants of \$30,589.) (Revenue \$57. PREVENT CHILDREN FROM ENTERING THE SYSTEM IN THE FIRST PLACE. EVERY DAY AROUND THE WORLD, SOCIAL WORKERS, CAREGIVERS AND GOVERNMENT OFFICIALS MAKE DECISIONS THAT IMPACT MILLIONS OF VULNERABLE CHILDREN. ALONG WITH UNICEF AND OTHER PARTNERS, WE PROVIDE HIGHLY SPECIALIZED TRAINING AND EDUCATIONAL RESOURCES FOR THESE "BOOTS ON THE GROUND"
	WORKERS IN THE CHILDCARE ECOSYSTEM.
	THROUGH THIS COLLABORATION AND OUR SCALEABLE TECHNOLOGIES, MIRACLE FOUNDATION HAS TRAINED MORE THAN 6,036 GOVERNMENT OFFICIALS AND CAREGIVERS AND ACTIVATED COMMUNITY AND YOUTH LED INITIATIVES. ALL OF THIS OUTREACH WORKS TO IDENTIFY AND SUPPORT AT-RISK CHILDREN LONG
4b	BEFORE FORMAL INTERVENTIONS ARE NECESSARY. (Code:) (Expenses \$1,393,930. including grants of \$27,717.) (Revenue \$
	WE UNITE CHILDREN WITH FAMILIES. CHILDREN WANT TO GROW UP IN A FAMILY, AND EACH OF THEM HAVE THE RIGHT TO A SAFE, STABLE, AND PERMANENT HOME. EACH CHILD'S JOURNEY HOME IS UNIQUE, AS WE LEAD THE TRANSITION OF CHILDREN AWAY FROM INSTITUTIONS, OUR JOB IS TO MAKE SURE THIS WORK IS DONE IN A SAFE, STABLE, AND PERMANENT WAY. TO FACILITATE THIS, WE USE OUR THRIVE SCALE METHODOLOGY TO MEASURE AND ACTIVATE A CHILD'S RIGHTS AND STRENGTHEN THEIR FAMILY TO ENSURE THEY STAY TOGETHER.
4c	(Code:) (Expenses \$ 1,260,178. including grants of \$ 81,570.) (Revenue \$) ENSURE CHILDREN GROW UP IN A SAFE, STABLE FAMILY.
	WE WORK TIRELESSLY TO HELP STABILIZE CHILDREN WHILE THEY AWAIT A FOREVER HOME. WE USE DATA TO DRIVE OUR DECISIONS AND ENSURE THAT ALL CHILDREN THRIVE, OUR LEADING-EDGE THRIVEWELL SOFTWARE OFFERS A
	REVOLUTIONARY AND WELCOME CHANGE TO THE US FOSTER CARE SYSTEM. OUR WORK IN FOSTER CARE HELPS STREAMLINE COMMUNICATIONS, SIMPLIFIES THE
	REPORTING PROCESS, HELPS FAMILIES AND HELPS CHILDREN AVOID THE PAINFUL PROCESS OF BEING MOVED FROM HOME TO HOME. SECONDLY, OUR PROPRIETARY THRIVE SCALE METHODOLOGY ALLOWS US TO MEASURE PROGRESS AND ASSESS RISK AT EVERY STAGE OF OUR WORK. DEVELOPED OVER THE PAST TWO DECADES, THIS ONE-OF-A-KIND TOOL IS TAKING THE GUESSWORK OUT OF CHILD CARE AND HAS PROPELLED MIRACLE FOUNDATION INTO A GLORAL MONDROLLE OF CANALANTEED.
4d	PROPELLED MIRACLE FOUNDATION INTO A GLOBAL NONPROFIT ORGANIZATION FOR Other program services (Describe on Schedule O.)
46	(Expenses \$ including grants of \$) (Revenue \$)
40	Total program service expenses 4,125,245.
	Form 990 (2023)

11260715 146917 MIRACLE

Part IV Checklist of Required Schedules

4	In the eventional of the state		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
2	If "Yes," complete Schedule A	1	X	
3	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
0	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
4	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
E	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space.			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	Angel I		
	as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	IIa		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	-110		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
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	110		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	12.0		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D. Parts XI and XII is optional	12b	x	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? 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	- 1.00		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	x	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			_
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I, See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	11		
	1c and 8a? If "Yes," complete Schedule G, Part II	40		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	18		21
1815	complete Schedule G, Part III	10		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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Form 990 (2023) THE MIRACLE FOUNDATION, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			100000
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Α
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):	1000		
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		v
	"Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
C	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	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
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	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	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			37
	If "Yes," complete Schedule R, Part V, line 2	36	+	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	_	X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	x	
Pa	Note: All Form 990 filers are required to complete Schedule 0 rt V Statements Regarding Other IRS Filings and Tax Compliance	36	Λ	
	Check if Schedule O contains a response or note to any line in this Part V			
_	Oneck it Schedule O contains a response of note to any line in this Part V		V	No
4.0	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter 0-1 not applicable 1b C	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	10		
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Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V 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 22 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X 3a b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a b If "Yes." enter the name of the foreign country INDIA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5a **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? X 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X 7c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? N/A **7**g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? N/A 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? N/A 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A 9b Section 501(c)(7) organizations. Enter: a 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 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders N/A Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? N/A 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 organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? X 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? X 15 If "Yes," see the instructions and file Form 4720, Schedule N. 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. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A If "Yes," complete Form 6069.

Form 990 (2023)

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 10 1a 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 8 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee, or key employee? X 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? X 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? X 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a **b** Each committee with authority to act on behalf of the governing body? X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? X 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? X 13 Did the organization have a written document retention and destruction policy? 14 X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records THE MIRACLE FOUNDATION, INC. - 512-329-8635 1506 W. 6TH STREET, AUSTIN, TX 78703

Form 990 (2023)

Form 990 (2023) THE MIRAC	CLE FOUN	IDA	TI	ON	Ι,	IN	C.		74-298	3958	8.0	Page 8
Part VII Section A. Officers, Directors, Trust	tees, Key Emp	oloy	ees,	and	d Hig	ghes	t C	ompensated Employee	S (continued)			r age o
(A)	(B)			((C)			(D)	(E)	\neg	/ 100	
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1b Subtotal								835,773.	0		34 (596.
c Total from continuation sheets to Part VII,	Section A							0.	0		01/	0.
d Total (add lines 1b and 1c)								835,773.			31 6	596.
2 Total number of individuals (including but no	t limited to the	sel	iste	d ab	ovel	who	rec	ceived more than \$100 (00 of reportable	•	34,0	790.
compensation from the organization	a miniod to the	,00	10101	u ab	ove,	WIII	160	ceived more triair \$100,0	ou of reportable			6
- Janearo											I V	6
3 Did the organization list any former officer		- 10	2 0								Yes	No
	director, truste	e, K	ey e	mpio	oyee	, or	nigh	nest compensated emplo	oyee on			
line 1a? If "Yes," complete Schedule J for su										_3	3	X
4 For any individual listed on line 1a, is the sur	n of reportable	COL	mpe	nsat	ion a	and	othe	er compensation from th	e organization			
and related organizations greater than \$150,	000? If "Yes."	cor	nple	te S	chec	dule	J fo	or such individual		4	X	
blu any person listed on line ta receive or ac	crue compens	satio	on fro	om a	any L	unre	ate	d organization or individu	ual for services			100
rendered to the organization? If "Yes." comp	olete Schedule	J fo	or su	ch p	erso	on				. 5	5	X
Section B. Independent Contractors				- 00								
1 Complete this table for your five highest com	pensated inde	per	nden	t co	ntra	ctors	tha	at received more than \$1	00 000 of compen	sation	from	
the organization. Report compensation for the	ne calendar ve	ar er	ndin	a wit	th or	r wit	nin 1	the organization's tay ve	ar	Sation	HOIII	
(A)				9 1111		*****	T	550.50	ar.		101	
Name and business a	address							(B) Description of se	nicos	Com	(C)	
INAPP, 999 COMMERCIAL ST,	CIITME '	21 (2	T) 7	TC	_	+	Description of se	vices	Com	pensati	on
ALTO CA 04303	POLIT	ST(Ι,	PF	TIC)	L					
ALTO, CA 94303							A	APP DEVELOPME	NT	4	85,6	00.
							T					
							+					
							+					
2 Total number of independent												
2 Total number of independent contractors (inc	cluding but no	lim.	ited	to th	2000	lieta	ad a	shovel who received may	o than			

\$100,000 of compensation from the organization

Part VIII Statement of Revenue

		Check if Schedule O	cont	ains a resp	onse	or note to any I	ine in this Part VIII			
							(A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenue excluded
								function revenue	business revenue	from tax under
ts ts	1 a	Federated campaigns		1a			parameter and the same			sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	k	Membership dues								
9		Fundraising events								
ifts		Doloted assessment		100000000000000000000000000000000000000						
D is	,	Government grants (contr								
Sin										
utic er	f	girtoj								
iệ t		similar amounts not included			4,	685,971.				
od bu	9	Noncash contributions included in	lines 1	1a-1f 1g	\$	2,946.				
ŭ ë	h	Total. Add lines 1a-1f					4,685,971.			
						Business Code				
9	2 a				-					
e vi	b									
S	С									
am	d									
og B	е									
Program Service Revenue	f	All other program service	reve	nue						
	0									
	3	Investment income (include								
						45 SO 40 C 50 C 1 45 C 45 C	130,295.			120 005
	4	* *************************************			130,293.			130,295.		
	5	Royalties			na p	roceeds				
	•	rioyanes		(i) Rea	1	(ii) Personal				
		0		(i) Nea	ı	(II) Personal				
	6 a	***************************************	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6c							
	d	Net rental income or (loss)								
	7 a	Gross amount from sales of		(i) Securit	ties	(ii) Other				
		assets other than inventory	7a							
	b	Less: cost or other basis								
an l		and sales expenses	7b							
Ve	C	Gain or (loss)	7c							
Re	d	Net gain or (loss)								
ther Revenue	8 a	Gross income from fundraisir	ng ev	ents (not						
ㅎ		including \$								
		contributions reported on								
- 1					8a					
- 1	b	Less: direct expenses			8b					
	C	Net income or (loss) from t			nts					
	9 a	Gross income from gaming	g act	tivities. See						
- 1		Part IV, line 19			9a					
	b	Less: direct expenses			9b					
		Net income or (loss) from g								
		Gross sales of inventory, le			<u>"</u>					
	a				**					
	h	and allowances Less: cost of goods sold			10a					
		Net income or (loss) from s								
\dashv	U	reacting of (loss) from s	ales	oi inventoi	у	Business Code				
Sn	14 -	OTHER INCOME					FFF			
e e		OTHER INCOME			_	900099	557.	557.		
Miscellaneous Revenue	b				_					
3ev	С				_					
Σ	d	All other revenue		*************						
		Total. Add lines 11a-11d					557.		Walters Olive	學所言這樣的
	12	Total revenue. See instruction	ns		******		4,816,823.	557.	0.	130,295.

Part IX | Statement of Functional Expenses

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		e or note to any line in the (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		OXPOINGS	general expenses	6Aperises
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	339,876.	339,876.		
1	Benefits paid to or for members	33370700	33370701		
5	Compensation of current officers, directors,				
	trustees, and key employees	523,537.	378,020.	121,990.	23,527
3	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,010,695.	1,472,698.	216,492.	321,505
В	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	29,527.	20,250.	2,132.	7,145
9	Other employee benefits	196,383.	143,123.	26,312.	26,948
0	Payroll taxes	138,115.	91,890.	20,518.	25,707
1	Fees for services (nonemployees):				
a	Management				
b	Legal	532.	389.	73.	70
C	Accounting	74,498.	51,613.	10,709.	12,176
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g		0 500 100000	2000 000		
	column (A), amount, list line 11g expenses on Sch O.)	195,156.	155,403.	22,988.	16,765
2	Advertising and promotion	75,307.	2,500.	14 014	72,807
3	Office expenses	134,796.	108,401.	14,814.	11,581
4	Information technology	23,346.	23,346.		
5	Royalties	44 600	10 616	2 262	012
6	Occupancy	44,692.	40,616.	3,263.	813
7	Travel	144,731.	135,156.	863.	8,712
8	Payments of travel or entertainment expenses	1			
9	for any federal, state, or local public officials Conferences, conventions, and meetings	50,347.	49,050.	576.	721
0	Interest	3,522.	2,359.	516.	647
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	15,765.	10,489.	2,342.	2,934
3	Insurance	5,249.	3,492.	780.	977
4	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.)	E77 110	E77 110		
a		577,110.	577,110.		
b	PARTNER PROGRAM COSTS PREVENTION & TRANSITION	362,848. 96,624.	362,848. 96,624.		
C	COMPTIMED AND TAMEDATEM	57,365.	37,168.	9,799.	10,398
d		36,325.	22,824.	7,115.	6,386
e 5	Total functional expenses. Add lines 1 through 24e	5,136,346.	4,125,245.	461,282.	549,819
6	Joint costs. Complete this line only if the organization	3/130/340.	1/10/01010	201/2020	3-27,013
.0					
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

		Check if Schedule O contains a response or no	te to any l	ine in this Part X			
_	_				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	553,938.	1	855,714		
	2	Savings and temporary cash investments	981,495.	2	1,107,883		
	3	Pleages and grants receivable, net			3	***************************************	
	4	Accounts receivable, net			1,488.	4	1,200
-1	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	tantial con	tributor, or 35%			
		controlled entity or family member of any of the				5	
	6	Loans and other receivables from other disqual	ified perso	ns (as defined			
		under section 4958(f)(1)), and persons describe	d in section	n 4958(c)(3)(B)		6	
ets	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges	.,		23,641.	9	44,457
1	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	632,145.			
	b	Less: accumulated depreciation	10b	154,684.	485,376.	10c	477,461
1	11	Investments - publicly traded securities	2,433,362.	11	1,728,217		
1	12	Investments - other securities. See Part IV, line		12			
1	13	Investments - program-related. See Part IV, line		13			
1	14	Intangible assets	20270000	622.	14		
1	15	Other assets. See Part IV, line 11			136,706.	15	124,363
1	16	Total assets. Add lines 1 through 15 (must equ	al line 33)		4,616,628.	16	4,339,295
1	17	Accounts payable and accrued expenses			254,215.	17	218,193
1	8	Grants payable		18			
1	19	Deferred revenue	19,519.	19	57,373		
2	20	Tax-exempt bond liabilities			20		
2	21	Escrow or custodial account liability. Complete	Part IV of	Schedule D		21	
s 2	22	Loans and other payables to any current or form	ner officer,	director,			
		trustee, key employee, creator or founder, subs	tantial con	tributor, or 35%			
Liabilities		controlled entity or family member of any of the				22	
- 2		Secured mortgages and notes payable to unrela				23	
10000		Unsecured notes and loans payable to unrelate	d third par	ties		24	
2	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	3 17-24). C	omplete Part X			
100		of Schedule D			119,642.	25	106,423
2	26	Total liabilities. Add lines 17 through 25			393,376.	26	381,989
8		Organizations that follow FASB ASC 958, che	ck here	X			
م ا مو	7	and complete lines 27, 28, 32, and 33.			2 125 222		
2 2		N. A. M.			3,135,039.	27	2,963,862
2 2					1,088,213.	28	993,444
5		Organizations that do not follow FASB ASC 9	58, check	here			
5		and complete lines 29 through 33.					
2	9	Capital stock or trust principal, or current funds				29	
3	U	Paid-in or capital surplus, or land, building, or ed	quipment f	und		30	
Net Assets of Fund Balances	1	Retained earnings, endowment, accumulated in	come, or c	other funds		31	
1000	2	Total net assets or fund balances			4,223,252.	32	3,957,306
3	3	Total liabilities and net assets/fund balances			4,616,628.	33	4,339,295.

