### **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.

OMB No. 1545-0047 Open to Public Inspection

Dani	adment of	the Treasur	Do not enter social security numbers on this form as it may			Open to Public
Inter	nal Reven	the Treasur nue Service	Go to www.irs.gov/Form990 for instructions and the late			Inspection
Α	For the	e 2022 ca	alendar year, or tax year beginning $07/01/22$ , and ending $06/30$	0/23		
В	Check if ap	pplicable:	C Name of organization		D Employer	identification number
	Address cl	hange	THE DRAKE HOUSE, INC.			
H	Name sho		Doing business as			943038
Ц	Name cha	inge	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone	number 587-4712
-	Initial retur	-	10500 CLARA DRIVE		110-3	001-4112
	Final return terminated		City or town, state or province, country, and ZIP or foreign postal code			
			ROSWELL GA 30075		G Gross rece	ipts\$ 3,019,791
닏	Amended .	termin	F Name and address of principal officer:	H(a) Is this a gro	oup relum for su	bordinates? Yes X No
	Application	n pending	NESHA MASON			
			10500 CLARA DRIVE	H(b) Are all sub		
			ROSWELL GA 30075	if "No,	" attach a list. S	See instructions
1	Tax-exen	npt status:	X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527			
<del>-</del>	Website:	7.77	WW.THEDRAKEHOUSE.ORG	H(c) Group exe	emption number	
ĸ		organization:		L Year of formation: 2	004	M State of legal domicile: GA
440	art I		mmary			
			scribe the organization's mission or most significant activities:			
	1 1 5	Briefly des	MPOWER WOMEN AND THEIR CHILDREN EXPERIENCING HOM	ELESSNESS T	O ACHIE	EVE
Se			OMIC INDEPENDENCE AND LONG-TERM STABILITY.	3		
Governance	1 8	ECON	OMIC INDEPENDENCE AND HONG-TERM STREETHIT.			**********
/eri						
Ś			s box if the organization discontinued its operations or disposed of more than			16
ంర			of voting members of the governing body (Part VI, line 1a)			
es			of independent voting members of the governing body (Part VI, line 1b)			16
Ϋ́	5 7	Total num	ber of individuals employed in calendar year 2022 (Part V, line 2a)		. 5	33
Activities	6 7	Total num	nber of volunteers (estimate if necessary)			153
-	7a1	Total unre	elated business revenue from Part VIII, column (C), line 12	. 1997	7a	0
			ated business taxable income from Form 990-T, Part I, line 11		7b	0
_				Prior Ye	ar	Current Year
ďΣ	8 (	Contributi	ions and grants (Part VIII, line 1h)		8,960	2,817,481
Revenue	9 F	Program s	service revenue (Part VIII, line 2g)		4,432	115,948
š	10 1	Investmer	nt income (Part VIII, column (A), lines 3, 4, and 7d)	-1	9,038	44,210
ď	1		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	28	9,173	42,152
			enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,527	3,019,791
-			nd similar amounts paid (Part IX, column (A), lines 1–3)			0
			paid to or for members (Part IX, column (A), line 4)			0
				1,11	4,978	1,261,532
ses		Drofossio	other compensation, employee benefits (Part IX, column (A), lines 5–10) nal fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25)  229,493	**		0
Expens	bar	Fibiossioi Total fund	training expenses (Part IX, column (D), line 25) 229, 493			
쏬	1	other rund	penses (Part IX, column (A), lines 11a–11d, 11f–24e)	97	0,172	1,260,699
_	1 11 3		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)	4.4	5,150	2,522,231
				**	8,377	497,560
	19 F	Revenue	less expenses. Subtract line 18 from line 12	Beginning of Cu		End of Year
Net Assets or		Total acce	ets (Part X, line 16)	E 60	9,705	6,637,090
SSE	20 1				2,315	572,140
et A	21	lotal liabl	ilities (Part X, line 26) s or fund balances. Subtract line 21 from line 20		7,390	6,064,950
					7,000	0/00-/
<u>t</u>	Part II	Sig	gnature Block		and of mules	soulades and holiaf it is
U	Inder per	nalties of p	perjury, I declare that I have examined this return, including accompanying schedules and sta complete. Declaration of preparer (other than officer) is based on all information of which prep	atements, and to the t arer has any knowled	lae.	lowledge and belief, it is
- tr	ue, corre	ect, and co		,,	111	141/2022
		Thu	de Masa		Dalla	1191202
Sig	gn	Signalure			Date	
He	ere	NESH	HA MASON EXECUTIV	E DIRECTO	K	
		Type or pr	rint name and title			
		Print/Type	e preparer's name Preparer's signature	Date	Check	<u> </u>
Pai	id	ROGER	A. SANTI, CPA	11-14	self-en	nployed P00121054
Pre	eparer	Firm's nan	CANITY C ACCOUNTED DE DE		Firm's EIN	58-2019486
Us	e Only	1,500	4010 OLD MILTON PKWY			
	-	Firm's add	AT DUADEMMA CA 30005-3423		Phone no.	770-623-4440
-	" 15		a this return with the preparer shown above? See instructions	***		X Yes No