Form 990 (2023)

Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990:	Pa	TYI Decembilistics of No. 1	/ **	2303300	Pa	age 12
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 9 Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements complied or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis. Consolidated basis, or both: Separate basis Consolidated basis, or both: Separate basis Econsolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis consolidated basis, or both: Separate basis Consolidated basis. Both consolidated and separate basis c If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. c If "Yes," to line 2 a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to under	га					
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 9 Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements complied or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis. Consolidated basis, or both: Separate basis Consolidated basis, or both: Separate basis Econsolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis consolidated basis, or both: Separate basis Consolidated basis. Both consolidated and separate basis c If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. c If "Yes," to line 2 a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to under		Check if Schedule O contains a response or note to any line in this Part XI				X
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990:						- Control of the Cont
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990:	1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,81	6.8	23.
A Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990:	2	Total expenses (must equal Part IX, column (A), line 25)	2	5,13		
A Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: CashX Accrual Other	3	Revenue less expenses. Subtract line 2 from line 1	3			23.
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 Part XII Financial Statements and Reporting 10 Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990:	4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,22	-	
Donated services and use of facilities 6 7	5	Net unrealized gains (losses) on investments				95.
7 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis Both consolidated and separate basis. consolidated basis, or both: Separate basis X Consolidated basis Both consolidated and separate basis consolidated basis Or both: Separate basis X Consolidated basis Both consolidated and separate basis consolidated basis or both: Separate basis X Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 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? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	6	Donated services and use of facilities	6			
9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 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 O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 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? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	7	Investment expenses	7			
9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	8	Prior period adjustments				
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Column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990:	10				0 / 0	02.
Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: CashX Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis consolidated basis Both consolidated and separate basis consolidated basis Separate basis Separate basis Both consolidated and separate basis consolidated basis Both consolidated and separate basis consolidated basis Separate basis Separate basis Separate basis Separate basis Separate basis Both consolidated and separate basis consolidated basis Both consolidated and separate basis Se		column (B))	10	3,95	7.3	06.
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis X Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 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? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	Par	t XII Financial Statements and Reporting	10	3/33	,,,	00.
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis X Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 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? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit		Check if Schedule O contains a response or note to any line in this Part XII				
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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? 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: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 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? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit		If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			A
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 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? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit 			odulo C		41	
Uniform Guidance, 2 C.F.R. Part 200, Subpart F? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	За	As a result of a federal award, was the organization required to undergo an audit or audite as set forth in the	edule C		NOTE:	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit		Helford Oridan COED B 1999 O. 1				x
or audits, explain why on Schedule O and describe any steps taken to undergo such audits	b		red aud	3a		1
		or audits, explain why on Schedule O and describe any steps taken to undergo such audits	ou aud	3b		
		The state of the s			990	(2023)

SCHEDULE A (Form 990)

Department of the Treasury

Internal Revenue Service

Total

Complete i

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 Employer identification number THE MIRACLE FOUNDATION, INC. 74-2989580 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.) 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization listed (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

332021 12-21-23

Schedule A (Form 990) 2023 Part II Support Schedule 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

Se	ction A. Public Support	s listed below, plea	ise complete Part I	11.)			
Cale	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(a) 2002	(0 T-1-1
	Gifts, grants, contributions, and		(2) 2020	(0) 2021	(u) 2022	(e) 2023	(f) Total
	membership fees received. (Do not						
	include any "unusual grants.")	3686493.	4003900.	3668962.	5116140.	1695071	01161466
2	Tax revenues levied for the organ-		10000000	3000302.	3110140.	40059/1.	21161466.
	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						
4	Total. Add lines 1 through 3	3686493.	4003900.	3668962.	5116140.	4685971	21161466.
5				3000302.	3110140.	4003371.	21101400.
	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)						4641575.
6	Public support. Subtract line 5 from line 4.						16519891.
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	3686493.	4003900.	3668962.	5116140.		21161466.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
72	and income from similar sources	41,740.	50,015.	62,874.	106,001.	130,295.	390,925.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital		265				
	assets (Explain in Part VI.)		365.		400.	557.	1,322. 21553713.
	Total support. Add lines 7 through 10 Gross receipts from related activities,	oto (ooo inatrustia					
	First 5 years. If the Form 990 is for the					12	30,600.
13	organization, check this box and stor	here	st, second, third, t	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
Se	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2023 (li		THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED	column (fl)		14	76.65 %
15	Public support percentage from 2022	Schedule A. Part I	II. line 14	0.0.1111 (1))		15	78.04 %
16a	33 1/3% support test - 2023. If the c	organization did no	t check the box or	line 13, and line 1	4 is 33 1/3% or m	ore check this box	and
	stop here. The organization qualifies	as a publicly suppo	orted organization				
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	
	and stop here. The organization quali			*!	***************************************		
17a	10% -facts-and-circumstances test	- 2023. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more.
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organization	n qualifies as a pul	blicly supported or	ganization	3-1112	
b	10% -facts-and-circumstances test					7a, and line 15 is	0% or
	more, and if the organization meets th	e facts-and-circum	stances test, chec	k this box and st	op here. Explain ir	Part VI how the	removitions.
	organization meets the facts-and-circu	imstances test. The	e organization qua	lifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	, 16b, 17a, or 17b	, check this box ar	nd see instructions	

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 THE MIRACLE FOUNDATION, INC.

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

Se	ction A. Public Support	elow, please com	plete Part II.)				
Cal	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(4) 2000	(-) 0000	
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(4) 20.10	(5) 2020	(C) 2021	(d) 2022	(e) 2023	(f) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or 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 furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disqualified persons					-	
	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						
(Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						(1) 10101
	dross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	organization's fir	rst, second, third, f	ourth, or fifth tax y	ear as a section	501(c)(3) organizatio	n,
Sec	check this box and stop heretion C. Computation of Public	Support Per	centage	***************************************			
	Public support percentage for 2023 (lin			olumn (6)		1.0	
16	Public support percentage from 2022 \$	Schedule A Part	III line 15	olumn (t))	***************************************	15	%
Sec	tion D. Computation of Invest	ment Income	Percentage			16	%
17	Investment income percentage for 202	23 (line 10c, colun	nn (f), divided by lir	ne 13. column (fl)		17	9/
18	Investment income percentage from 2	022 Schedule A,	Dark III Line 47			18	<u>%</u>
19a	33 1/3% support tests - 2023. If the o	organization did n	ot check the box o	n line 14, and line	15 is more than 3	33 1/3% and line 17	is not
	more than 33 1/3%, check this box and	stop here. The	organization qualif	ies as a publicly su	upported organiza	ation	13 1100
b	33 1/3% support tests - 2022. If the c	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is me	ore than 33 1/3% ar	d
	line 18 is not more than 33 1/3%, check	k this box and sto	op here. The organ	nization qualifies a	s a publicly suppo	orted organization	
20	Private foundation. If the organization	did not check a l	box on line 14, 19a	, or 19b, check thi	is box and see ins	structions	H
33202	3 12-21-23						

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

	,,		v	
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
	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.	1		
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).	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.	За		
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.	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)		No. of the last	
42	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If	3c		
4a				
h	"Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		Tel Art
D	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.	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination	40		
	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.	4c		
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).	5a		
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?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	5c		
•	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.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			this.
	(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).	7		
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).	8		
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	To Harring		
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
D	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.	CI	Desire Control	
C	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	9b		
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
l0a	Was the organization subject to the excess business holdings rules of section 4943 because of section	30	S ME	
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	saling 18		
	determine whether the organization had excess business holdings.)	10b		

1 6	Supporting Organizations (continued)			ago (
			Yes	No
11	any of the following persons?	12013	100	110
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			100
	The below, the governing body of a supported organization?	11a		
D	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			1
_	detail in Part VI. Stion B. Type I Supporting Organizations	11c		
-	alon b. Type i Supporting Organizations			
1	Did the governing body, marriage of the		Yes	No
	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)			
	on details operated, supervised, or controlled the organization's activities if the organization had more than any			Make
	organization, describe now the powers to appoint and/or remove officers directors or trustees were alleged as			123
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	1		
	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,			
	SUDERVISED or controlled the supporting organization			
Sec	tion C. Type II Supporting Organizations	2		
	7)			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		Yes	No
	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)	1000	LEAN TO	
Sec	tion 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		103	140
	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	ESTONE STATE		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
2	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			
Sec	supported organizations played in this regard.	3		
1	tion E. Type III Functionally Integrated Supporting Organizations			
a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions 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.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in Activities Test. Appears lines 2s and 0b below.			
2	Activities Test. Answer lines 2a and 2b below.	struction		1990
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		Yes	No
	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.	0-		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	2a		
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			100
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	26	-	

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Schedule A (Form 990) 2023

Current Year

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

Net value of non-exempt-use assets (subtract line 4 from line 3)

Adjusted net income for prior year (from Section A, line 8, column A)

Minimum asset amount for prior year (from Section B, line 8, column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Multiply line 5 by 0.035.

Section C - Distributable Amount

Enter greater of line 2 or line 3

instructions).

Income tax imposed in prior year

Enter 0.85 of line 1.

Recoveries of prior-year distributions

Minimum Asset Amount (add line 7 to line 6)

emergency temporary reduction (see instructions).

7

8

2

000	tion D - Distributions		inizations (continue		O
1	Amounts paid to supported organizations to accomplish exe	empt purposes		4	Current Year
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		1	
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pl	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which to	he organization is responsive		-	
	(provide details in Part VI). See instructions.	and a second to toop of lot of			
9	Distributable amount for 2023 from Section C, line 6			8	
10	Line 8 amount divided by line 9 amount			9	
Sec	tion 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 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023		ESTABLIST CALLS OF THE		
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount		Name of Street, Street		
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
С	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, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				

Schedule A (Form 990) 2023

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Schedule B (Form 990) (2023)

Name of the organization Employer identification number THE MIRACLE FOUNDATION, INC. 74-2989580 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filling 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) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Employer identification number

THE MIRACLE FOUNDATION, INC.

74-2989580

Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>1,511,614.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$ <u>313,143.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3 .		\$\$221,998.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4 -		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5 -		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6 -		\$\$\$	Person X Payroll

Employer identification number

THE	MIRACLE	FOUNDATION,	INC.
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74-2989580

Part I	Contributors (see instructions). Use duplicate copies of Part I		4-2909380
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$	Person X Payroll
(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
23452 12-26-2	92	\$	Person Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2023)

Employer identification number

THE MIRACLE FOUNDATION, INC.

74-2989580

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
_		\$			
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		s			
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		 \$			
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
_					
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
-					
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
-					

Schedule B (Form 990) (2023) Page 4 Name of organization Employer identification number THE MIRACLE FOUNDATION, INC. 74-2989580 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4

Part I	(b) Full pose of grit	(c) Use of gift	(d) Description of how gift is held
_			
		(e) Transfer of gift	
	Transferee's name, address, and Z	P + 4	Relationship of transferor to transferee
(a) No.			

(c) Use of gift

(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

(d) Description of how gift is held

Relationship of transferor to transferee

(a) No.

from

Part I

(b) Purpose of gift

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

2023
Open to Public Inspection

Name of the organization

THE MIRACLE FOUNDATION, INC.

Employer identification number

Pa		d Funds or Other Similar Funds	or Accour	74-2989580
	organization answered "Yes" on Form 990, Part IV, lin	e 6.		
	Total acceptant of a	(a) Donor advised funds	(b) Fun	ds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in a	writing that the assets held in donor advise	ed funds	
6	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
0	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	ised only	
	for charitable purposes and not for the benefit of the donor o impermissible private benefit?			
Pa	t II Conservation Easements. Complete if the org	panization answered "Ves" on Form 990. P	Part IV line 7	Yes No
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	artiv, iii e 7.	
	Preservation of land for public use (for example, recreation		a historically	important land area
	Protection of natural habitat	Preservation of		
	Preservation of open space	Freservation of	a certified his	storic structure
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of	f a consensa	tion accoment on the leat
	day of the tax year.	os solido valor donabation in the form o	a conserva	Held at the End of the Tax Year
а	Total number of conservation easements		2a	THOSE OF THE TEXT TO AT
b				
С	Number of conservation easements on a certified historic stru	ucture included on line 2a		
d	Number of conservation easements included on line 2c acqui			
	on a historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization	during the tax
	year			
4	Number of states where property subject to conservation eas			
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of		
^	violations, and enforcement of the conservation easements it			Yes No
ь	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation ease	ments during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations and enforcing conservation	on easement	te during the year
		and officially and officially consolvati	on oasemen	is during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170(h)((4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense s	tatement and	d
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial statemen	nts that desc	ribes the
Par	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	And Illinday in 1 Ton Oil		
I GI		Art, Historical Treasures, or Oth	ier Similai	r Assets.
_	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under FASB ASC 956	8, not to report in its revenue statement an	d balance sh	neet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fur	therance of p	public
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describes these items		
D	If the organization elected, as permitted under FASB ASC 956	8, to report in its revenue statement and ba	alance sheet	works of
	art, historical treasures, or other similar assets held for public provide the following amounts relating to these items.	exhibition, education, or research in further	erance of pub	olic service,
	(1) 1 1 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2			
2	If the organization received or held works of art, historical trea	source or other similar secrets for figure sign		
_	the following amounts required to be reported under FASB AS	SO 059 relation to the result.	gain, provide	
а	Revenue included on Form 990 Part VIII line 1	50 956 relating to these items:		
	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X			
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2023
		non-realist water		Jone Guille D (FUIII 990) 2023

332051 09-28-23

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

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land		316,048.		316,048.
b	Buildings		88,836.	22,546.	66,290.
С	Leasehold improvements				
d	Equipment		51,353.	47,671.	3,682.
е	Other		175,908.	84,467.	91,441.
	I. Add lines 1a through 1e. (Column (d) must equa	Form 990 Part X line 1	Oc column (R))		477,461.

Schedule D (Form 990) 2023

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

Part X Other Liabilities

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	OPERATING LEASE LIABILITY	106,423.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990. Part X. line 25. col. (B))	106,423.

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

Schedule D (Form 990) 2023

Sche	dule D (Form 990) 2023 THE MIRACLE FOUNDATION, INC.	74-	2989580	Page 4
Par	T XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return		rage .
	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	4,932,	316.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments 2a 49,8	395.		
b	Donated services and use of facilities 2b 65,5			
C	Recoveries of prior year grants 2c			
d	Other (Describe in Part XIII.)	THE C		
е	Add lines 2a through 2d	2e	115	493.
3	Subtract line 2e from line 1	3	4,816,	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3	4,010,	025.
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b	40		0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	4c	4,816,	0.
	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses	nor Potur	4,810,	823.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	per netur	n	
1	Total expenses and lesses never additional fire solid total expenses never additional		F 004	0.4.4
2	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	1	5,201,	944.
2		00		
b	Donated services and use of facilities 2a 65,5	90.		
c	Prior year adjustments 2b			
	Other losses 2c			
d	Other (Describe in Part XIII.)	8 6 8		
е	Add lines 2a through 2d	2e		598.
3	Subtract line 2e from line 1	3	5,136,	346.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b	4c	F 106	0.
Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) **TXIII Supplemental Information	5	5,136,	346.
$\overline{}$				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part \	, line 4; Part	X, line 2; Part X	l,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.			
D 3 F	NT 11 T TYPE 4			
PAF	RT V, LINE 4:			
miir	THOOME EDON BUT DEDNINGER THOOME TO THE TOTAL			
Inc	INCOME FROM THE PERMANENT ENDOWMENT IS USED TO FUND OU	JR ORPH	ANAGE	
PRC	GRAM. AUSTIN COMMUNITY FOUNDATION HOLDS THE ENDOWMENT	AND ATO	O WANAGE	10
1100	COLUMN AODITH COMMONITY FOUNDATION HOLDS THE ENDOWMENT A	MD ALS	O MANAGE	5
тиг	CHAMADANT FAMILY ENDOWMENT FOR HIGHER EDUCATION THE	TMOONE	00 10110	
1111	SHAMAPANT FAMILY ENDOWMENT FOR HIGHER EDUCATION, THE	NCOME	OF WHICH	
FIIN	IDS SCHOLARSHIPS FOR HIGHER EDUCATION FOR CHILDREN AT TH	IE HOME	G ME	
1 01	DO DEHOLARBITED FOR HIGHER EDUCATION FOR CHILDREN AT TH	IE HOME	S WE	
SUF	PPORT.			
	. 0.1.2 7			
חאם	OM V ITNE 1.			
PAR	RT X, LINE 2:			
тит	ODCANIZACION EVALUACIO INCIDENTA CAR DOCUMENTO			
Inc	ORGANIZATION EVALUATES UNCERTAIN TAX POSITIONS, IF ANY	EXIST	, UNDER	
AGC	TODIC 740 INCOME TAYES THE OPCANIZATION ACCOUNTS FOR	IBIGER		_
ADC	TOPIC 740, INCOME TAXES. THE ORGANIZATION ACCOUNTS FOR	UNCER	TAINTY O	F
TNO	OME TAYES BASED ON A "MODE ITERIV MILL MORE MILLS	10D mii		
TIAC	OME TAXES BASED ON A "MORE-LIKELY-THAN-NOT" THRESHOLD I	OK THE		
DEC	OCNIMION AND DE DECOGNIMION OF MAY BOSTMIONS	Y		
	COGNITION AND DE-RECOGNITION OF TAX POSITIONS, WHICH INC	LUDES	THE	
332054	09-28-23	Sche	dule D (Form 9	90) 2023

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

2023
Open to Public Inspection

Name of the organization

Employer identification number

					Employer identifi	cation number
THE MIRACLE FOU	NDATION,	INC.			74-298958	0
Part I General Info	rmation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answered "Y	es" on
Form 990, Part	V, line 14b.					
1 For grantmakers. Doe	s the organization	maintain record	ds to substantiate the amount of its gra	ants and other a	assistance,	
the grantees' eligibility	for the grants or a	assistance, and t	the selection criteria used to award the	grants or assis	tance? X	Yes No
2 For grantmakers Des	cribe in Part V the	organization's	procedures for monitoring the use of its			
United States.	ondo irri dit v tre	organization s	procedures for morntoning the use of its	s grants and ot	ner assistance outsi	de the
3 Activities per Region.	The following Part	I, line 3 table ca	n be duplicated if additional space is n	eeded.)		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-	251 12	gram service,	expenditures for and
	in the region	independent contractors	gram services, investments, grants to recipients located in the region)		specific type	investments
		in the region	recipients located in the region)	of service	(s) in the region	in the region
SOUTH ASIA -						
AFGHANISTAN, BANGLADESH, BHUTAN,			PROCEAN CERUTARE AND			
INDIA, MALDIVES,	3	60	PROGRAM SERVICES AND GRANTMAKING	HOUSING, BA	ran in the second of the secon	
SOUTH ASIA -	1	00	GRANIMAKING	EDUCATION O		1,506,880.
AFGHANISTAN,				-00000000000000000000000000000000000000	ROM THE U.S. N ORPHANAGES	
BANGLADESH, BHUTAN,					ING PROJECTS	
INDIA, MALDIVES,	1		AMBASSADOR PROGRAM	BENEFITTING		0.
	1					
	1					
3 a Subtotal	4	60		EMP SEA		1,506,880.
b Total from continuation						
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	4	60				1,506,880.

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

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA -						
		AFGHANISTAN,						
		BHUTAN, INDIA,	ORPHANAGE SUPPORT	89,677	WIRE	0		
		SOUTH ASIA -						
		AFGHANI STAN,						
		BANGLADESH,						
		BHUTAN, INDIA,	ORPHANAGE SUPPORT	10,179.	WIRE	.0		
		SOUTH ASIA -						
		AFGHANI STAN,						
		BANGLADESH,						
		BHUTAN, INDIA,	ORPHANAGE SUPPORT	31,138.	WIRE	0		
		SOUTH ASIA -						
		AFGHANISTAN,						
		BANGLADESH,						
		BHUTAN, INDIA,	ORPHANAGE SUPPORT	38,697.	WIRE	0		
		SOUTH ASIA -						
	4	AFGHANISTAN,						
		BANGLADESH,						
		BHUTAN, INDIA,	ORPHANAGE SUPPORT	26,603.	WIRE	.0		
	5	SOUTH ASIA -						
	AL.	AFGHANISTAN,						
	8	BANGLADESH,						
	B	BHUTAN, INDIA,	ORPHANAGE SUPPORT	21,996. W	WIRE	0.		
	S	SOUTH ASIA -						
	A.	AFGHANISTAN,						
	8	BANGLADESH,						
	B	BHUTAN, INDIA,	ORPHANAGE SUPPORT	15,212.W	WIRE	0.		
	S	SOUTH ASIA -						
	A	AFGHANISTAN,						
	B							
	B	BHUTAN, INDIA,	ORPHANAGE SUPPORT	16,899. WIRE	IRE	0.		

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 2

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2023

33

6	THE M	THE MIRACLE FOUNDATION,	(Form 990) THE MIRACLE FOUNDATION, INC.	Softed States	74-2989580	89580		Page 2
(b) IRS code section	lo lo	Assistance to Organiza	(d) Purpose of	(e) Amount	(f) Manner of	(g) Amount of	(h) Description	(i) Method of
and EIN (if applicable)	(e)	(c) Kegion	grant	of cash grant	cash disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
						8		
		SOUTH ASIA	ORPHANAGE SUPPORT	12,275.	WIRE	0.		
		SOUTH ASIA	ORPHANAGE SUPPORT	5,650.	WIRE	.0		
	SHALL STREET			i.		/ (
	T	SOUTH ASIA	ORPHANAGE SUPPORT	35,554. WIRE	WIRE	0.		
		SOUTH ASIA	ORPHANAGE SUPPORT	12,450.	WIRE	0		
	The state of the s	SOUTH ASIA	ORPHANAGE SUPPORT	7,612, WIRE	WIRE	0.		
		SOUTH ASIA	ORPHANAGE SUPPORT	11,260. WIRE	WIRE	.0		

Schedule F (Form 990) 2023

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2023

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may		
	be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a		
	U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to		
	Certain Foreign Corporations (see the Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing		
	Fund (see the Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Internal Revenue Service

Name of the organization

Part I Questions Regarding Compensation

THE MIRACLE FOUNDATION, INC.

Employer identification number 74-2989580

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		163	NO
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	10		NAME OF
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	0		
	additions, and officers, moleculary the OLO/Executive Director, regarding the items checked on line 12?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
	Approval by the board of compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
C	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	-33	and the	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		x
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	T. B.		
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	0		

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

Schedule J (Form 990) 2023

Schedule J (Form 990) 2023

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

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

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

		(B) Breakdown of W	4-2 and/or 1099-MISC compensation	and/or 1099-NEC	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) LESLIE BEASLEY	(3)	183,750.	0	.0	0	0.	183,750.	0.
CEO	(0.	• 0	.0	0	0.	0	0
(2) CAROLINE BOUDREAUX	(i)	155,688.	0.	0.	6,228.	8,655.	170,571.	0.
FOUNDER	(ii)	0.	0 •	. 0	0	0.	0	0
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Schedule J (Form 990) 2023

SCHEDULE O (Form 990)

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number

Name of the organization THE MIRACLE FOUNDATION, INC. 74-2989580 FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: CHILDREN. FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 IS REVIEWED BY STAFF AND PROVIDED TO THE FULL BOARD OF DIRECTORS PRIOR TO FILING WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS PROVIDED TO ALL BOARD MEMBERS AND REVIEWED ON A REGULAR BASIS. BOARD MEMBERS ARE EXPECTED TO RECUSE THEMSELVES FROM VOTING ON ANY DECISION WHICH COULD BENEFIT THEM PERSONALLY. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS REVIEWS COMPENSATION FOR THE EXECUTIVE DIRECTOR AND TOP MANAGEMENT. THEY COMPARE COMPENSATION TO COMPARABLE POSITIONS AT OTHER NONPROFITS. FORM 990, PART VI, SECTION C, LINE 19: ALL REQUIRED DOCUMENTS ARE AVAILABLE UPON REQUEST. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: FOREIGN CURRENCY ADJUSTMENT 3,682.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

2023

OMB No. 1545-0047

Employer identification number 74-2989580 Open to Public Inspection

> INC THE MIRACLE FOUNDATION, Name of the organization

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

PartI

Direct controlling entity End-of-year assets (e) Total income Ø Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity

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

,							
(a)	(q)	(c)	(p)	(e)		(6)	1000
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direc	section 5 12(b)(13)	(c)(13)
of related organization		foreign country)	section	status (if section	entity	entity?	2
				501(c)(3))		Yes	No
MIRACLE FOUNDATION INDIA							
B-14, 1ST FLOOR, SAKET AVENUE, SAKET	CARE AND EDUCATION FOR				THE MIRACLE		
NEW DELHI, INDIA 110017	ORPHANS	INDIA			FOUNDATION, INC.	×	

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

Schedule R (Form 990) 2023

74-2989580

Page 2

INC. THE MIRACLE FOUNDATION, Schedule R (Form 990) 2023 Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

Part III

(j) (k) General or Percentage managing ownership									
(j) eneral or anaging	Yes No								
(i) Code V-UBI amount in box	K-1 (Form 1065) Y								
22	No								
(h) Disproportiona allocations?	Yes								
(g) Share of end-of-year	dooelo								
(f) Share of total income									
(e) Predominant income (related, unrelated, excluder from tax under	sections 512-514)								
(d) Direct controlling entity									
(c) Legal domicile (state or	country)								
(b) Primary activity									
(a) Name, address, and EIN of related organization									

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

			ĺ		10	î		ſ		ı		l		
(3)	Section 512(b)(13) controlled entity?	s No				_							_	
_		Yes			*	_				L				
3	Percentage ownership				800.66									
(a)	Share of end-of-year	assers			1,418.									
(L)	Share of total income				0.									
(e)	Type of entity (C corp, S corp,	(ienii lo			C CORP									
(g)	Direct controlling entity		THE MIRACLE	FOUNDATION,	INC.									
(c)	Legal domicile (state or foreign	country)			INDIA									
(b)	Primary activity			CARE AND EDUCATION	FOR ORPHANS									
(a)	Name, address, and EIN of related organization		THRIVE SCALE INTERNATIONAL PRIVATE LIMITED	ANNEXE BUILDING GF B4, GK ENCLAVE PART II, MA CARE AND EDUCATION	NEW DELHI, INDIA 110048									

332162 09-28-23

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Schedule R (Form 990) 2023

74-2989580

30, Part IV, line 34, 35b, or 36.	
red "Yes" on Form 990, F	
. Complete if the organization answered "	II or IV of this school of
Organizations.	I Darte II
Transactions With Related	il ai vittua vas i i alla atalum.
Part V	Note: C

Note: Complete line 1 if any entity is listed in Parts II III or IV of this schedule				>	Voc No	1.
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	slated organizations listed	in Parts II-IV?		-	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	Α	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1a	X	
b Gift, grant, or capital contribution to related organization(s)				1b	×	
c Gift, grant, or capital contribution from related organization(s)				10	×	
d Loans or loan quarantees to or for related organization(s)				10	×	1
e Loans or loan guarantees by related organization(s)				4	×	
				2		
f Dividends from related organization(s)				#	×	
a Sale of assets to related organization(s)				10	×	1
h Durchase of aceate from related organization(s)				20 4	: ×	1
				= ;	4 >	1
LAGINITIES WITH TEINED OF BUILDINGS		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	法法法法法法法法法法法法法法法法法法法法法法法法法法法法法法法法法法法法法法	=	4 5	1
J Lease of facilities, equipment, or other assets to related organization(s)				=	×	13
k Lease of facilities, equipment, or other assets from related organization(s)				*	×	
l Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)			=	×	
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			E	×	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)	변경 한 전 등 등 등 등 한 번 등 번 등 한 반 등 한 반 등 한 반 등 한 반 등 한 반 등 한 반 등 한 반 등 한 반 등 한 반 등 한 반 등 한 반		-t	×	1
o Sharing of paid employees with related organization(s)				10	×	1
				2		
p Reimbursement paid to related organization(s) for expenses				1p	×	
				10	×	Ĩ.
				7		
r Other transfer of cash or property to related organization(s)				+	×	
s Other transfer of cash or property from related organization(s)				18	×	l.
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ho must complete th	is line, including covered i	relationships and transaction thresholds.			1 1
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	olved		
(1) MIRACLE FOUNDATION INDIA	В	919,621.	CASH VALUE			1 1
(2)						1
(3)						10
(4)						
(5)						. 1
(9)						1 1
332163 09-28-23	1		Schedule R (Form 990) 2023	R (Form 99	90) 2023	l m

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

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

Primary activity Legal domicile (refated, unrelated, soft) (refated, unrelated, soft) (refated unrelated unrelated, soft) (refated unrelated unr	that was not a related organization, see instructions regarding exclusion for certain investment partnerships. (a) (b) (d) (d)	(b)	(c)		(J) (e)	(6)	(F)	(1)	5	(k)
	Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income partie (related, unrelated, 501(excluded from tax under cog sections 512-514)		Share of end-of-year assets	Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	General or Percentage managing partner? ownership

Schedule R (Form 990) 2023

Schedule R (Form 990) 2023 THE MIRACLE FOUNDATION, INC. Part VII Supplemental Information	74-2989580 Page 5
Supplemental Information	•
Provide additional information for responses to questions on Schedule R. See instructions.	

FORM 9	990 PAGE 10						066							
Asset No.	Description	Date Acquired	Method	Life	C No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS													
7	BO	12/17/13	SL	40.00	16	79,012.				79,012.	18,269.		1,975.	20,244.
	* 990 PAGE 10 TOTAL BUILDINGS					79,012.				79,012.	18,269.		1,975.	20,244.
	MACHINERY & EQUIPMENT													
С	SOUND SYSTEM	12/15/09	200DB	7.00	HY17	633.				633.	316.		0.	316.
4	CONFERENCE PHONE	05/30/11	SI	5.00	16	650.				650.	650.		0.	650.
2	COMPUTER EQUIPMENT	12/08/11	SI	5.00	16	1,346.				1,346.	1,346.		0.	1,346.
9	COMPUTER EQUIPMENT	12/22/11	SI	5.00	16	3,292.				3,292.	3,291.		0.	3,291.
7	DELL COMPUTER	04/16/12	SI	5.00	16	1,351.				1,351.	1,351.		0.	1,351.
00	SOFTWARE	05/11/12	SI	3.00	16	2,400.				2,400.	2,400.		0.	2,400.
6	BJ LAPTOP	07/01/12	SI	5.00	16	1,114.				1,114.	1,114.	CONTROL INCIDENT	0.	1,114.
10	DISHWASHER	11/30/12	SL	7.00	16	495.				495.	495.		0.	495.
11	KA DELL COMPUTER	12/17/12	SL	5.00	16	.076				970.	.076		0.	970.
12	LAPTOP (INDIA)	11/18/15	SL	5.00	16	721.				721.	721.		0.	721.
13	MACBOOK	11/23/15	SL	2.00	16	1,137.				1,137.	1,137.		0.	1,137.
14	2 LAPTOPS	10/08/15	SL	2.00	16	2,007.				2,007.	2,007.		0.	2,007.
15	INDIA LAPTOP	06/30/16	SL	2.00	16	622.				622.	622.		0	622.
16	CB LAPTOP	06/30/16	SL	5.00	16	1,427.				1,427.	1,427.		0.	1,427.
328111 04-01-23	4-01-23										•			