P	art III	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	<u>X</u>
1 7	O EMI	lescribe the organization's mission:  POWER WOMEN AND THEIR CHILDREN EXPERIENCING HOMELESSNESS  MIC INDEPENDENCE AND LONG-TERM STABILITY.	TO ACHIEVE
2		organization undertake any significant program services during the year which were not listed on the rm 990 or 990-EZ?	Yes X No
		describe these new services on Schedule O.	
3		organization cease conducting, or make significant changes in how it conducts, any program	Yes X No
		s? ' describe these changes on Schedule O.	- Constant
4	Describe	e the organization's program service accomplishments for each of its three largest program services, as measured less. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	
		es. Section 50 ((c)(3) and 50 ((c)(4) organizations are required to report the amount of grants and disoations to other expenses, and revenue, if any, for each program service reported.	,
	the total		
	(Code:	) (Expenses \$ 2,087,133 including grants of \$ ) (Revenue \$ CHEDULE O	
	513.5 5363.5.5		
	Description		
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	11,0101111		
	Summer		
	timentes		
	* * * * * * * * *		
41-	(Codes	\ (Expenses \$ including grants of \$ ) (Revenue \$	3
		) (Expenses \$ including grants of \$ ) (Revenue S	
	(Code:		
	1/A		
40	I/A		
40	1/A		
40	I/A		
400 1	I/A (Code: I/A	) (Expenses \$ including grants of \$ ) (Revenue	
400 1	I/A (Code: I/A	) (Expenses \$ including grants of \$ ) (Revenue and the state of the st	

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X 1 complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 X candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) X 4 election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, X 5 assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 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 X 6 "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space. 7 X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X 8 complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or X debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X, as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X 11a complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more X 11b of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more X 11c of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets X 11d reported in Part X, line 16? If "Yes," complete Schedule D, Part IX X 11e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If 12b "Yes." and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 X 14b foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or X 15 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 X 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 X 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 X 19 If "Yes." complete Schedule G, Part III 20a 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

			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	· · · · · · · · · · · · · · · · · · ·			
	\$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
b	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	04.		
	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		250		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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?	25b		х
20	If "Yes," complete Schedule L, Part I  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
26	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	****		
21	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			1
	personal If "Vee " complete Schoolule I. Part III.	27		х
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			i i
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash 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,			- v
	or IV, and Part V, line 1	34	-	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
Ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	256		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	36		x
	related organization? If "Yes," complete Schedule R, Part V, line 2			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and		-	
38	19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	x	
· p	art V Statements Regarding Other IRS Filings and Tax Compliance	1 00		
	Check if Schedule O contains a response or note to any line in this Part V		<del></del>	
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	<u></u>

Pa	art V Statements Regarding Other IRS Filings and Tax Compliance (continued	0	1	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	00			
	Statements, filed for the calendar year ending with or within the year covered by this return		-	47	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	.,	2b	X	77
3a			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b		-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other autr		200		v
	a financial account in a foreign country (such as a bank account, securities account, or other financial ac	count)?	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial According to the Acc		E o		х
5a			5a 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5c		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	87 C	30		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		6a		x
	organization solicit any contributions that were not tax deductible as charitable contributions?		Ju		
b	-th- was and toy doduptible?		6b		
_	gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).				
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	is			
а			7a		240000000
h	and services provided to the payor?  If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
C	required to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit control	act?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained b				
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.		0.000		
а			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		-
10	Section 501(c)(7) organizations. Enter:	18			
а	Titled of Floor and depries of the second of	)a	-		
b	Gloss receipts, motaded on result over, restricting the personal results and r	)b	-		
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders	i Ü			
а	Cross mem mem entered to	la .	-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	lb.			
	against amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10		12a		000000000
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		120		
b	Section 501(c)(29) qualified nonprofit health insurance issuers.	-01			
13	Is the organization licensed to issue qualified health plans in more than one state?		13a		
а	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				
b	the organization is licensed to issue qualified health plans	Bb			
С	Enter the amount of reserves on hand	3c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Co		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment inc	come?	16		X
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities	s			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		1
	If "Yes," complete Form 6069.				