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Description Acquired Acquir															
SA LAPTOP SA LAPTAP SA L	Asset No.		Date Acquired	Method			Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
Delii - Ashley 01/04/1 Si 5.00 16 5.768 5.768 5.768 5.768 5.768 5.768 5.768 5.00 16 1.600 1.60	17	SA	06/30/16		5.00	16	1,474.				1,474.	1,474.		0.	1,474.
DELL LAFILEY DELL LAFILEY DELL LAFTUDE 5480 DELL LAFTUDE 5590 DELL	32		01/04/17		5.00	16	5,768.				5,768.	5,768.		0.	5,768.
DELL LATITUDE 5480 12/31/17 SL 5.00 16 1,079. RAD MAC LAPTOP SERVER RAD MAC LAPTOP O6/22/18 SL 5.00 16 1,169. EAD MAC LAPTOP O6/22/18 SL 5.00 16 1,169. DELL LATITUDE 5590 O1/18/19 SL 5.00 16 1,382. LATITUDE 7890 O1/18/19 SL 5.00 16 1,838. DELL LATITUDE 7890 O1/18/19 SL 5.00 16 1,838. DELL LATITUDE 7890 O1/18/19 SL 5.00 16 1,838. DELL LATITUDE 5510 O1/18/19 SL 5.00 16 1,838. O1/18/19 SL 5.00 16 1,804. O1/18/19 SL	33	DELL -	03/27/17		5.00	16	1,600.				1,600.	1,600.		0.	1,600.
NACIESE POINT 19 000 SERIES 12/31/17 SL 5.00 16 1,169. 1,169. 1,150. 850.	34	_	09/01/17		5.00	16	1,079.				1,079.	1,079.		0.	1,079
RAD MAC IAPTOP 04/22/18 SL 5.00 16 1,169. 1,169. 1,150. SERVER 05/22/18 SL 5.00 16 4,420. 4,420. 4,420. 4,200. 4,200. 4,200. 4,420. 4,420. 4,420. 4,200. 4,200. 4,420. 4,420. 4,420. 4,420. 4,420. 4,420. 2,750. 2,750. 2,750. 2,750. 2,750. 2,750. 2,750. 2,659. 2,659. 2,659. 2,659. 2,659. 2,659. 2,659. 2,659. 2,659. 2,659. 2,659. 2,750. 2,750. 2,750. 2,750. 2,750. 2,750. 2,750. 2,750. 2,750. 2,750. 2,659. 2,750. 2,659.	36	_	12/31/17		5.00	16	850.			DESCRIPTION OF THE	850.	850.		0.	850
SERVER O5/22/18 SL 5.00 16 4,420. 4,420. 4,420. 4,420. 4,273. POWER EDGE T330 SENVER 05/25/18 SL 5.00 16 2,750. 2,750. 2,659. DELL LAPTOP 08/15/18 SL 5.00 16 1,100. 1,100. 1,027. LG SMART 4K TV & TILT MOUNT 01/22/19 SL 5.00 16 1,105. 1,105. 1,105. LAPTOP 1APTOP 04/03/19 SL 5.00 16 1,199. 1,838. 1,472. DELL LATTUDE 7480 10/15/19 SL 5.00 16 1,838. 1,804. 1,113. DELL LATTUDE 7480 10/15/19 SL 5.00 16 1,804. 1,199. 1,804. 1,113. DELL LATTUDE 7480 03/01/20 SL 5.00 16 1,804. 1,113. 1,091. 1,286. 51,353. 44,828. ACCESS POIL PARLY *** 900 PAGE 10 TOTAL **** 500 PAGE 10 TOTAL ************************************	39		04/22/18		5.00	16	1,169.				1,169.	1,150.		19.	1,169.
POWER EDGE T330 SERVER 05/25/18 SL 5.00 16 2,750. 2,750. 2,659. DELL LAPTOP 08/15/18 SL 5.00 16 1,100. 1,100. 1,027. DELL LATITUDE 5590 01/18/19 SL 5.00 16 1,382. 1,189. 1,150. LG SWART 4K TV & TILT MOUNT 01/22/19 SL 5.00 16 1,836. 1,382. 1,150. LAPTOP 04/03/19 SL 5.00 16 1,199. 1,199. 840. DELL LATITUDE 7480 10/15/19 SL 5.00 16 1,286. 1,199. 1,199. 840. LAPTOP-LB 03/01/20 SL 5.00 16 1,286. 1,286. 514. ACCESS POINT 12/21/21 SL 5.00 16 4,364. 4,364. 1,091. *** SPO PAGE 10 TOTAL	40		05/22/18		5.00	16	4,420.				4,420.	4,273.		147.	4,420.
DELL LATITUDE 5590 01/18/19 SL 5.00 16 1,382.	41		05/25/18		5.00	16	2,750.				2,750.	2,659.		91.	2,750.
DELL LATITUDE 5590 01/18/19 SL 5.00 16 1,382. 1,382. 1,150. LG SMART 4K TV & TILT MOUNT 01/22/19 SL 5.00 16 1,838. 1,105. 1,105. 921. LAPTOP DELL LATITUDE 7480 04/03/19 SL 5.00 16 1,894. 1,199. 840. 1,199. BELL LATITUDE 5510 03/01/20 SL 5.00 16 1,804. 1,286. 1,286. 1,286. 1,286. 1,286. 1,091. 4,364. 1,091. MACHINENY & EQUIPMENT 8510 03/01/21 SL 5.00 16 4,364. 51,353. 44,828.	42		08/15/18		5.00	16	1,100.				1,100.	-		73.	1,100.
LG SMART 4K TV & TILT MOUNT 01/22/19 SL 5.00 16 1,838. 1,105. 921. LAPTOP DELL LATITUDE 7480 10/15/19 SL 5.00 16 1,838. 1,838. 1,472. DELL LATITUDE 5510 03/01/20 SL 5.00 16 1,804. 1,804. 1,804. 1,113. DELL LATITUDE 5510 12/21/21 SL 5.00 16 4,364. 4,364. 1,091. * 990 PAGE 10 TOTAL MACHINEKY & EQUIPMENT 15.13 15.	43		01/18/19		5.00	16	1,382.				1,382.	1,150.		232.	1,382.
LAPTOP 1,838. 1,472. DELL LATITUDE 7480 10/15/19 SL 5.00 16 1,199. 840. LAPTOP-LB 03/01/20 SL 5.00 16 1,804. 1,113. DELL LATITUDE 5510 03/08/21 SL 5.00 16 1,286. 514. CISCO MERAKI MR36 WIRELESS 12/21/21 SL 5.00 16 4,364. 1,091. * 990 PAGE 10 TOTAL * 990 PAGE 10 TOTAL 51,353. 64,828. MACHINERY & EQUIPMENT 51,353. 51,353. 64,828.	44	LG SMART 4K TV	01/22/19		5.00		1,105.				1,105.	921.		184.	1,105.
DELL LATITUDE 7480 10/15/19 SL 5.00 16 1,199. 840. LAPTOP-LB 03/01/20 SL 5.00 16 1,804. 1,113. DELL LATITUDE 5510 03/08/21 SL 5.00 16 1,286. 1,286. 514. CISCO MERAKI MR36 WIRELESS ACCESS POINT 4,364. 4,364. 1,091. * 990 PAGE 10 TOTAL * 990 PAGE 10 TOTAL 44,828. MACHINERY & EQUIPMENT 51,353. 51,353. 44,828.	45		04/03/19		5.00		1,838.				1,838.	1,472.		366.	1,838.
LAPTOP-LB 03/01/20 SL 5.00 16 1,804. 1,804. 1,113. DELL LATITUDE 5510 03/08/21 SL 5.00 16 1,286. 514. CISCO MERAKI MR36 WIRELESS ACCESS POINT 4,364. 4,364. 1,091. * 990 PAGE 10 TOTAL 5.00 16 4,364. 4,364. 1,091. MACHINERY & EQUIPMENT 51,353. 51,353. 51,353. 44,828.	46		10/15/19		5.00		1,199.				1,199.	840.		240.	1,080.
DELL LATITUDE 5510 CISCO MERAKI MR36 WIRELESS ACCESS POINT * 990 PAGE 10 TOTAL MACHINERY & BQUIPMENT 51,353. 12/21/21 SL 5.00 16 4,364. 4,364. 1,091. 51,353. 44,828.	49		03/01/20	SL	5.00	16	1,804.				-	1,113.		361.	1,474.
CISCO MERAKI MR36 WIRELESS ACCESS POINT * 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT 51,353. 4,364. 1,091. 51,353. 44,828.	51	_	03/08/21	SL	5.00	16	1,286.				1,286.	514.		257.	771.
0 PAGE 10 TOTAL INERY & EQUIPMENT 51,353. 44,828.	53		12/21/21	SL	5.00	16	4,364.				4,364.	1,091.		873.	1,964.
							51,353.				51,353.	44,828.		2,843.	47,671.
LAND		LAND													

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Asset 1 LAND * 990 PAGE 1 OTHER 18 EAD COMPUTER 19 CROMA COMPUT	Description	Date					(*			· ·		
CR RA	nondi preso	Acquired	Method	Life	No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
* OT *		12/17/13	ы			316,048.				316,048.			0.	
OTHER EAD CC	990 PAGE 10 TOTAL LAND					316,048.				316,048.	0.		0.	0.
EAD CC			H.											0.000
CROMA	PUTER	01/22/14	SL	5.00	16	1,690.				1,690.	1,690.		0.	1,690.
	COMPUTER	03/31/14	SI	5.00	16	1,239.				1,239.	1,239.		0.	1,239.
20 NIVEDITA	A COMPUTER	05/26/14	SL	5.00	16	1,281.				1,281.	1,281.		0.	1,281.
21 AC AND D	AND DUCT WORK	10/08/14	SL	40.00	16	9,824.	Desire Compa			9,824.	2,056.		246.	2,302.
22 PAVING		12/31/15	SL	15,00	16	22,000.				22,000.	10,636.		1,467.	12,103.
23 VIDEO PR	VIDEO PRODUCTION/PROMOTIONS	12/31/15	SI	5.00	16	27,051.				27,051.	27,051.		0.	27,051.
24 RESIDUE	RESIDUE AND PAINT BUILDING	06/30/16	SL	15.00	16	21,631.				21,631.	9,734.		1,442.	11,176.
35 DELL LAT	LATITUDE 3580	12/31/17	SL	2.00	16	544.				544.	544.		.0	544.
37 SEWER LI	SEWER LINE REPLACEMENT	09/27/17	SI	15.00	16	11,600.				11,600.	4,251.		773.	5,024.
38 DRIVEWAY	DRIVEWAY CONCRETE	10/11/17	SL	15.00	16	1,000.				1,000.	369.		67.	436.
48 BUILDING	BUILDING IMPROVEMENT	03/29/19	SL	15.00	16	61,763.				61,763.	16,471.		4,118.	20,589.
54 WINDOWS		06/29/22	SL	15.00	16	10,930.				10,930.	547.		729.	1,276.
55 PAINT		03/04/22	SL	15.00	16	7,950.				7,950.	574.		530.	1,104.
56 APPLE LAPTOP	APTOP	06/15/23	SL	5.00	16	2,215.				2,215.			369.	369.
57 XEROX COPIER	PIER	09/07/23	SL	5.00	16	5,013.				5,013.			585.	585.

				•										
Asset No.	Description	Date Acquired	Method	Life	Nor >	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 PAGE 10 TOTAL OTHER		1	0000000		185,731.	-			185,731.	76,443.		10,326.	86,769.
	SOFTWARE													
	ОТНЕК		THE STATE OF THE S						To the second second					
26	WEBSITE	10/10/13		36M	HY43	15,000.				15,000.	15,000.		0.	15,000.
27	MAGNTIKA SOFTWARE	06/30/15		36M	HY43	30,345.	-	TO THE PERSON OF		30,345.	30,345.		0.	30,345,
28	REFRESHWEB SOFTWARE	06/30/15		36M	HY43	6,700.				6,700.	6,700.		0.	6,700.
29	STRATEGIC GROWTH SOFTWARE	06/30/15		36M	HY43	7,031.	O PARTIES		District Company	7,031.	7,031.		0.	7,031.
30	NOW IT MATTERS SOFTWARE	06/30/15		36M	HY43	12,160.				12,160.	12,160.		0.	12,160.
47	WEBSITE	12/20/19		36M	HY43	59,688.		THE RESIDENCE OF THE PERSONS AND THE PERSONS A		59,688.	.889,63		0.	59,688
20	WEBSITE	05/01/20		36M	HY43	22,375.				22,375.	21,753.		622.	22,375.
	* 990 PAGE 10 TOTAL OTHER					153,299.				153,299.	152,677.		622.	153,299.
	* 990 PAGE 10 TOTAL - SOFTWARE					153,299.				153,299.	152,677.		622.	153,299.
	ОТНЕК						-							
25	CAPITALIZED WEBSITE	11/14/12		36M	HY43	34,681.		18		34,681.	34,681.		0.	34,681.
	* 990 PAGE 10 TOTAL OTHER					34,681.				34,681.	34,681.		0	34,681.
	* 990 PAGE 10 TOTAL -					34 681				34 681	34 681		c	34 681
	* GRAND TOTAL 990 PAGE 10 DEPR & AMORT					820,124.				820,124.	326,898.		15.766.	342,664.

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

CUCREMON YEAR ACTUATIVA COLUMNINATION CO	ORM	FORM 990 PAGE 10						066							
RED 0. 812,696, 326,898, 341, 0. 7,228, 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Asse No.		Date Acquired						Section 179 Expense	Reduction In Basis	Basis For Depreciation		Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
TIRED 17,229. 0. 17,229. 0. 7,229. 0. 0. 0. 0. 820,124. 820,124. 0. 820,124. 342,664. 477,460.		CURRENT YEAR ACTIVITY		0.000											
TTRED 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0		BEGINNING BALANCE					812,896.			0.	812,896.	Harris .			341,710.
820,124. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		ACQUISITIONS					7,228.			.0	7,228.	0.			954.
820,124. 0. 820,124. 326,898. 342,664. 477,460.		DISPOSITIONS/RETIRED					0.			0.	0.				0.
		ENDING BALANCE					820,124.	No.		0.	820,124.	326,898.			342,664.
		ENDING ACCUM DEPR										342,664.			
		ENDING BOOK VALUE						Ī				477,460.			
					100000000000000000000000000000000000000	100									
								THE COLUMN							

(D) - Asset disposed

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* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service Name(s) shown on return

Attach to your tax return. Go to www.irs.gov/Form4562 for instructions and the latest information.

Business or activity to which this form relates

990

Identifying number

	E MIRACLE FOUNDATIO		79. Note: If you have a	FORM 990 I	PAGE 10		74-2989580
	Maximum amount (see instructions)						
	Total cost of section 179 property plan	ced in service (see	instructions)				1,160,000.
				•••••		2	0 000 000
4	Threshold cost of section 179 propert Reduction in limitation. Subtract line 3	y before reduction					2,890,000.
	Dollar limitation for tax year. Subtract line 4 from lin		15.000000000000000000000000000000000000			5	
6	(a) Description of p	property	(b) Cost	(business use only)	(c) Elected	cost	
_							
_							
7	listed success. Established	"					
	Listed property. Enter the amount from			7			
0	Total elected cost of section 179 prop	erty. Add amounts	in column (c), lines 6	and 7		8	
10	Tentative deduction. Enter the smalle	r of line 5 or line 8				9	
10	Carryover of disallowed deduction from	m line 13 of your 20	022 Form 4562			10	
11	Business income limitation. Enter the	smaller of business	income (not less that	n zero) or line 5		11	
12	Section 179 expense deduction. Add	lines 9 and 10, but	don't enter more than	line 11		12	
13	Carryover of disallowed deduction to 2	2024. Add lines 9 a	and 10, less line 12	13			
	e: Don't use Part II or Part III below for						
	rt II Special Depreciation Allow	ance and Other D	epreciation (Don't in	clude listed prope	rty.)		
14	Special depreciation allowance for qua	alified property (oth	er than listed propert	y) placed in service	during		
	the tax year					. 14	
	Property subject to section 168(f)(1) el		•••••			15	
16	Other depreciation (including ACRS)	***************************************				16	15,144.
Pa	rt III MACRS Depreciation (Don'	t include listed pro	perty. See instruction	s.)			
400			Section A				
17	MACRS deductions for assets placed	in service in tax ye	ars beginning before	2023		17	
18	f you are electing to group any assets placed in ser						
	Section B - Asset		e During 2023 Tax Y		neral Deprecia	tion Syster	n
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions	e (d) Recovery	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
С	7-year property						
d	10-year property						
е	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
	Decidential and a	/		27.5 yrs.	MM	S/L	
h	Residential rental property	/		27.5 yrs.	MM	S/L	
-		1		39 yrs.	MM	S/L	
i	Nonresidential real property	/		05 yrs.	MM	S/L	
	Section C - Assets	Placed in Service	During 2023 Tax Yea	r Using the Alter			am
20a	Class life		- and a company of the company of th	- Comg the Alter	lative Depreci		2111
b	12-year			12 yrs.		S/L S/L	
С	30-year	/		30 yrs.	MM		
d	40-year	1				S/L	
_	rt IV Summary (See instructions.)			40 yrs.	MM	S/L	
	Listed property. Enter amount from lin	200					
						21	
	Total. Add amounts from line 12, lines	14 mrough 17, line	es 19 and 20 in colum	n (g), and line 21.			45 444
23	Enter here and on the appropriate line: For assets shown above and placed in	son your return. Pa	rulerships and S corp	orations - see inst		22	15,144.
	portion of the basis attributable to sec						
	The second desiration to sec	EUUN UUSIS		23			

Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.) Part V

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a.

	24b, columns	(a) through (c)	of Section A	, all of S	ection B	and S	ection C	if appli	cable.		i i				
	Section A	- Depreciatio	n and Other	Informa	tion (Ca	ution:	See the i	instruc	tions for li	mits for p	asseng	er autor	nobiles.)	
24a Do	you have evidence to	support the bus	iness/investm	ent use cla	aimed?	\	Yes	No	24b If "Y	es," is th	e evide	nce writ	ten?	Yes	N
T (li	(a) Type of property ist vehicles first)	(b) Date placed in service	Business investmen use percenta	t	(d) Cost or ther basis	(h	(e) asis for depre usiness/inve use only	stment	(f) Recovery period	Met	g) hod/ ention	Depr	(h) eciation uction	Ele sectio	(i) cted on 179
25 Spe	ecial depreciation all	owance for gu	alified listed	property	nlaced i	n servi	ce durino	the to	y year and	1	T			C	ost
use	ed more than 50% in	a qualified bu	siness use	property	piacca	11 301 71	ce during	tile ta	A year aric	4.	25				
26 Pro	perty used more tha	n 50% in a gu	alified busin	ess use:			************			**********	25				
		I : : I		%											
				%											
		1 1		%											
27 Pro	perty used 50% or le	ess in a qualifi		-											
		1 1		%						S/L -					11500410
				%						S/L -					
				%						S/L -					
28 Add	d amounts in column	(h), lines 25 t	hrough 27. F	nter here	and on	line 21	nage 1			O/L	28				
29 Add	d amounts in column	(i) line 26. Fr	nter here and	on line	7 nage 1	11110 21	, page 1	*******		***********					200000
	a diriodirio il i Goldini	Total Lot Lot					on Use						29		
o your	ete this section for ve employees, first ans	wer the quest	ions in Secti	on C to s	ee if you	meet a	an except	tion to	completin	g this se	ction for	r those	vehicles.	T	
n Tota	al husiness/investment	milas drivas duvas	nim m Ab a	1	a)		(b)		(c)	(d		I I I I I I I I I I I I I I I I I I I	e)	(1)
	al business/investment			Veh	icle 1	Veh	nicle 2	Ve	hicle 3	Vehic	cle 4	Veh	icle 5	Vehi	cle 6
	r (don't include commu							_							
	al commuting miles							_							
	al other personal (no ren														
33 Tota	al miles driven during	g the year.			_										
Add	d lines 30 through 32	<u> </u>													
	s the vehicle availab			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
dur	ring off-duty hours?	*******************					-								
	s the vehicle used pr		nore												
	n 5% owner or relate						-								
	nother vehicle availa	ble for person	nal												
use	?														
newor	those guestions to	Section C -	Questions	for Empl	oyers W	ho Pro	vide Veh	icles f	or Use by	Their Er	mploye	es			
nore th	these questions to o an 5% owners or rela	ated persons	ou meet an e	xception	to comp	leting S	Section B	for ve	hicles use	d by emp	oloyees	who a	ren't		
	you maintain a writte		mont that no	obibito o	II naman	ala.a.	- f - l - l -		-tr						_
										muting, i	by your			Yes	No
DO DO	ployees?													_	-
0 00	you maintain a writte	an policy state	ment that pr	onibits p	ersonal L	use of v	/ehicles, (except	commutir	ng, by yo	ur				
Do y	ployees? See the ins	tructions for v	enicies used	by corp	orate offi	cers, d	irectors,	or 1% (or more ov	wners				-	₩
	you treat all use of ve													-	_
the	you provide more that use of the vehicles,	an five venicle	s to your em	ployees,											
	you meet the require					aonetro	tion use		• • • • • • • • • • • • • • • • • • • •					-	-
Not	te: If your answer to	37 38 39 40	or 41 is "Va	e " don't	complet	o Soot	ion R for	the co	vorad vahi	olee					
Part \	VI Amortization	,,,	, 0, 11,0 10	0, 00111	Complet	0000	IOI D IOI	tile co	vered veri	cies.					
	(a) Description of	costs	Date	(b) amortization		(c) Amortiza		T	(d) Code		(e) Amortizat		An	(f)	
2 Amr	ortization of costs th	at begins duri	na vour 202	begins 3 tax yea	r	amoun	it.		section	р	eriod or perc	entage	fo	r this year	
11110	o. L. Lation of Goods th	ar begins dun	ing your 202	lax yea				_							
								+							
3 Amo	ortization of costs th	at began befo	re vour 2023	tax ves						STM	т 1	42		-	622
	al. Add amounts in o					report			***********	DIM	÷+	43			622

FORM 4562	PART VI	- AMORTIZA	TION		STA	ATEMENT 1
(A) DESCRIPTION OF COSTS	(B) DATE BEGAN	(C) AMORT. AMOUNT	(D) CODE SECT.	(E) LIFE/ RATE	(F) ACCUM. AMORT.	(G) AMORT. THIS YR.
WEBSITE	05/01/20	22,375.		36M	21,753.	622.
TOTAL TO FORM 4562, LINE	43					622.