20-0943038 Form 990 (2022) THE DRAKE HOUSE, INC. Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 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. 16 Enter the number of voting members included on line 1a, above, who are independent b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a X one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X 9 the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10a  $\mathbf{X}$ 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X 12c describe on Schedule O how this was done X Did the organization have a written whistleblower policy? 13 13 X Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a The organization's CEO, Executive Director, or top management official X 15b Other officers or key employees of the organization 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 16a with a taxable entity during the year? 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 GA 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 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, 19 and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records

10500 CLARA DRIVE

470-519-0432

GA 30075

SARAH SMITH

ROSWELL

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)
   who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the orga	inization nor any	/ rela	ted	orga	niza	tion (	comp	pensated any current office	r, director, or trustee.	
(A) Name and title	(B) Average hours per week (list any	offi	k, unle icer ar	Pos check ess pe	erson lirecto	than dis both	an ee)	(D)  Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/	(F) Estimated amount of other compensation from the organization and
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	mer	1099-MISC/ 1099-NEC)	1099-NEC)	related organizations
(1) NESHA MASON										
**************************************	40.00			x				101,083	o	0
EXECUTIVE DIRECTOR	0.00	-		^		$\vdash$		101,005		
(2) JASON BINDER	1.00									
BOARD MEMBER	0.00	x						0	0	0
(3) MEG CHAPMAN										
	1.00									
BOARD MEMBER	0.00	X			_			0	0	C
(4) JENNIFER FANN-TU										
	1.00				1			0	0	l c
BOARD MEMBER	0.00	X	_	-	-	-				ļ
(5) DAVID HARRELL	1.00			1			١.			
BOARD MEMBER	0.00	x						0	0	ol c
(6) LISA HASTY	0.00	-		$\vdash$	T		Г			
(0) 11011 111011	1.00									
BOARD MEMBER	0.00	X						0	0	(
(7) VETTA LISBON HAU	JSER	П								
	1.00									
BOARD MEMBER	0.00	X						0	C	0
(8) LAURA MADAJEWSK	ļ									
	1.00							0		
BOARD MEMBER	0.00	X		$\vdash$	+	-	-			
(9) GENILLE MCELVEY	1.00			1						
POADD MEMBER	0.00	x						C		
BOARD MEMBER (10) JEFF MEYERS	0.00	122	1		1	1				
(10) OHEE PHILENO	1.00									
BOARD MEMBER	0.00	X						C		
(11) AMY MOORE			Г							
	1.00									
BOARD MEMBER	0.00	X		1		_	1_			) (O

Part VII Section A. Officers	, Directors, Tru	istee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)				
(A) Name and title	(B) Average hours per week	bo	x, unic	Pos check ess pe	erson i	than o is both	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) nated an of other mpensal	r	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	orga	from the anization d organiz	e n and	
(12) DEBRA ROBINSO	1.00	x						0	0				0
60ARD MEMBER (13) TISHA ROSAMON	0.00 D 1.00	Î											
BOARD MEMBER (14) SUE SCHMIDKO		X						0	0				0
BOARD MEMBER (15) LISA STEVENS	1.00	x						0	0				0
BOARD MEMBER	1.00	x						0	0				0
(16) ANU WHITAKER BOARD MEMBER	1.00	x						0	0				0
(17) LYNN WILSON	1.00								0				0
BOARD MEMBER	0.00	X						0	0				
CONTROL DE LA CO								101,083					
to Total from continuation she d Total (add lines 1b and 1c)	ets to Part VII,	Sect	ion <i>i</i>	Α		02152	100	101,083					
Total number of individuals (in reportable compensation from	cluding but not	limite	d to	thos	se lis	ted a	bov	ve) who received more than	\$100,000 of			Yes	No
<ul> <li>3 Did the organization list any for employee on line 1a? If "Yes,"</li> <li>4 For any individual listed on line</li> </ul>	' complete Sche	dule	J for	r suc	h ind	dividu	ıal				3		X
organization and related orgar individual	nizations greater	r thar	r \$1	50,00	00?	lf "Ye	s," (	complete Schedule J for su	ich	******	4		х
for services rendered to the or Section B. Independent Contractor	rganization? If " ors	Yes,	con	nplet	e Sc	hedu	ile J	for such person		******	5		Х
Complete this table for your five compensation from the organians.	ve highest comp ization. Report o (A) business address	ensa	ated ensa	inde ation	for t	lent he c	cont alen	dar year ending with or with	than \$100,000 of nin the organization's tax y (B) otion of services	ear.	Cor	(C)	ion
Name and	business address							Descii	DIGHT OF SERVICES			Tip attoni	
Total number of independent received more than \$100,000	contractors (incl	udin	g bu	t not	limi gani:	ted to	tho	ose listed above) who	0			001	

Form 990 (2022) THE DRAKE HOUSE, INC.

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue excluded (B) Related or exempt Total revenue function revenue business revenue from lax under sections 512-514 Contributions, Gifts, Grants and Other Similar Amounts 1a Federated campaigns 1b b Membership dues 622,978 c Fundraising events 1c 1d d Related organizations 658,109 1e e Government grants (contributions) f All other contributions, gifls, grants, 1,536,394 and similar amounts not included above g Noncash contributions included in 474,840 lines 1a-1f 2,817,481 h Total. Add lines 1a-1f. **Business Code** 115,948 115,948 APARTMENT UNIT RENTALS Program Service f All other program service revenue 115,948 g Total. Add lines 2a-2f. 3 Investment income (including dividends, interest, and 44,210 other similar amounts) 44,210 Income from investment of tax-exempt bond proceeds (ii) Personal (i) Real 6a Gross rents 6a 6b **b** Less: rental expenses c Rental inc. or (loss) 6c d Net rental income or (loss) 7a Gross amount from (i) Securities (ii) Other sales of assets other than inventory b Less: cost or other Other Revenue basis and sales exps. 7b 7c c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ 622,978 of contributions reported on line 1c). See Part IV, line 18 8a b Less: direct expenses 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory ...... **Business Code** 42,152 42,152 THE DRAKE CLOSETS d All other revenue 42,152 Total. Add lines 11a-11d 0 3,019,791 202,310 Total revenue. See instructions .....

Form 990 (2022)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, 7b, Management and Program service expenses general expenses 8b. 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 25,271 10,108 65,704 101,083 trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 75,255 71,159 943,326 796,912 Other salaries and wages Pension plan accruals and contributions (include 3,367 3,462 33,089 39,918 section 401(k) and 403(b) employer contributions) 70,182 7,343 7,142 84,667 Other employee benefits 9 8,026 92,538 76,705 7,807 Payroll taxes 10 Fees for services (nonemployees): 11 Management Legal b Accounting C d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column 7,058 9,704 71,461 88,223 (A) amount, list line 11g expenses on Schedule O.) 3,555 2,883 283 Advertising and promotion 12 13 Office expenses Information technology 14 15 Royalties 16 Occupancy 274 377 3,517 2,866 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 Interest 20 Payments to affiliates 21 16,870 23,197 170,812 210,879 Depreciation, depletion, and amortization 22 4,373 3,180 32,200 39,753 Insurance 23 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 22,273 30,625 235,505 288,403 SUPPLIES & OFFICE EXPENSE 3,115 4,284 201,245 208,644 LEASE EXPENSE 17,515 12,739 132,966 163,220 REPAIRS & MAINTENANCE C 6,507 8,948 97,537 82,082 UTILITIES d 29,983 112,521 14,464 156,968 All other expenses 229,493 205,605 2,522,231 2,087,133 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

THE DRAKE HOUSE, INC.

				(A)		(B)
				Beginning of year		End of year
11	Cash—non-interest-bearing			345,650	1	437,232
2	Savings and temporary cash investments			1,410,810	2	962,809
3	Pledges and grants receivable, net		4,558	3	8,367	
4	Accounts receivable, net		MARIA PARAMETERA (AND )		4	
5	Loans and other receivables from any current or forme	er officer, di	rector,			
	trustee, key employee, creator or founder, substantial					
	controlled entity or family member of any of these pers				5	
6	Loans and other receivables from other disqualified pe					
,	under section 4958(f)(1)), and persons described in se	ction 4958(	c)(3)(B)		6	
7	Notes and loans receivable, net				7	
8	Inventories for sale or use			76,966	8	95,970
9	Prepaid expenses and deferred charges				9	
10a	Land buildings and equipment; cost or other	1 1				
	basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	5,870,425			
Ь	Less: accumulated depreciation	10b	1,494,962	3,733,276	10c	4,375,463
11	Investments—publicly traded securities				11	
12	Investments—other securities. See Part IV, line 11				12	
13	Investments—program-related. See Part IV, line 11				13	
14	Intangible assets				14	
15	Other assets. See Part IV, line 11			58,445	15	757,249
16	Total assets. Add lines 1 through 15 (must equal line			5,629,705	16	6,637,090
17	Accounts payable and accrued expenses	KOROCESII NECESI		23,810	17	79,252
18	Grants payable				18	
19	Deferred revenue				19	
20	Tax-exempt bond liabilities	CC-12503-00-1			20	
21	Escrow or custodial account liability. Complete Part IV				21	
22						
22	trustee, key employee, creator or founder, substantial					
	controlled entity or family member of any of these pers	V. (52) (1 1 5 1 5			22	
23	Secured mortgages and notes payable to unrelated th				23	
24	Unsecured notes and loans payable to unrelated third				24	
25	Other liabilities (including federal income tax, payables					
	parties, and other liabilities not included on lines 17-24	1). Complet	e Part X	20 505	25	492,888
	of Schedule D			38,505 62,315	25 26	572,140
26				02,313	20	JIZITT
	Organizations that follow FASB ASC 958, check he	ere X				
ا فِي	and complete lines 27, 28, 32, and 33.			5,352,730	27	5,812,900
27	Net assets without donor restrictions			214,660		252,050
28				214,000	20	
	Organizations that do not follow FASB ASC 958, c	neck nere				
27 28 29 30 31 32	and complete lines 29 through 33.				29	
29			*****************		30	
30	Paid-in or capital surplus, or land, building, or equipme				31	
31	Retained earnings, endowment, accumulated income,	, or other tu		5,567,390		6,064,950
32	Total net assets or fund balances			ካ ካክ/ ፕዛሀ	32	0,004.2.10