Form **5471**

(Rev. December 2023)

Department of the Treasury Internal Revenue Service

Information Return of U.S. Persons With Respect to Certain Foreign Corporations

Go to www.irs.gov/Form5471 for instructions and the latest information. Information furnished for the foreign corporation's annual accounting period (tax year required by

OMB No. 1545-0123

Attachment Sequence No. 121

Section 636) (See institut	Juona) beginning	, and endin	lg .	1	200000		
Name of person filing this return		A Identifying num	nber				
THE MIRACLE FOUNDATION, I	NC.	74-2989	580				
Number, street, and room or suite no. (or P.O. box number if mail is	not delivered to street address)	B Category of filer		ons. Check a	pplicable t	oox(es).):	
1506 W. 6TH STREET		1a 1b	1c 2	3 4	X 5a	5b	5c
City or town, state, and ZIP code		C Enter the total p	ercentage of th		And the second		
AUSTIN, TX 78703		you owned at th	ne end of its ann	nual accoun			.06 %
Filer's tax year beginning APR 1	,2023 , and ending		,202				
D Check box if this is a final Form 5471 for the foreign	corporation						
E Check if any excepted specified foreign financial asse	ts are reported on this form	(see instructions)					
F Check the box if this Form 5471 has been completed	using "Alternative Informati	ion" under Rev. Proc. 2019-4	0				
G If the box on line F is checked, enter the corresponding		rmation" (see instructions)					
H Person(s) on whose behalf this information return is	filed:						
(1) Name	(2) Addres	SS	(3) Identifying	number		k applicable	box(es)
	(=) / (u ii)		(b) identifying	y mumber	Shareholder	Officer	Director
Immortant							
Important: Fill in all applicable lines and sched	ules. All information mu	ist be in English. All amou	ints must be	stated in U	.S. dollar	S	
unless otherwise indicated.							
1a Name and address of foreign corporation			b(1) Emplo	yer identific	ation num	ber, if any	
				-00000			-12
			b(2) Refere				
MIRACLE FOUNDATION INDI	7		Paragonal Trees and	3000DI			
		m	b(3) Previo	us reference	e ID numbe	er(s), if any (see instr.)
B-14, 1ST FLOOR, SAKET	AVENUE, SAKE	T					
NEW DELHI 110017				ry under wh	ose laws i	ncorporated	1
d Date of e Principal place of business	f Principal g	Dringing business activity	INI		1		
incorporation NEW DELHI	business activity	Principal business activity		h Function	ai currency	code	
07/22/11INDIA	SOCIAL WELFA	RE			-		
2 Provide the following information for the foreign corp	d stated above			IN	R		
a Name, address, and identifying number of branch offi			b If a U.S. inc	nome tay ret	urn was fi	lad antart	
THE MIRACLE FOUNDATION,		Jilled States	D 11 a 0.5. 1110	JUITE LAN TEL		J.S. income	Anu paid
1506 W 6TH ST.			(i) Taxable inc	come or (los		(after all cre	
AUSTINT TX 78703							ompound.
74-2989580							
c Name and address of foreign corporation's statutory in country of incorporation	or resident agent	d Name and address (in person (or persons) v	vith custody of	the books a	nd records	of the fore	ign
		corporation, and the l	ocation of such	books and	records, if	different	150
SUBHASH MITTAL & ASSOCI	ATES	MIRACLE F	OUNDATI	ON IN	DIA		
512A DEPSHIKHA BLDG, 8	RAJENDRA PL	B-14, 1ST				ENTIE	SAKE
NEW DELHI 110008		NEW DELHI				ILTOL ,	DIMEL
INDIA		INDIA	11001				
Schedule A Stock of the Foreign Co	rporation	221222					
			(b) Num	ber of shar	es issued a	and outstan	dina
(a) Description of e	ach class of stock		(i) Beginnin			ii) End of a	-
114 Month Agents Actual Control Contro			accounting			ccounting p	
COMMON				50,00	0	5	0,000
							- 1 - 0 - 0
LHA For Paperwork Reduction Act Notice, see instruc	tions. 312301 01-0	05-24			Form	5471 (Rev	v. 12-2023)

Page 2 Form 5471 (Rev. 12-2023) Schedule B | Shareholders of Foreign Corporation U.S. Shareholders of Foreign Corporation (see instructions) (d) Number of (c) Number of (e) Pro rata share (b) Description of each class of stock held by shareholder. shares held at shares held at (a) Name, address, and identifying of Subpart F Note: This description should match the corresponding end of annual beginning of income (enter as number of shareholder annual accounting description entered in Schedule A, column (a). a percentage) accounting period 99.06% 49,950 49,950 THE MIRACLE FOUNDATION COMMON 1506 W. 6TH STREET AUSTIN TX 78703 74-2989580 Direct Shareholders of Foreign Corporation (see instructions) Part II (c) Number of (d) Number of (a) Name, address, and identifying number of (b) Description of each class of stock held by shareholder. shares held at shares held at Note: This description should match the corresponding shareholder. Also, include country of incorporation or beginning of annual accounting period end of annual description entered in Schedule A, column (a). accounting period formation, if applicable.

Form 5471 (Rev. 12-2023)

Form 5471 (Rev. 12-2023)

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. generally accepted accounting principles (GAAP). Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules). However, if the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for dollar approximate separate transactions method (DASTM) corporations.

_			Functional Currency	U.S. Dollars
	1a Gross receipts or sales	1a	122,040,743.	1,474,605
	b Returns and allowances	1b		
	c Subtract line 1b from line 1a	1c	122,040,743.	1,474,605
	2 Cost of goods sold	2		
	3 Gross profit (subtract line 2 from line 1c)	3	122,040,743.	1,474,605
ne	4 Dividends	4		
ncome	5 Interest	5	617,071.	7,45
2	6a Gross rents	6a		
	b Gross royalties and license fees	6b		
	7 Net gain or (loss) on sale of capital assets	7		
	8a Foreign currency transaction gain or loss - unrealized	8a		
	b Foreign currency transaction gain or loss - realized	8b		
	9 Other income (attach statement)	9		
	10 Total income (add lines 3 through 9)	10	122,657,814.	1 482 061
	11 Compensation not deducted elsewhere	11	68,746,875.	830,661
	12a Rents	12a	00/120/0100	000,000
	b Royalties and license fees	12b		
US	13 Interest	13		
矣	14 Depreciation not deducted elsewhere	14		
Deductions	15 Depletion	15		
å	16 Taxes (exclude income tax expense (benefit))	16		
	17 Other deductions (attach statement - exclude income tax expense	10		
	(benefit)) SEE STATEMENT 2	17	55,887,205.	675,279
	18 Total deductions (add lines 11 through 17)	18	124,634,080.	1,505,940
	19 Net income or (loss) before unusual or infrequently occurring items, and			2/000/510
me	income tax expense (benefit) (subtract line 18 from line 10)	19	-1,976,266.	-23,879
Net Income	20 Unusual or infrequently occurring items	20		
Ξ	21a Income tax expense (benefit) - current	21a		
Se	b Income tax expense (benefit) - deferred	21b		
	22 Current year net income or (loss) per books (combine lines 19 through 21b)	22	-1,976,266.	-23,879
	23a Foreign currency translation adjustments	23a		23,072
sive	b Other	23b		
COLLIE	c Income tax expense (benefit) related to other comprehensive income	23c		
Comprehensive	24 Other comprehensive income (loss), net of tax (line 23a plus line 23b less line 23c)			

Form 5471 (Rev. 12-2023)

Page 4

Schedule F | Balance Sheet

Important: Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations.

_	Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1	Cash	1	320,048.	348,188.
2a	Trade notes and accounts receivable	2a		
b	Less allowance for bad debts	2b	((
3	Derivatives	3		
4	Inventories	4		
5	Other current assets (attach statement) SEE STATEMENT 4	5	1,293,714.	1,525,865.
6	Loans to shareholders and other related persons	6		
7	Investment in subsidiaries (attach statement)	7		
8	Other investments (attach statement)	8		
9a	Buildings and other depreciable assets	9a		
b	Less accumulated depreciation	9b	((
10a	Depletable assets	10a		
b	Less accumulated depletion	10b	()	(
11	Land (net of any amortization)	11		
12	Intangible assets:			
a	Goodwill	12a		
b	Organization costs	12b		
C	Patents, trademarks, and other intangible assets	12c		
d	Less accumulated amortization for lines 12a, 12b, and 12c	12d	((
13	Other assets (attach statement)	13		
14		14	1,613,762.	1,874,053.
	Total assets Liabilities and Shareholders' Equity			
15	Accounts payable	15	44,909.	21,798.
16	Other current liabilities (attach statement) SEE STATEMENT 5	16	1,392,168.	1,700,821.
17	Derivatives	17		
18	Loans from shareholders and other related persons	18		
19	Other liabilities (attach statement)	19		
20	Capital stock:			
a	Preferred stock	20a		
b	Common stock	20b	8,333.	8,333.
21	Paid-in or capital surplus (attach reconciliation)	21		
22	Retained earnings	22	168,352.	143,101.
23	Less cost of treasury stock	23	((
24	Total liabilities and shareholders' equity nedule G Other Information	24	1,613,762.	1,874,053.

623	K I W I W I W I W I W I W I W I W I W I	Yes	No
1	During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in any foreign		
	partnership?		X
	If "Yes," see the instructions for required statement.		
2	During the tax year, did the foreign corporation own an interest in any trust?		X
3	During the tax year, did the foreign corporation own any foreign entities that were disregarded as separate from		
	their owner under Regulations sections 301.7701-2 and 301.7701-3 or did the foreign corporation own any foreign		A ST
	branches (see instructions)?		X
	If "Yes," you are generally required to attach Form 8858 for each entity or branch (see instructions).		
4a	During the tax year, did the filer pay or accrue any base erosion payment under section 59A(d) to the foreign		
	corporation or did the filer have a base erosion tax benefit under section 59A(c)(2) with respect to a base erosion		
	payment made or accrued to the foreign corporation (see instructions)?		x
	If "Yes," complete lines 4b and 4c.		GI BO
b	Enter the total amount of the base erosion payments	\$	
C	Enter the total amount of the base erosion tax benefits	\$	
5a	During the tax year, did the foreign corporation pay or accrue any interest or royalty for which the deduction is not		
	allowed under section 267A?		X
	If "Yes," complete line 5b.		J. Frida
b	Enter the total amount of the disallowed deductions (see instructions)	\$	
3 1233 1	01-05-24		

Form **5471** (Rev. 12-2023)

2023.04000 THE MIRACLE FOUNDATION, I MIRACLE1

FORM 5471	OTHER	DEDUCTIONS		STATEMENT 2
DESCRIPTION		FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
COMMUNITY ASSISTANCE ADMINISTRATIVE COSTS		32,562,406. 23,324,799.		393,448. 281,831.
TOTAL TO 5471, SCHEDULE C, LINE	17	55,887,205.		675,279.

FORM 5471	OTHER	CURRENT	ASSETS	5	STATEMENT 4
DESCRIPTION				BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
ADVANCES RIGHT OF USE ASSET DEPOSITS				1,157,224. 126,380. 10,110.	1,397,031. 116,863. 11,971.
TOTAL TO 5471, PAGE 4, S	CHEDULE F,	LINE 5		1,293,714.	1,525,865.
FORM 5471	OTHER CUI	RENT LI	ABILITI	IES	STATEMENT 5
DESCRIPTION				BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
ACCRUED LIABILITIES				1,392,168.	1,700,821.
TOTAL TO 5471, PAGE 4, S	CHEDULE F,	LINE 16		1,392,168.	1,700,821.

Form 5471 (Rev. 12-2023)

Schedule G	Other	Information	(continued)

60	is the filer claiming a foreign derived inter-like in an (EDI)	Yes	No
Va	Is the filer claiming a foreign-derived intangible income (FDII) deduction (under section 250) with respect to any		
	transactions with the foreign corporation? If "Yes," complete lines 6b, 6c, and 6d. See instructions.		X
b	Enter the amount of gross receipts derived from all sales of general property to the foreign corporation that the		
	filer included in its computation of foreign-derived deduction eligible income (FDDEI)		
C	Enter the amount of gross receipts derived from all sales of intangible property to the foreign corporation that the filer included		
	in its computation of FDDEI		
d	Enter the amount of gross receipts derived from all services provided to the foreign corporation that the filer included in		
	its computation of FDDEI \$		
7	During the tax year, was the foreign corporation a participant in any cost sharing arrangement?		X
	If the answer to question 7 is "Yes," complete a separate Schedule G-1 for each cost sharing arrangement in		or its
8	which the foreign corporation was a participant during the tax year.		
0	From April 25, 2014, to December 31, 2017, did the foreign corporation purchase stock or securities of a shareholder of the foreign corporation for use in a triangular reorganization (within the meaning of Regulations		
	section 1.358-6(b)(2))?		X
9a	Did the foreign corporation receive any intangible property in a prior year or the current tax year for which the U.S.		Λ
	transferor is required to report a section 367(d) annual income inclusion for the tax year?		x
	If "Yes," go to line 9b.		80
b	Enter in functional currency the amount of the earnings and profits reduction pursuant to section 367(d)		
	(2)(B) for the tax year		
10	burning the tax year, was the foreign corporation an expatriated foreign subsidiary under Regulations section		
	1.7874-12(a)(9)? If "Yes," see instructions and attach statement.		X
11	During the tax year, did the foreign corporation participate in any reportable transaction as defined in Regulations		
	section 1.6011-4?		x
	If "Yes," attach Form(s) 8886 if required by Regulations section 1.6011-4(c)(3)(i)(G).		A
12	During the tax year, did the foreign corporation pay or accrue any foreign tax that was disqualified for credit under		
	section 901(m)?		X
13	During the tax year, did the foreign corporation pay or accrue foreign taxes to which section 909 applies, or treat	25 2	
14	foreign taxes that were previously suspended under section 909 as no longer suspended?		X
17	Did you answer "Yes" to any of the questions in the instructions for line 14? If "Yes," enter the corresponding code(s) from the instructions and attach statement		X
15	Does the foreign corporation have interest expense disallowed under section 163(j) (see instructions)?		x
	If "Yes," enter the amount		A
16	Does the foreign corporation have previously disallowed interest expense under section 163(i) carried forward		
	to the current tax year (see instructions)?		X
	if Yes, enter the amount		
17a	Did any extraordinary reduction with respect to a controlling section 245A shareholder occur during the tax year (see instructions)?		
b	(see instructions)? If the answer to question 17a is "Yes," was an election made to close the tax year such that no amount is treated		X
	as an extraordinary reduction amount or tiered extraordinary reduction amount (see instructions)?		
18a	Did the filer have any loan to or from the foreign corporation to which the safe-haven rate rules of Regulations		
	section 1.482-2(a)(2)(iii)(B) are applicable, and for which the filer used a rate of interest within the relevant safehaven		
	range (100% to 130% of the applicable Federal rate (AFR) for the relevant term)?		X
b	Did the filer have any loan to or from the foreign corporation to which the safe-haven rate rules of Regulations		
	section 1.482-2(a)(2)(iii)(B) are applicable, and for which the filer used a rate of interest outside the relevant safehaven		
19a	range (100% to 130% of the applicable Federal rate (AFR) for the relevant term)? Did the filer issue a covered debt instrument in any of the transactions described in Regulations section 1.385-3(b)		X
	(2) with respect to the foreign corporation during the tax year, or, did the filer issue or refinance indebtedness		
	owed to the foreign corporation during the 36 months before or after the date of a distribution or acquisition		
	described in Regulations section 1.385-3(b)(3)(i) made by the filer of this Form 5471, and either the issuance or		
	refinance of indebtedness, or the distribution or acquisition, occurred during the tax year?		x
b	If the answer to question 19a is "Yes," provide the following.		
	(1) The amount of such transaction(s), distribution(s), and acquisition(s)		
	(2) The amount of such related party indebtedness \$		
_		5474	