	990 (2022) THE DIAME MOCKE, THE					-
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		2	01	0 '	791
1	Total revenue (must equal Part VIII, column (A), line 12)	1				231
2	Total expenses (must equal Part IX, column (A), line 25)	2				560
3	Revenue less expenses. Subtract line 2 from line 1	3				390
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5	, 50	11.	390
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		_			
	32, column (B))	10	6	,06	4,	950
Pa	rt XII Financial Statements and Reporting					-
	Check if Schedule O contains a response or note to any line in this Part XII	*****				$\perp$
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		— II			
	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?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
h	Were the organization's financial statements audited by an independent accountant?		L	2b	X	
~	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
_	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?		nanan la	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.					
20	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
Jä	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
le.	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
D	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
_	required audit of audits, explain why on schedule of and describe any steps taken to analyge such addition				90	0 /2022

### SCHEDULE A (Form 990)

**Public Charity Status and Public Support** 

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Employer Identification number Name of the organization 20-0943038 THE DRAKE HOUSE, INC. Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public X 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 9 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 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(ii) EIN (iii) Type of organization (iv) Is the organization (described on lines 1–10 listed in your governing above (see instructions)) document?		ır governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)	10					
(C)						
(D)						
(E)						
Total						Ontrodula A (France 200) 2

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

Schedule A (Form 990) 2022

THE DRAKE HOUSE, INC. Schedule A (Form 990) 2022

Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,456,706	1,543,293	1,621,924	2,098,960	2,817,481	9,538,364
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					ļ,	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,456,706	1,543,293	1,621,924	2,098,960	2,817,481	9,538,364
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						9,538,364
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	1,456,706	1,543,293	1,621,924	2,098,960	2,817,481	9,538,364
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	7,413	7,652	3,781	2,135	44,210	65,191
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			33,900	17,227		51,127
11	Total support. Add lines 7 through 10						9,654,682
12	Gross receipts from related activities, etc.	(see instructions)				12	918,503
13	First 5 years. If the Form 990 is for the or	ganization's first, se	econd, third, fourth	, or fifth tax year a	s a section 501(c)	(3)	164-15
10	organization, check this box and stop her						
Sec	tion C. Computation of Public Su	pport Percent	age				
14	Public support percentage for 2022 (line 6			n (f))		14	98.80%
15	Public support percentage from 2021 Sch					4-	99.13%
16a	33 1/3% support test—2022. If the organ	ization did not chec	k the box on line 1	3, and line 14 is 3	3 1/3% or more, cl	heck this	
, , ,	box and stop here. The organization qual						X
b	33 1/3% support test—2021. If the organ						-
	this box and stop here. The organization	qualifies as a public	ly supported organ	nization			U
17a	10%-facts-and-circumstances test—202	22. If the organization	on did not check a	box on line 13, 16	a, or 16b, and line	14 is	
	10% or more, and if the organization mee	ts the facts-and-circ	cumstances test, cl	heck this box and	<b>stop here.</b> Explair	n in	
	Part VI how the organization meets the fa	cts-and-circumstan	ces test. The organ	nization qualifies a	s a publicly suppo	rted	
	organization			av arangananan an menera	. 200-200-200-1-1-2-2-2-2-2-2-2-2-2-2-2-2-		
b	10%-facts-and-circumstances test-202	21. If the organization	on did not check a	box on line 13, 16	a, 16b, or 17a, and	d line	
	15 is 10% or more, and if the organization	meets the facts-an	d-circumstances to	est, check this box	and <b>stop here</b> . E	Explain	
	in Part VI how the organization meets the	facts-and-circumsta	ances test. The org	ganization qualifies	s as a publicly sup	ported	15-
	organization						
18	Private foundation. If the organization di	d not check a box o	n line 13, 16a, 16b	o, 17a, or 17b, che	ck this box and se	e	
	instructions						
						0 1 1 1	A (Form 900) 2022

### Support Schedule for Organizations Described in Section 509(a)(2) Part III

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

	if the organization rails to	quality under ti	ie iesis listeu t	below, please c	ompiete i ait i	.,	
	tion A. Public Support		11.0010	(-) page	(4) 0004	(6) 2022	(f) Total
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)					4	
14	First 5 years. If the Form 990 is for the or organization, check this box and stop her		second, third, four				[
Sec	ction C. Computation of Public Su						
15	Public support percentage for 2022 (line 8			mn (f))		15	
16	Public support percentage from 2021 Scho						%
	ction D. Computation of Investme						
17	Investment income percentage for 2022 (I			3, column (f))			
18	Investment income percentage from 2021	Schedule A, Part I	II, line 17				%
19a	33 1/3% support tests-2022. If the orga	nization did not ch	neck the box on lin	e 14, and line 15 i	s more than 33 1/	3%, and line	г
	17 is not more than 33 1/3%, check this b	ox and stop here.	. The organization	qualifies as a pub	licly supported org	janization	
b	33 1/3% support tests-2021. If the orga	nization did not ch	neck a box on line	14 or line 19a, and	d line 16 is more t	han 33 1/3%, and	ř
	line 18 is not more than 33 1/3%, check the	nis box and stop h	nere. The organiza	tion qualifies as a	publicly supported	d organization	
20	Brigate foundation If the organization di						

### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 on 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

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

	Yes	No
1		
2 3a		
3b		
3c		
4a		
4b		
4c		
5a 5b		
5c		
6	-	
7		
8		
9a	1000 TO 1000 T	
9a 9b		
9c		
10a		
10b	A (Form	990) 202

The second named in column 2 is not to the second	# N Supporting Organizations (continued)			
rar	t IV Supporting Organizations (continued)		Yes	No
4.4	Has the organization accepted a gift or contribution from any of the following persons?			
11	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
а		11a		
	11c below, the governing body of a supported organization?	11b		
b	A family member of a person described on line 11a above?  A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
¢		11c		
Soot	provide detail in Part VI. on B. Type I Supporting Organizations	0.000	-	
Ject!	Oil D. Type I oupporting organizations		Yes	No
, a	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
1	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	/////	
2	Did the organization operate for the benefit of any supported organization other than the supported			
2	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
Ject	ion of 1340 ii ochhorinia ordanizationi		Yes	No
4	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
1	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
JUUL	on 211 1764 4-66-1-1-10		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
J	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	s).		
' a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see inst	ructions,	).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
-	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	and the state of the organization's			
~	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		1
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
a	and the appropriate the property appoint or elect a majority of the officers, directors, or		20000	
a	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	the state of each activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		200, 21

Schedule A (Form 990) 2022

Par		rganizati	ons					
1								
	instructions. All other Type III non-functionally integrated supporting organizations	must comple	te Sections A through E	1 /5\ 2 \ . \ . \ . \ . \ . \ . \ . \ . \ .				
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)				
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3.	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or collection							
•	of gross income or for management, conservation, or maintenance of							
	property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8						
	ion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see							
•	instructions for short tax year or assets held for part of year):							
2	Average monthly value of securities	1a						
	Average monthly cash balances	1b						
	Fair market value of other non-exempt-use assets	1c						
	Total (add lines 1a, 1b, and 1c)	1d						
	Discount claimed for blockage or other factors							
е	(explain in detail in Part VI):							
2	A TOTAL AND A TOTA	2						
2	Subtract line 2 from line 1d.	3						
3	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,							
4		4						
1	see instructions).  Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
5		6						
6	Multiply line 5 by 0.035.	7						
7	Recoveries of prior-year distributions	8						
8 Sect	Minimum Asset Amount (add line 7 to line 6) ion C - Distributable Amount		200	Current Year				
1	Adjusted net income for prior year (from Section A, line 8, column A)	1						
2	Enter 0.85 of line 1.	2						
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3						
4	Enter greater of line 2 or line 3.	4						
5	Income tax imposed in prior year	5						
6	Distributable Amount. Subtract line 5 from line 4, unless subject to							
	emergency temporary reduction (see instructions).	6						
7	Check here if the current year is the organization's first as a non-functionally integra (see instructions).	ited Type III	supporting organization					
				Schedule A (Form 990) 202				

Part	V Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organizat	tions (continued)		
		H.J. S.			0
Secti	on D – Distributions	_	Current Year		
1	Amounts paid to supported organizations to accomplish exempt purpos		1		
2	Amounts paid to perform activity that directly furthers exempt purposes	s of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purposes of suppo	orted organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required—provide detail	ails 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 the organizations	ition is responsive		8	
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution	ns	Distributable
			Pre-2022		Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			-	
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required-explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2022				
	From 2017				
	From 2018				
С	From 2019				
	From 2020				
	From 2021				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i_	Carryover from 2017 not applied (see instructions)				
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from				
	Section D, line 7:				
	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	Remainder, Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.			-011-0	
6	Remaining underdistributions for 2022, Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in		100		
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				TIW.
	Excess from 2021				
е	Excess from 2022		A CONTRACTOR OF THE PARTY OF TH		

	B, lines 1 a	and 2; Pari	t IV, Section ne 1; Part V	es 1, 2, 3b, 3c C, line 1; Part C, Section B, lin this part for an	t IV, Section le 1e; Part V	D, lines 2 and , Section D, li	d 3; Part IV, Senes 5, 6, and	8; and Part V,	1c, 2a, 2b,
PART I				NCOME DET					
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### **SCHEDULE D** (Form 990)

Department of the Treasury Internat 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.

Open to Public

OMB No. 1545-0047

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

Inspection

Nam	e of the organization		Employer identification number
П	HE DRAKE HOUSE, INC.		20-0943038
-	art I Organizations Maintaining Donor Advised Fu Complete if the organization answered "Yes" on	nds or Other Similar Funds or Form 990, Part IV, line 6.	
-		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing the	at the assets held in donor advised	
	funds are the organization's property, subject to the organization's exc		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor or dor	or advisor, or for any other purpose	
	conferring impermissible private benefit?		Yes No
P	art II Conservation Easements.	E 000 D 4 D / Box 7	
	Complete if the organization answered "Yes" on		
1	Purpose(s) of conservation easements held by the organization (chec		I. Sanadanklandana
	Preservation of land for public use (for example, recreation or edu		
	Protection of natural habitat	Preservation of a certified h	nistoric structure
	Preservation of open space	and the second the state of a con-	constion
2	· · · · · · · · · · · · · · · · · · ·	ervation contribution in the form of a con-	Held at the End of the Tax Year
	easement on the last day of the tax year.		
1	Total number of conservation easements		1864
	Total acreage restricted by conservation easements		
	<ul> <li>Number of conservation easements on a certified historic structure in</li> <li>Number of conservation easements included in (c) acquired after July</li> </ul>		K++0>
1	historic structure listed in the National Register		2d
3	the state of the s	xtinguished, or terminated by the organiz	zation during the
3		mingalonica, or terminal and a grant of	· ·
1	tax year  Number of states where property subject to conservation easement is	located	
5	Does the organization have a written policy regarding the periodic mo	nitoring, inspection, handling of	
Ť	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	of violations, and enforcing conservation	easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of vi-	olations, and enforcing conservation eas	ements during the year
	\$2.73.00.000 \$3.40.000 \$4.000		
8	Does each conservation easement reported on line 2(d) above satisfy		
	and section 170(h)(4)(B)(ii)?		g.g
9	In Part XIII, describe how the organization reports conservation easer	nents in its revenue and expense statem	t describes the
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's imancial statements tha	t describes the
F	organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art	Historical Treasures, or Othe	r Similar Assets.
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 8.	
1	a If the organization elected, as permitted under FASB ASC 958, not to		ance sheet works
	of art, historical treasures, or other similar assets held for public exhib	oition, education, or research in furtheran	ce of public
	service, provide in Part XIII the text of the footnote to its financial stat	ements that describes these items.	
	o If the organization elected, as permitted under FASB ASC 958, to rep	ort in its revenue statement and balance	sheet works of
	art, historical treasures, or other similar assets held for public exhibiting	on, education, or research in furtherance	of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		ş
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical treasures,	or other similar assets for financial gain,	provide the
	following amounts required to be reported under FASB ASC 958 rela-		
	Revenue included on Form 990, Part VIII, line 1		\$ 00.000 S
_	Assets included in Form 990, Part X	*****************	\$ Schodule D (Form 990) 2022