Form 5	471 (Rev. 12-2023)		74-290	Page 6
If item	edule I Summary of Shareholder's Income From Foreign Corporation (see instruct	ons)		
Schedu	H on page 1 is completed, a separate Schedule I must be filed for each Category 4, 5a, or 5b filer for whom reporting is furnished le I is being completed for:	d on this Form	5471. This	
Name (of U.S. shareholder Identifying number			
1 a	Section 964(e)(4) subpart F dividend income from the sale of stock of a lower-tier foreign corporation			
	(see instructions)	1a		
b	Section 245A(e)(2) subpart F income from hybrid dividends of tiered corporations (see instructions)			
C	Subpart F income from tiered extraordinary disposition amounts not eligible for subpart F exception under section 954(c)(6)			
d	Subpart F income from tiered extraordinary reduction amounts not eligible for subpart F exception			
	under section 954(c)(6)	1d		
е	Section 954(c) Subpart F Foreign Personal Holding Company Income (enter result from Worksheet A)	1e		
f	Section 954(d) Subpart F Foreign Base Company Sales Income (enter result from Worksheet A)	1f		
g	Section 954(e) Subpart F Foreign Base Company Services Income (enter result from Worksheet A)	1g		
h	Other subpart F income (enter result from Worksheet A)	1h		
2	Earnings invested in U.S. property (enter the result from Worksheet B)	2		
3	Reserved for future use	3		
4	Factoring income	4		
	See instructions for reporting amounts on lines 1, 2, and 4 on your income tax return.			
5a	Section 245A eligible dividends (see instructions)	E.		
b	Extraordinary disposition amounts (see instructions)	5a 5b		
C	Extraordinary reduction amounts (see instructions)	5c		
d	Section 245A(e) dividends (see instructions)	5d		
е	Dividends not reported on line 5a, 5b, 5c, or 5d	5e		
6	Exchange gain or (loss) on a distribution of previously taxed earnings and profits	6		
	V		Yes	No
7 a	Was any income of the foreign corporation blocked?			NO
b	Did any such income become unblocked during the tax year (see section 964(b))?	******************		_
If the a	nswer to either question is "Yes," attach an explanation.			
8 a	Did this U.S. shareholder have an extraordinary disposition (ED) account with respect to the foreign corporation at			
	any time during the tax year (see instructions)?			x
b	If the answer to question 8a is "Yes," enter the U.S. shareholder's ED account balance at the beginning of the CFC year			1
	\$ and at the end of the tax year \$ Provide an attachment detailing any	changes from	the	
	beginning to the ending balances.	onanges nom	uio	
C	Enter the CFC's aggregate ED account balance with respect to all U.S. shareholders at the beginning of the CFC year			
	\$ and at the end of the tax year \$ Provide an attachment detailing any	changes from	the	
	beginning to the ending balances.	onangos nom	uio	
9	Enter the sum of the hybrid deduction accounts with respect to stock of the foreign corporation (see instructions)	¢		
			5471 (Rev. 1	2-2023)

SCHEDULE H (Form 5471) (Rev. December 2021)

Department of the Treasury

Internal Revenue Service

Current Earnings and Profits

Attach to Form 5471.

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Name of person filing Form 5471 THE MIRACLE FOUNDATION, INC.		Identifying number 74-2989580
Name of foreign corporation MIRACLE FOUNDATION INDIA	EIN (if any) 00-000000	Reference ID number (see instr.) U93000DL2011NPL
IMPORTANT		

IMPORTANT: Enter the amounts on lines 1 through 5c in functional currency. Current year net income or (loss) per foreign books of account -1,976,266.1 2 Net adjustments made to line 1 to determine current earnings and profits according to U.S. financial and tax accounting standards (see instructions): **Net Additions Net Subtractions** Capital gains or losses Depreciation and amortization 2b Investment or incentive allowance 2d Charges to statutory reserves Inventory adjustments Income taxes (see Schedule E, Part I, Section 1, line 6, column (m), and Part III, line 3, column (i)) 29 Foreign currency gains or losses Other (attach statement) Total net additions 3 Total net subtractions 4 5a Current earnings and profits (line 1 plus line 3 minus line 4) -1,976,266.**b** DASTM gain or (loss) for foreign corporations that use DASTM (see instructions) c Combine lines 5a and 5b and enter the result on line 5c. Then enter on lines 5c(i), 5c(ii), and 5c(iii)(A) through 5c(iii)(D) the portion of the line 5c amount with respect to the categories of income shown 5c -1,976,266. (i) General category (enter amount on applicable Schedule J. Part I. line 3, column (a)) 5c(i) (ii) Passive category (enter amount on applicable Schedule J, Part I, line 3, column (a)) 5c(ii) (iii) Section 901(j) category: (A) Enter the country code of the sanctioned country and enter the line 5c amount with respect to the sanctioned country on this line 5c(iii)(A) and on the applicable Schedule J, Part I, line 3, column (a) 5c(iii)(A) (B) Enter the country code of the sanctioned country and enter the line 5c amount with respect to the sanctioned country on this line 5c(iii)(B) and on the applicable Schedule J, Part I, line 3, column (a) (C) Enter the country code of the sanctioned country and enter the line 5c amount with respect to the sanctioned country on this line 5c(iii)(C) and on the applicable Schedule J, Part I, line 3, column (a) 5c(iii)(C) (D) Enter the country code of the sanctioned country and enter the line 5c amount with respect to the sanctioned country on this line 5c(iii)(D) and on the applicable Schedule J, Part I, line 3, column (a) 5c(iii)(D) d Current earnings and profits in U.S. dollars (line 5c translated at the average exchange rate, as defined in section 989(b)(3) and the related regulations (see instructions)) -23,879.e Enter exchange rate used for line 5d 82.761650

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule H (Form 5471) (Rev. 12-2021)

SCHEDULE J (Form 5471)

Department of the Treasury Internal Revenue Service Name of person filing Form 5471 (Rev. December 2020)

Accumulated Earnings & Profits (E&P) of Controlled Foreign Corporation

▶ Attach to Form 5471.

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Identifying number

U93000DL2011NPL222639 Reference ID number

0000000-00

EIN (if any)

74-2989580

■ GEN

a Separate Category (Enter code - see instructions.) MIRACLE FOUNDATION INDIA Name of foreign corporation

THE MIRACLE FOUNDATION, INC.

 If code 901 is entered on line a, enter the country code for the sanctioned country (see instructions) Part I Accumulated E&P of Controlled Foreign Corporation

9 Check the box if person filing return does not have all U.S. shareholders' information to complete an amount in column (e) (see instructions) (0) (q) (a) Important: Enter amounts in functional currency.

			contract of the contract of the		i donori		
lmpo	Important: Enter amounts in functional currency.	(a)	(b) Post-1986	(c)	(q)	(e) Previously Taxed E&P (see instructions)	E&P (see instructions)
		Prost-2017 Ear Not Previously Taxed (post-2017 section 959(c)(3) balance)	Undistributed Farnings (post-1986 and pre-2018 section 959(c)(3) balance)	Previously Taxed (pre-1987 section 959(c)(3) balance)	Hovering Deficit and Deduction for Suspended Taxes	(i) Reclassified section 965(a) PTEP	(ii) Reclassified section 965(b) PTEP
a	Balance at beginning of year (as reported on prior						
٩	Beginning balance adjustments (attach statement)						
O	Adjusted beginning balance (combine lines 1a and 1b)						
2a							
q	Disallowed deduction for taxes suspended under						
	anti-splitter rules						
9	Current year E&P (or deficit in E&P) (enter amount						
	from applicable line 5c of Schedule H)						
4	E&P attributable to distributions of previously taxed						
	E&P from lower-tier foreign corporation						
5a	E&P carried over in nonrecognition transaction						
q	Reclassify deficit in E&P as hovering deficit after						
	nonrecognition transaction						
9	Other adjustments (attach statement)						
7	Total current and accumulated E&P (combine lines						
	1c through 6)						
00	Amounts reclassified to section 959(c)(2) E&P from						
	section 959(c)(3) E&P						
6	Actual distributions						
10	Amounts reclassified to section 959(c)(1) E&P						
	from section 959(c)(2) E&P						
11	Amounts included as earnings invested in U.S. property						
	and reclassified to section 959(c)(1) E&P (see instructions)						
12	Other adjustments (attach statement)						
13	Hovering deficit offset of undistributed post-						
	transaction E&P (see instructions)						
41	Balance at beginning of next year (combine lines 7 through 13)						

312421 04-01-23 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule J (Form 5471) (Rev. 12-2020)

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Schedule J (Form 5471) (Rev. 12-2020)

Part | Accumulated E&P of Controlled Foreign Co

Part		Accumulated E&P of Controlled Foreign Corporation ((continued)			N 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		9)	(e) Previously Taxed E&P (see instructions)	structions)		
	(iii) General section 959(c)(1) PTEP	(iv) Reclassified section 951A PTEP	(v) Reclassified section 245A(d) PTEP	(d) PTEP	(vi) Section 965(a) PTEP	(vii) Section 965(b) PTEP
19				-		
q						
O						
2a						
q						
8						
4						
5a						
q						
9						
7						
8						
6						
10						
=						
12						
13						
14				-		
		(e) Previously Taxed E&P (see instructions)	(see instructions)			(4)
						Total Section 964(a) E&P
	(viii) Section 951A PTEP	(ix) Section 245A(c	245A(d) PTEP (x) 8	(x) Section 951(a)(1)(A) PTEP		(combine columns (a), (b), (c), and (e)(i) through (e)(x)
1a						
q						
O						
2a						
q						
8						
4						
5a						
q						
9						
7						
8						
6						
10						
11						
12						
13						
14						
312422 04	+-01-23				-	Schedule J (Form 5471) (Rev. 12-2020)

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a	rait ii noripreviousiy raxed Ext Subject to necaptare as Subject Filtonie (section 352(c)(z))			
por	Important: Enter amounts in functional currency.			
	Balance at beginning of year	\blacktriangle	-	
	Additions (amounts subject to future recapture)	A	8	
1900	Subtractions (amounts recaptured in current year)	A	က	
4	Balance at end of year (combine lines 1 through 3)	A	4	

SCHEDULE M (Form 5471)

(Rev. December 2021) Department of the Treasury

Internal Revenue Service

Transactions Between Controlled Foreign Corporation and Shareholders or Other Related Persons

Attach to Form 5471.

▶ Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Name of person filing Form 5471

THE MIRACLE FOUNDATION, INC.

Name of foreign corporation

EIN (if any)

Reference ID number

MIRACLE FOUNDATION INDIA

00-0000000

U93000DL2011NPL222639

Important: Complete a separate Schedule M for each controlled foreign corporation. Enter the totals for each type of transaction that occurred during the annual accounting period between the foreign corporation and the persons listed in columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the average exchange rate for the foreign corporation's tax year. See instructions.

(a) Transactions	(h)	(C) Any domestic	(d) Any other foreign	(e) 10% or more U.S.	(f) 10% or more U.S.
of foreign corporation	(b) U.S. person filing this return	corporation or partnership controlled by U.S. person filing this return	corporation or partnership controlled by U.S. person filing this return	shareholder of controlled foreign corporation (other than the U.S. person filing this return)	shareholder of any corporation controlling the foreign corporation
1 Sales of stock in trade (inventory)					
2 Sales of tangible property other than stock in trade					
3 Sales of property rights (patents,	2000				
trademarks, etc.) 4 Platform contribution transaction payments received					
5 Cost sharing transaction payments received					
6 Compensation received for technical,					
managerial, engineering, construction,					
or like services					
7 Commissions received					
8 Rents, royalties, and license fees received					
9 Hybrid dividends received (see instr.)					
10 Dividends received (exclude hybrid dividends, deemed distributions under subpart F, and distributions of previously taxed income)					
11 Interest received					
12 Premiums received for insurance or					
reinsurance 13 Loan guarantee fees received					
14 Other amounts received (att. statement)					
15 Add lines 1 through 14					
16 Purchases of stock in trade (inventory)					
17 Purchases of tangible property other than stock in trade					
18 Purchases of property rights (patents, trademarks, etc.)					
19 Platform contribution transaction payments paid					
20 Cost sharing transaction payments paid					
21 Compensation paid for technical, managerial, engineering, construction, or like services					
22 Commissions paid					
3 Rents, royalties, and license fees paid					
4 Hybrid dividends paid (see instructions) 5 Dividends paid (exclude hybrid dividends					
paid)					
26 Interest paid					
27 Premiums paid for insurance or reinsurance					
28 Loan guarantee fees paid					
29 Other amounts paid (attach statement)					
O Add lines 16 through 29					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule M (Form 5471) (Rev. 12-2021)

Name of person filing Form 5471

Identifying number

THE MIRACLE FOUNDATION, INC.

74-2989580

THE INTERIOR POONDINITE	711, 1110.			/4-	4909300
(a) Transactions of foreign corporation	(b) U.S. person filing this return	(C) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
31 Accounts Payable					
32 Amounts borrowed (enter the maximum					
loan balance during the year) - see instr.					
33 Accounts Receivable					
34 Amounts loaned (enter the maximum					
loan balance during the year) - see instr.					

Schedule M (Form 5471) (Rev. 12-2021)

(Rev. December 2023)

Department of the Treasury Internal Revenue Service

Information Return of U.S. Persons With Respect to Certain Foreign Corporations

Go to www.irs.gov/Form5471 for instructions and the latest information. Information furnished for the foreign corporation's annual accounting period (tax year required by

and ending

OMB No. 1545-0123

Attachment Sequence No. 121

Internal Revenue Service section 898) (see instructions) beginning , , a				, and endin	a		Sequ	uence No. 1	21
Name of person filing this return				A Identifying num	A	,			
THE MIRACLE F	OUNDATION, IN	С.		74-2989	580				
Number, street, and room or suite n	o. (or P.O. box number if mail is not	delivered to street address	ss)	B Category of filer		ons. Check	applicable !	box(es).):	
1506 W. 6TH S				1a 1b 1	1c 2	3	4 X 5a	5b	5c
City or town, state, and ZIP co	8703			C Enter the total p					0.0
	APR 1	,2023 , and en	dina	you owned at the	.20		nting period	99	.99 %
	Form 5471 for the foreign cor		aing	MAK 31	,20	44			
	cified foreign financial assets				*************				
	5471 has been completed us				0				
	ked, enter the corresponding		nforma	ation" (see instructions)					
H Person(s) on whose behal	f this information return is file	d:							
(1) Name		(2) Add	iress		(3) Identifyin	a number		k applicable	box(es)
		1-/			(e) identifyii	ig numbor	Shareholder	Officer	Director
Important: Fill in all ap	plicable lines and schedule	s. All information	must	be in English. All amou	ints must be	stated in	U.S. dollar	S	
unless othe	erwise indicated.								
1a Name and address of for	eign corporation				b(1) Empl	oyer identif	ication num	ber, if any	
					0.0	-0000	000	A) 188	
					b(2) Refer	ence ID nui	mber (see ir	nstructions)	
							L2023		
THRIVE SCAL	E INTERNATION	AL PRIVATE	LI	MITED	b(3) Previ	ous reference	ce ID numbe	er(s), if any (see instr.)
ANNEXE BUIL	DING GF B4, G	K ENCLAVE	PAR	RT II, MASJ	(0)	0001010111	o io nambe	or (o), it daily (300 11 13 (1.)
NEW DELHI 1					c Coun	try under w	hose laws in	ncornorateo	1
INDIA					IN	DIA	11000 14110 11	noor por atoc	• :
	al place of business	f Principal	g Pri	ncipal business activity			nal currency	/ code	
incorporation NEW D	ELHI	business activity code number	C	ONSULTING					
10/18/23INDIA		541600					IN	R	
	mation for the foreign corpora		riod sta	ated above					
	fying number of branch office				b If a U.S. in	come tax re	eturn was fi	led enter	
THE MIRACLE	FOUNDATION,	INC -	ic Office	ou olates	b 11 a 0.0. 11	come tax re	1 100000	U.S. income	tay paid
1506 W 6TH					(i) Taxable in	come or (lo		(after all cre	
AUSTIN TX 7	8703								SERVICE CONTRACTOR
74-2989580									
c Name and address of forei	gn corporation's statutory or	resident agent		d Name and address (in	cluding corno	rate departs	ment if ann	licable) of	
in country of incorporation		obidont agont		person (or persons) v	vith custody of	the books	and records	of the fore	ian
				corporation, and the l	ocation of suc	h books and	d records, if	different	
KUSUM MOHAP	ΔΤΡΔ			THRIVE SC.	ATE TATE	מאמים	T C S T S T	DDTI	73 00 12
	DING GF B4, G	Z ENICT ATTE	ъ						
	110048	LINCLAVE	P	ANNEXE BU			i, GK	ENCLA	IVE P
INDIA	110046			NEW DELHI	11004	18			
	of the Foreign Corp	oration		INDIA					
Schodulo A Stock	or the roleigh corp	Joration			(L) N	mbas of al	nee leeve t		di
	(-) D1-41				3535557		res issued a		
	(a) Description of each	h class of stock				ng of annua		(ii) End of ar	
COMMON					account	ng period		ccounting p	
COMMON							0	1	0,000
LHA For Paperwork Reduct	ion Act Notice, see instruction	ns 312301	01-05-2	4			Form !	5471 (Par	12-2022)

Form 5471 (Rev. 12-2023)

Schedule B | Shareholders of Foreign Corporation

Part I U.S. Shareholders of Foreig	n Corp	oration (see instructions)			
(a) Name, address, and identifying number of shareholder	(b) Des Note	cription of each class of stock held by shareholder, This description should match the corresponding escription entered in Schedule A, column (a).	(c) Number of shares held at beginning of annual accounting period	(d) Number of shares held at end of annual accounting period	(e) Pro rata share of Subpart F income (enter as a percentage)
THE MIRACLE FOUNDATION 1506 W. 6TH STREET AUSTIN TX 78703 74-2989580	COMM	ON		9,999	99.99%
Part II Direct Shareholders of Fore	eign Co	prporation (see instructions)			
(a) Name, address, and identifying number of shareholder. Also, include country of incorporation or formation, if applicable.		(b) Description of each class of stock held Note: This description should match the description entered in Schedule A, c	corresponding	(c) Number of shares held at beginning of annual accounting period	(d) Number of shares held at end of annual accounting period
				Form 5471	(Rev. 12-2023)

Form 5471 (Rev. 12-2023)

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. generally accepted accounting principles (GAAP). Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules). However, if the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for dollar approximate separate transactions method (DASTM) corporations.

			Functional Currency	U.S. Dollars
	1a Gross receipts or sales	1a		
	b Returns and allowances	1b		
	c Subtract line 1b from line 1a	1c		
	2 Cost of goods sold	2		
	3 Gross profit (subtract line 2 from line 1c)	3		
16	4 Dividends	4		
ncome	5 Interest	5		
Ĕ	6a Gross rents	6a		
	b Gross royalties and license fees	6b		
	7 Net gain or (loss) on sale of capital assets	7		
	8a Foreign currency transaction gain or loss - unrealized	8a		
	b Foreign currency transaction gain or loss - realized	8b		
	9 Other income (attach statement)	9		
	10 Total income (add lines 3 through 9)	10		
	11 Compensation not deducted elsewhere	11		
	12a Rents	12a		
	b Royalties and license fees	12b		
us	13 Interest	13		
Deductions	14 Depreciation not deducted elsewhere	14		
Ď	15 Depletion	15		
De	16 Taxes (exclude income tax expense (benefit))	16		
	17 Other deductions (attach statement - exclude income tax expense			
	(benefit)) SEE STATEMENT 3	17	77,796.	940.
	18 Total deductions (add lines 11 through 17)	18	77,796.	940.
	19 Net income or (loss) before unusual or infrequently occurring items, and	10	11,130.	940.
Э	income tax expense (benefit) (subtract line 18 from line 10)	19	-77,796.	-940.
Net Income	20 Unusual or infrequently occurring items		11,150.	- 540.
를	21a Income tax expense (benefit) - current	21a		
Ne	b Income tax expense (benefit) - deferred	21b		
	22 Current year net income or (loss) per books (combine lines 19 through 21b)	22	-77,796.	-940.
	23a Foreign currency translation adjustments	23a	11,130.	- 540.
sive	b Other	23a		
hens	c Income tax expense (benefit) related to other comprehensive income	230		
Comprehensive Income	24 Other comprehensive income (loss), net of tax (line 23a plus line 23b less	23c		
රි	line 23c)	24		

Form 5471 (Rev. 12-2023)

Page 4

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations

	Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1	Cash	1		
2a	Trade notes and accounts receivable	2a		
b	Less allowance for bad debts	2b	(1/
3	Derivatives	3		
4	Inventories	4		
5	Other current assets (attach statement) SEE STATEMENT 6	5		1,418.
6	Loans to shareholders and other related persons	6		1,410.
7	Investment in subsidiaries (attach statement)	7		
8	Other investments (attach statement)	8		
9a	Buildings and other depreciable assets	9a		
b	Less accumulated depreciation	9b	() (
10a	Depletable assets	10a	<u> </u>	
b	Less accumulated depletion	10b	1	1
11	Land (net of any amortization)	11		
12	Intangible assets:			
a	Goodwill	12a		
b	Organization costs	12b		
C	Patents, trademarks, and other intangible assets	12c		
d	Less accumulated amortization for lines 12a, 12b, and 12c	12d	() (
13	Other assets (attach statement)	13		
14	Total assets	14		1,418.
	Liabilities and Shareholders' Equity			1,410.
15	Accounts payable	15		1,150.
16	Other current liabilities (attach statement)	16		
17	Derivatives	17		
8	Loans from shareholders and other related persons	18		
19	Other liabilities (attach statement)	19		
20	Capital stock:	Part le		
a	Preferred stock	20a		
b	Common stock	20b		
21	Paid-in or capital surplus (attach reconciliation)	21		
22	Retained earnings	22		268.
23	Less cost of treasury stock	23	()(
.4	Total liabilities and shareholders' equity nedule G Other Information	24	(1)	1,418.

		Yes	No
1	During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in any foreign partnership?		Х
	If "Yes," see the instructions for required statement.		
2	During the tax year, did the foreign corporation own an interest in any trust?	1000	x
3	During the tax year, did the foreign corporation own any foreign entities that were disregarded as separate from their owner under Regulations sections 301.7701-2 and 301.7701-3 or did the foreign corporation own any foreign branches (see instructions)?		x
	If "Yes," you are generally required to attach Form 8858 for each entity or branch (see instructions).	-	21
4a	During the tax year, did the filer pay or accrue any base erosion payment under section 59A(d) to the foreign corporation or did the filer have a base erosion tax benefit under section 59A(c)(2) with respect to a base erosion payment made or accrued to the foreign corporation (see instructions)?		v
	If "Yes," complete lines 4b and 4c.		Λ
b	Enter the total amount of the base erosion payments		
C	Enter the total amount of the base erosion tax benefits	- 1300	
5a	During the tax year, did the foreign corporation pay or accrue any interest or royalty for which the deduction is not		
	allowed under section 267A?		x
	If "Yes," complete line 5b.	4.66	-1
3 12331	Enter the total amount of the disallowed deductions (see instructions) \$		

FORM 5471 OTHER D	EDUCTIONS		STATEMENT 3
DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
ADMINISTRATIVE COSTS	77,796.	82.761650	940.
TOTAL TO 5471, SCHEDULE C, LINE 17	77,796.		940.

FORM 5471 O	THER	CURRENT	ASSETS	STATEMENT 6
DESCRIPTION			BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
ADVANCES				1,418.
TOTAL TO 5471, PAGE 4, SCHEDUL	ΕF,	LINE 5		1,418.

Sc	hedule G Other Information (continued)		Pa	age 2
	Continuedy	Ye	s	No
6a	Is the filer claiming a foreign-derived intangible income (FDII) deduction (under section 250) with respect to any			
	transactions with the foreign corporation?			X
	If "Yes," complete lines 6b, 6c, and 6d. See instructions.			
b	Enter the amount of gross receipts derived from all sales of general property to the foreign corporation that the			
	filer included in its computation of foreign-derived deduction eligible income (FDDEI)	\$		
С	Enter the amount of gross receipts derived from all sales of intangible property to the foreign corporation that the filer inc in its computation of FDDEI			
d	Enter the amount of gross receipts derived from all services provided to the foreign corporation that the filer included in	Ψ		
	its computation of FDDEI	\$		
7	During the tax year, was the foreign corporation a participant in any cost sharing arrangement?			X
	If the answer to question 7 is "Yes," complete a separate Schedule G-1 for each cost sharing arrangement in			15/6
	which the foreign corporation was a participant during the tax year.			
8	From April 25, 2014, to December 31, 2017, did the foreign corporation purchase stock or securities of a			
	shareholder of the foreign corporation for use in a triangular reorganization (within the meaning of Regulations section 1.358-6(b)(2))?			x
9a	Did the foreign corporation receive any intangible property in a prior year or the current tax year for which the U.S.			Value V
	transferor is required to report a section 367(d) annual income inclusion for the tax year?			X
	If "Yes," go to line 9b.			
b	Enter in functional currency the amount of the earnings and profits reduction pursuant to section 367(d)			
	(2)(B) for the tax year			
10	During the tax year, was the foreign corporation an expatriated foreign subsidiary under Regulations section 1.7874-12(a)(9)?			X
	If "Yes," see instructions and attach statement.			
11	During the tax year, did the foreign corporation participate in any reportable transaction as defined in Regulations			
	section 1.6011-4?		\perp	X
40	If "Yes," attach Form(s) 8886 if required by Regulations section 1.6011-4(c)(3)(i)(G).			
12	During the tax year, did the foreign corporation pay or accrue any foreign tax that was disqualified for credit under			
13	section 901(m)?			X
10	During the tax year, did the foreign corporation pay or accrue foreign taxes to which section 909 applies, or treat			
14	foreign taxes that were previously suspended under section 909 as no longer suspended?		$\overline{}$	X
17	Did you answer "Yes" to any of the questions in the instructions for line 14? If "Yes," enter the corresponding code(s) from the instructions and attach statement			X
15	Does the foreign corporation have interest expense disallowed under section 163(j) (see instructions)?		-	X
	If "Yes," enter the amount	\$		Λ
16	Does the foreign corporation have previously disallowed interest expense under section 163(j) carried forward			
	to the current tax year (see instructions)?			X
	if res, enter the amount	\$		
17a	Did any extraordinary reduction with respect to a controlling section 245A shareholder occur during the tax year (see instructions)?			x
b	If the answer to question 17a is "Yes," was an election made to close the tax year such that no amount is treated	***************************************		
	as an extraordinary reduction amount or tiered extraordinary reduction amount (see instructions)?			
18a	Did the filer have any loan to or from the foreign corporation to which the safe-haven rate rules of Regulations			
	section 1.482-2(a)(2)(iii)(B) are applicable, and for which the filer used a rate of interest within the relevant safehaven			
	range (100% to 130% of the applicable Federal rate (AFR) for the relevant term)?		_	X
b	Did the filer have any loan to or from the foreign corporation to which the safe-haven rate rules of Regulations			
	section 1.482-2(a)(2)(iii)(B) are applicable, and for which the filer used a rate of interest outside the relevant safehaven			
100	range (100% to 130% of the applicable Federal rate (AFR) for the relevant term)?		+	X
154	Did the filer issue a covered debt instrument in any of the transactions described in Regulations section 1.385-3(b) (2) with respect to the foreign corporation during the tax year, or, did the filer issue or refinance indebtedness			
	owed to the foreign corporation during the 36 months before or after the date of a distribution or acquisition			
	described in Regulations section 1.385-3(b)(3)(i) made by the filer of this Form 5471, and either the issuance or			
	refinance of indebtedness, or the distribution or acquisition, occurred during the tax year?			X
b	If the answer to question 19a is "Yes," provide the following.		1	You!
	(1) The amount of such transaction(s), distribution(s), and acquisition(s)	\$		
	(2) The amount of such related party indebtedness	\$		

Form 5471 (Rev. 12-2023)

Schedule I	Summary of	f Shareholder's	Income From	Foreign (Corporation	(see instructions
oonoudio i	ounning o	i oliai oliaiaa				1300 III SU GOLIOI I

If item H on page 1 is completed, a separate Schedule I must be filed for each Category 4, 5a, or 5b filer for whom reporting is furnished on this Form 5471. This Schedule I is being completed for:

Name o	f U.S. shareholder Identifying number			
1 a	Section 964(e)(4) subpart F dividend income from the sale of stock of a lower-tier foreign corporation			
	(see instructions)	1a		
b	Section 245A(e)(2) subpart F income from hybrid dividends of tiered corporations (see instructions)	41		
C	Subpart F income from tiered extraordinary disposition amounts not eligible for subpart F exception			
	under section 954(c)(6)	1c		
d	Subpart F income from tiered extraordinary reduction amounts not eligible for subpart F exception			
	under section 954(c)(6)	1d		
е	Section 954(c) Subpart F Foreign Personal Holding Company Income (enter result from Worksheet A)	1e		
f	Section 954(d) Subpart F Foreign Base Company Sales Income (enter result from Worksheet A)	1f		
g	Section 954(e) Subpart F Foreign Base Company Services Income (enter result from Worksheet A)	1g		
h	Other subpart F income (enter result from Worksheet A)	1h		
2	Earnings invested in U.S. property (enter the result from Worksheet B)			
3	Reserved for future use	4.5		
4	Factoring income			
	See instructions for reporting amounts on lines 1, 2, and 4 on your income tax return.			
5 a	Section 245A eligible dividends (see instructions)	5a		
b	Extraordinary disposition amounts (see instructions)	5b		
C	Extraordinary reduction amounts (see instructions)	5c		
d	Section 245A(e) dividends (see instructions)	5d		
е	Dividends not reported on line 5a, 5b, 5c, or 5d			
6	Exchange gain or (loss) on a distribution of previously taxed earnings and profits		->- 3X	
			Yes	No
7 a	Was any income of the foreign corporation blocked?			
b	Did any such income become unblocked during the tax year (see section 964(b))?			
If the a	nswer to either question is "Yes," attach an explanation.			
8 a	Did this U.S. shareholder have an extraordinary disposition (ED) account with respect to the foreign corporation at			
	any time during the tax year (see instructions)?		. L	X
b	If the answer to question 8a is "Yes," enter the U.S. shareholder's ED account balance at the beginning of the CFC year			
	\$ and at the end of the tax year \$ Provide an attachment detailing an	y changes from the		
	beginning to the ending balances.			
C	Enter the CFC's aggregate ED account balance with respect to all U.S. shareholders at the beginning of the CFC year			
	\$ and at the end of the tax year \$ Provide an attachment detailing an	y changes from the		
	beginning to the ending balances.	121		
9	Enter the sum of the hybrid deduction accounts with respect to stock of the foreign corporation (see instructions)	Form 547	4	

SCHEDULE H (Form 5471)

(Rev. December 2021)

Current Earnings and Profits

Attach to Form 5471.

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service Name of person filing Form 5471 Identifying number THE MIRACLE FOUNDATION, INC. 74-2989580 Name of foreign corporation EIN (if any) Reference ID number (see instr.) THRIVE SCALE INTERNATIONAL PRIVAT 00-0000000 1170200DI.2023FTC

1	Current year net income or (loss) per foreign books of account	t <u>.</u>			1	-77,796.
2	Net adjustments made to line 1 to determine current					
	earnings and profits according to U.S. financial and tax					
	accounting standards (see instructions):		Net Additions	Net Subtractions		
а	Capital gains or losses	. 2a				
b	Depreciation and amortization				P. B.	
C	Depletion	. 2c				
a	Investment or incentive allowance					
е	Charges to statutory reserves					
f	Inventory adjustments	2f				
g	Income taxes (see Schedule E, Part I, Section 1, line 6,					
-	column (m), and Part III, line 3, column (i))	. 2g				
h	Foreign currency gains or losses					
i	Other (attach statement)	2i				
3	Total net additions Total net subtractions		The Street Co.			
00000		4				77 706
5a					5a	-77,796.
b	DASTM gain or (loss) for foreign corporations that use DASTM				5b	
C	Combine lines 5a and 5b and enter the result on line 5c. Then	enter on li	nes 5c(i), 5c(ii), and 5	c(iii)(A)		
	through 5c(iii)(D) the portion of the line 5c amount with respect on those lines			lown		77 F06
	on those lines (i) General category (enter amount on applicable Schedule J		······		5c	-77,796.
			F-(1)			
	(ii) Passive category (enter amount on applicable Schedule J	Dort I	5c(i)			
	line 3, column (a))		F-/::\			
	(iii) Section 901(j) category:		5c(ii)			
	(A) Enter the country code of the sanctioned country					
	and enter the line 5c amount with respect to the sand	-				
	country on this line 5c (iii)(A) and on the applicable Sci				Jeses L	
	Part I, line 3, column (a)		5c(iii)(A)			
	(B) Enter the country code of the sanctioned country		JO(III)(A)			
	and enter the line 5c amount with respect to the sand					
	country on this line 5c(iii)(B) and on the applicable Sc					
	Part I, line 3, column (a)		5c(iii)(B)			
	(C) Enter the country code of the sanctioned country	***************	30,111,727			
	and enter the line 5c amount with respect to the sand	-				
	country on this line 5c(iii)(C) and on the applicable Sc					
	Part I, line 3, column (a)		5c(iii)(C)			
	(D) Enter the country code of the sanctioned country					
	and enter the line 5c amount with respect to the sand					
	country on this line 5c(iii)(D) and on the applicable Sc					
	Part I, line 3, column (a)		5c(iii)(D)			
d	Current earnings and profits in U.S. dollars (line 5c translated	at the aver	age exchange rate. a	S		
	defined in section 989(b)(3) and the related regulations (see in				5d	-940.
е	Enter exchange rate used for line 5d	-,	<u> </u>	82.761650		

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule H (Form 5471) (Rev. 12-2021)

SCHEDULE M (Form 5471)

(Rev. December 2021)
Department of the Treasury
Internal Revenue Service

Transactions Between Controlled Foreign Corporation and Shareholders or Other Related Persons

Attach to Form 5471.

▶ Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Name of person filing Form 5471

THE MIRACLE FOUNDATION, INC.