- 1	_			•
. 1	Pa	a	e	4

-	rt III Organizations Maintainin	a Collections of	Art. Historical 1	reasures o	r Other Simi	lar Assets	(continu	ed)	
3 3	rt III Organizations Maintainin Using the organization's acquisition, access collection items (check all that apply):	sion, and other records	s, check any of the fo	ollowing that ma	ke significant us	e of its	13.33.141		
а	Public exhibition	d 🗍 1	Loan or exchange pr	ogram					
b	Scholarly research	-	Other	-					
C	Preservation for future generations				14 800 804 90 804 040 404 90 404 90 404 90 404 90 404 90 404 90 404 90 404 90 404 90 404 90 404 90 404 90 404				
4	Provide a description of the organization's of	collections and explain	how they further the	e organization's	exempt purpose	in Part			
4	XIII.	onoonono ana onpiani	,						
5	During the year, did the organization solicit	or receive donations of	of art, historical treas	ures, or other s	milar				
5	assets to be sold to raise funds rather than						Ye:		No
Da	rt IV Escrow and Custodial Ar								
га	Complete if the organizatio	n answered "Yes"	on Form 990, P	art IV, line 9	or reported a	an amount	on Form		
	990, Part X, line 21.	11	ian for contributions	or other accets	not				
1a	Is the organization an agent, trustee, custoo						Ye		No
	included on Form 990, Part X?		lauda a tablar	******				, L	110
b	If "Yes," explain the arrangement in Part XII	and complete the fol	lowing table:				Amount		_
						1c			-
	Beginning balance					1d			_
	Additions during the year					1e			-
е	Distributions during the year					1f			
f	Ending balance				U-104.0		Ye		No
2a	Did the organization include an amount on I	Form 990, Part X, line	21, for escrow or cu	istodiai account	liability?	**********	. 🗀 те	-	NO
	If "Yes," explain the arrangement in Part XII	I. Check here if the ex	planation has been	provided on Pa	T XIII				
Pa	rt V Endowment Funds.	1 112/	Cours 000 D	last IV. lina 1	0				
	Complete if the organizatio					ree years back	(e) Four	vears h	erk
	-	(a) Current year	(b) Prior year	(c) Two year	s back (d) III	ilee years back	(e) i dui	years o	3 CK
	Beginning of year balance								
	Contributions						+		-
¢	Net investment earnings, gains, and				1				
	losses							_	
d	Grants or scholarships						1		
е	Other expenditures for facilities and			1					
	programs								_
f	Administrative expenses		/ <b>x</b> ).						
	End of year balance								
2	Provide the estimated percentage of the cu	rrent year end balance	e (line 1g, column (a	)) held as:					
а	Board designated or quasi-endowment	%							
b	Permanent endowment %								
	Term endowment %								
	The percentages on lines 2a, 2b, and 2c sh	ould equal 100%.							
3a	Are there endowment funds not in the poss	ession of the organiza	ation that are held ar	nd administered	for the		r		
	organization by:							Yes	No
	(i) Unrelated organizations		25 W V + 1 + 1 + 1 + 1 + 1 W + 1 + 1 W + 1				3a(i)	_	
	(ii) Related organizations				×-x	******	3a(ii)		
b	If "Yes" on line 3a(ii), are the related organi	zations listed as requi	red on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the								
Pa	ort VI Land, Buildings, and Equ	uipment.							
1000000	Complete if the organization	n answered "Yes	" on Form 990, F	Part IV, line 1	1a. See Form	1990, Part	X, line 1	0	
	Description of property	(a) Cost or other		or other basis	(c) Accumulat		(d) Book	value	
		(investment)	(0	other)	depreciation	1			
12	Land	40		623,246				23,	
	Buildings		3,	350,075		,841	2,4		
	Leasehold improvements			31,690		,040			650
	Equipment	V		142,508		,901		70,	
	Other			694,725	503	3,180	1,1		
Tota	I. Add lines 1a through 1e. (Column (d) musi	t equal Form 990, Par					4,3	47,	282

(1) RIGHT-OF-USE ASSETS 422 (2) OTHER RECEIVABLES 294 (3) OTHER CURRENT ASSETS 25 (4) DEPOSIT 14 (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) 757  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 447 (2) LEASE LIABILITIES 447 (3) TENANT SAVINGS PAYABLE 9 (4) OTHER PAYABLES 9 (5) (6) (7) (8)	Part VII	Investments - Other Securities.	orm 990 Part IV li	ne 11h. See Form 990, Part