Name of foreign corporation

EIN (if any)

Reference ID number

THRIVE SCALE INTERNATIONAL PRIVAT 00-000000 U70200DL2023FTC421570

Important: Complete a separate Schedule M for each controlled foreign corporation. Enter the totals for each type of transaction that occurred during the annual accounting period between the foreign corporation and the persons listed in columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the average exchange rate for the foreign corporation's tax year. See instructions.

	ne relevant functional currency and the ex				(e) 10% or more U.S.	82.76165
	(a) Transactions of foreign corporation	(b) U.S. person filling this return	(C) Any domestic corporation or partnership controlled by U.S. person filling this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
1 Sal	les of stock in trade (inventory)					
2 Sal	les of tangible property other than					
sto	ock in trade					
	les of property rights (patents,					
tra	demarks, etc.) Iform contribution transaction payments					
4 Plat	tform contribution transaction payments eived					
	st sharing transaction payments received					
6 Co	mpensation received for technical,					
ma	anagerial, engineering, construction,					
	like services					
7 Co	mmissions received					
	nts, royalties, and license fees received					
9 Hy	rbrid dividends received (see instr.)					
div	vidends received (exclude hybrid vidends, deemed distributions under bpart F, and distributions of eviously taxed income)					
	terest received					
	emiums received for insurance or					
Company of the	CONTRACTOR OF THE PROPERTY OF					
	an guarantee fees received					
	her amounts received (att. statement)					
	Id lines 1 through 14		 	<u> </u>		
	urchases of stock in trade (inventory)					
	irchases of tangible property other					
	an stock in trade					
	urchases of property rights					
	atents, trademarks, etc.)					
	atform contribution transaction			+		
	lyments paid					
21 Cc	ost sharing transaction payments paid pompensation paid for technical, anagerial, engineering, construction,					
or	like services					
22 Cc	ommissions paid					
23 Re	ents, royalties, and license fees paid					
25 Di	ybrid dividends paid (see instructions) vidends paid (exclude hybrid dividends id)					
	terest paid					
	emiums paid for insurance or reinsurance					
	ther amounts paid (attach statement)					
	dd lines 16 through 29					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule M (Form 5471) (Rev. 12-2021)

Name of person filing Form 5471

Identifying number

THE MIRACLE FOUNDATION, INC.

74-2989580

THE MILITICAL LOCKDILL LOC	11/ 11/01				
(a) Transactions of foreign corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
31 Accounts Payable					
32 Amounts borrowed (enter the maximum					
loan balance during the year) - see instr.					
33 Accounts Receivable					
34 Amounts loaned (enter the maximum loan balance during the year) - see instr.					

Schedule M (Form 5471) (Rev. 12-2021)

THE MIRACLE FOUNDATION, INC. 2023 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL -

Sec 179 Deduction		1,975.	1,975.		0	0.	0	.0	.0	0.	0	0.	.0	0.	0.	0.	0.
Accumulated Depreciation		18,269.	18,269.		316.	.059	1,346.	3,291.	1,351.	2,400.	1,114.	495.	970.	721.	1,137.	2,007.	622.
Basis For Depreciation		79,012.	79,012.		633.	650.	1,346.	3,292.	1,351.	2,400.	1,114.	495.	970.	721.	1,137.	2,007.	622.
Reduction In Basis			0.														
Bus % Excl					Minimization												
Unadjusted Cost Or Basis		79,012.	79,012.		633.	650.	1,346.	3,292.	1,351.	2,400.	1,114.	495.	970.	721.	1,137.	2,007.	622.
Line No.		910			17	16	16	16	16	16	16	16	16	16	16	16	16
Life		40.00			27.00	5.00	5.00	5.00	2.00	3.00	5.00	7.00	5.00	5.00	5.00	5.00	5.00
Method		SL			200DB	SL	SL	SL	2SL	2SL	SL	2SL	SL	5SL	5SL	SL	SL
Date Acquired		121713SL			121509200DB7.00	053011	120811SL	122211SL	041612	051112	070112SL	113012	121712SL	111815	112315	100815SL	063016SL
Description	BUILDINGS	BUILDING	* 990 PAGE 10 TOTAL BUILDINGS	MACHINERY & EQUIPMENT	3 SOUND SYSTEM	CONFERENCE PHONE	COMPUTER EQUIPMENT	6 COMPUTER EQUIPMENT	7 DELL COMPUTER	8 SOFTWARE	9BJ LAPTOP	10DISHWASHER	11KA DELL COMPUTER	12LAPTOP (INDIA)	13 MACBOOK	2 LAPTOPS	15 INDIA LAPTOP
Asset No.		2			n	4	5	9	7	80	9	10	11	12	13	14	1

328102 04-01-23

THE MIRACLE FOUNDATION, INC. 2023 DEPRECIATION AND AMORTIZATION REPORT

— CURRENT YEAR FEDERAL —

Current Year Deduction	0.	0.	0.	0.	0.	19.	147.	91.	73.	232.	184.	366.	240.	361.	257.	873.	2,843.	
Current Sec 179																		
Accumulated Depreciation	1,474.	5,768.	1,600.	1,079.	850.	1,150.	4,273.	2,659.	1,027.	1,150.	921.	1,472.	840.	1,113.	514.	1,091.	44,828.	
Basis For Depreciation	1,474.	5,768.	1,600.	1,079.	850.	1,169.	4,420.	2,750.	1,100.	1,382.	1,105.	1,838.	1,199.	1,804.	1,286.	4,364.	51,353.	
Reduction In Basis																	0.	
Bus % Excl																		
Unadjusted Cost Or Basis	1,474.	5,768.	1,600.	1,079.	850.	1,169.	4,420.	2,750.	1,100.	1,382.	1,105.	1,838.	1,199.	1,804.	1,286.	4,364.	51,353.	
No.	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16		
Life	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00		
Method	SL	SL	SL	SL	SL	SL	SL	SL	SI	SL	SL	SL	SL	SL	SL	SL		
Date Acquired	063016SL	010417SL	032717SL	090117SL	123117SL	042218SL	05221851	052518SL	081518SL	011819SL	01221981	040319SL	101519SL	030120SL	03082181	12212181	2.63	
Description	17SA LAPTOP	32 COMPUTERS	33DELL - ASHLEY	34 DELL LATITUDE 5480	INSPIRON 13 7000 SERIES	39 EAD MAC LAPTOP	40 SERVER	POWER EDGE T330 SERVER	42DELL LAPTOP	DEI	LG SMART 4K TV & TILT MOUNT	45LAPTOP	46 DELL LATITUDE 7480	49LAPTOP-LB	51DELL LATITUDE 5510	MI	* 990 PAGE 10 TOTAL MACHINERY & EQUIPME	T.AND
Asset No.	17	32	33	34	36	39	40	41	42	43	44	45	46	49	51	53		

328102 04-01-23

THE MIRACLE FOUNDATION, INC. 2023 DEPRECIATION AND AMORTIZATION REPORT

— CURRENT YEAR FEDERAL

Current Year Deduction	0.	0.		0.	.0	0.	246.	1,467.	0.	1,442.	0.	773.	. 67.	4,118.	729.	530.	369.	585.
Current Sec 179																		
Accumulated Depreciation		0.		1,690.	1,239.	1,281.	2,056.	10,636.	27,051.	9,734.	544.	4,251.	369.	16,471.	547.	574.		
Basis For Depreciation	316,048.	316,048.		1,690.	1,239.	1,281.	9,824.	22,000.	27,051.	21,631.	544.	11,600.	1,000.	61,763.	10,930.	7,950.	2,215.	5,013.
Reduction In Basis		0.																
Bus % Excl																		
Unadjusted Cost Or Basis	316,048.	316,048.		1,690.	1,239.	1,281.	9,824.	22,000.	27,051.	21,631.	544.	11,600.	1,000.	61,763.	10,930.	7,950.	2,215.	5.013.
Line No.				91	16	16	16	91	16	910	16	910	016	016	910	910	16	9
Life				2.00	2.00	5.00	40.00	15.00	5.00	15.00	5.00	15.00	15.00	15.00	15.00	15.00	2.00	00
Method								SL	SL	SL		SL	SL	SL	SL			
Date Acquired	121713L			012214SL	033114SL	052614SL	100814SL	123115	15	063016	123117SL	092717SL	101117SL	032919SL	062922SL	030422EL	061523SL	090723gT
Description		* 990 PAGE 10 TOTAL LAND	ОТНЕК	18 EAD COMPUTER	19 CROMA COMPUTER	20 NIVEDITA COMPUTER	AC AND DUCT WORK	22 PAVING	VIDEO PRODUCTI	RESIDUE AND PAINT BUILDING	DELL LATITUDE 3580	SEWER LINE REPLACEMENT	38DRIVEWAY CONCRETE	BUILDING IMPROVEMENT	WINDOWS	55 PAINT	56 APPLE LAPTOP	STATEON CODIER
Asset No.	1			18	19	20	21	22	23	24	35	37	38	48	54	55	26	F 7

328102 04-01-23

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

THE MIRACLE FOUNDATION, INC. 2023 DEPRECIATION AND AMORTIZATION REPORT

— CURRENT YEAR FEDERAL —

Current Year Deduction	10,326.			0.	0.	0.	.0	0.	0	622.	622.	622.		0.	0.	0.	15,766.	
Current Sec 179					THE STREET										200000000000000000000000000000000000000		AND DESCRIPTION OF THE PERSON NAMED IN	
Accumulated Depreciation	76,443.			15,000.	30,345.	6,700.	7,031.	12,160.	59,688.	21,753.	152,677.	152,677.		34,681.	34,681.	34,681.	326,898.	
Basis For Depreciation	185,731.			15,000.	30,345.	6,700.	7,031.	12,160.	59,688.	22,375.	153,299.	153,299.		34,681.	34,681.	34,681.	820,124.	
Reduction In Basis	0.										0	0.			0	0.	0	
Bus % Excl																		
Unadjusted Cost Or Basis	185,731.			15,000.	30,345.	6,700.	7,031.	12,160.	59,688.	22,375.	153,299.	153,299.		34,681.	34,681.	34,681.	820,124.	
No.			- Aller	43	43	43	43	43	43	43				43				
Life				36M	36M	36M	36M	36M	36M	36M				36M				
Method																		
Date Acquired				101013	063015	063015	063015	063015	122019	050120				111412				
Description	* 990 PAGE 10 TOTAL OTHER	SOFTWARE	OTHER	26 WEBSITE	27 MAGNTIKA SOFTWARE	28 REFRESHWEB SOFTWARE 063015		NOW IT MATTERS SOFTWARE	47WEBSITE	EBSITE	PAGE 10	* 990 PAGE 10 TOTAL - SOFTWARE	OTHER	CAPITALIZED WE	* 990 PAGE 10 TOTAL OTHER	* 990 PAGE 10 TOTAL - SOFTWARE	* GRAND TOTAL 990 PAGE 10 DEPR & AMOR	
Asset No.				26	27	28	29	30	47	50				25				

(D) - Asset disposed

328102 04-01-23

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2023 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL -

THE MIRACLE FOUNDATION, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	CURRENT YEAR ACTIVITY											
	BEGINNING BALANCE					812,896.		0.	812,896.	326,898.		
	ACQUISITIONS					7,228.		0.	7,228.	0.		
	DISPOSITIONS					0.		0.	0.	0.		
	ENDING BALANCE					820,124.		0	820,124.	326,898.		
										Print		
328102 04-01-23	1-23				1							

(D) - Asset disposed

*ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

- NEXT YEAR FEDERAL -

THE MIRACLE FOUNDATION, INC.

Amount Of Depreciation	1,975.	0.		.00	00	0.	0.0	0	0.	0.	0.							0.0						-	330.	L 01
Accumulated Depreciation	20,244.	HU	34	, 29	2,400.	,114	495.	-	-	2,007.	62	, 42	H (9/	, 600	OEO CEO	169	4,420.	,750	,100	,382	, 10	-	, 08	-	771.
Basis For Depreciation	79,012.	633.	0 6	2,	2,400.	,114	495.	721	,137	000	9	4	マー		0	610	1 60	4.420.	,750	,100	43	4	8	Τ,	8	
* Reduction In Basis																										
Unadjusted Cost Or Basis	79,012.	m L	34	, 29	1,351.	,114	49	70	13	07	62	, 42	7	,76	, 60	0,	850	4 4	.750	100	,382	,105	,83	,19	8	, 28
Life	40.00	-			3.00																					
Method	3SL	9200DB	SI	ISL	2SL 2SL	SIL	SEL	SSL	SSL	SSL	SSL	SSL	5SL	1SI	7SL	7SL	7SL	S S L	SZI,	SST,	9SL	9SL	9SL	9SL	OSL	1SI
Date Acquired	121713	2150	5301	2221	04161	7011	1301	2171	1237	0081	6301	6301	6301	1041	3271	9011	2311	T777	5251	8151	1181	1221	4031	0151	3012	3082
Description	BUILDINGS BUILDING * 990 PAGE 10 TOTAL BUILDINGS	MACHINERY & EQUIPMENT SOUND SYSTEM	CONFERENCE PHONE	COMPUTER	DELL COMPUTER	B.T. I.APTOP		KA DELL	LAPTOP (INDIA)		IH	CB LAPTOP	SA LAPTOP	COM	DELL - ASHLEY	DELL LATITUDE 548	INSPIRON 13 7000 SERIES		DEKVER DOMED EDGE #330 CEDIVED				т.артор	1	L'APTOP-LB	
Asset No.	2	3	4 4	9	7	0 0	10	11	12	14	15	16	17	32	33	34	36	39	40	41	75	7 4 7	45	46	49	51

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL -

THE MIRACLE FOUNDATION, INC.

	100		-		-	-	-111	-		-	011/28	2		- 2	-				7/1/3	20	1 3	- 2				(50)	10:00	- 51		7,5	Total .	i god	5
Amount Of Depreciation	873.		1,579.		0.	0.		0.	0.	0	246.	1,467.	0.	1,442.	0.	773.	. 67.	4,118.	729.	530.	443.	00,	10,818.			0.	0.	0	0.		0.	0.	0.
Accumulated Depreciation	1,964.		47,671.			0.		69'	,23	,28	,30	2,10	27,051.	1,17	4	2	3	,5	-	,10	369.	∞	86,769.			00,	0,3	,70	,03	2,16	59,688.	2,37	3,29
Basis For Depreciation	4,364.		51,353.		316,048.	16,04		69'	,23	,28	,82	2,00	27,051.	1,63	54	,60	00,	16	0,93	,95		,01	185,731.			000,	0,34	1	,03	2,16	59,688.	2,37	6
Reduction In Basis																																	
Unadjusted Cost Or Basis	4,364.		51,353.		316,048.	16,048		69	,2	, 28	,82	2,0	27,051.	1,63	4	,60	00'	9	0,93	,95	,2	,01	185,731.			5,00	-	, 70	0,	2,16	59,688.	2,37	3,29
Life	5.00							0.	.0	0.	0.	5.0	5.00	2	0.	5.0	5.0	2	5.0	5.0	0.	0.					36M	36M	36M	36M	36M	36M	
Method	SI				31			4SL	4SL	4SL	4SL	5SL	5SL	SIL	'SI	'SI	'SI	SL	SI	SI	SIL	SIL											
Date Acquired	122121				12171			1221	3311	5261	0081	2311	12311	6301	2311	9271	0111	3291	6292	3042	615	9072				1010	6301	6301	6301	6301	122019	5012	
Description	CISCO MERAKI MR36 WIRELESS ACCESS 53POINT	* 990 PAGE 10 TOTAL MACHINERY &	EQUIPMENT	LAND	LAND	* 990 PAGE 10 TOTAL LAND	OTHER	EAD COMPUTER	CROMA COMPUTER	NIVEDITA COMPUTER	AC AND DUCT WORK	PAVING	VIDEO PRODUCTION/PROMOTIONS	RESIDUE AND PAINT BUILDING	DELL LATITUDE 3580	SEWER LINE REPLACEMENT	DRIVEWAY CONCRETE	48BUILDING IMPROVEMENT	WINDOWS	PAINT	56APPLE LAPTOP	57 XEROX COPIER	* 990 PAGE 10 TOTAL OTHER	SOFTWARE	OTHER	WEBSITE	TAGNTIKA SOFTWARE	28REFRESHWEB SOFTWARE	STRATEGIC GROWTH SOFTWARE	NOW IT MATTERS SOFTWARE	WEBSITE	WEBSITE	* 990 PAGE 10 TOTAL OTHER
Asset No.	531	~	H	H	7	7	0	18E	190	20	212	22E	23	24 F	35	375	38	48E	54 M	55E	562	57.3	*	02		26 M	27 N	28 R	298		_	50 M	*

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL -

THE MIRACLE FOUNDATION, INC.

		-				100	10000	55.00	ESCAL STREET				
Amount 0f Depreciation	0	0.0	.0	14,372.									
Accumulated Depreciation	153,299.	34,681.	34,681.	342,664.									
Basis For Depreciation	153,299.	81	34,681.	820,124.									NOTICE AND PERSONS ASSESSED.
Reduction In Basis		00000000000000000000000000000000000000											THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O
Unadjusted Cost Or Basis	153,299.	34,681.	34,681.	820,124.									THE PERSON NAMED IN COLUMN
Life		36M											200000000000000000000000000000000000000
Method													TO SCHOOL STATE OF THE PARTY OF
Date Acquired		111412											100
Description	* 990 PAGE 10 TOTAL - SOFTWARE OTHER	ALIZED WEBSITE	* 990 PAGE 10 TOTAL OTHER * 990 PAGE 10 TOTAL - SOFTWARE	* GRAND TOTAL 990 PAGE 10 DEPR & AMORT									
Asset No.		25		. 7									1

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone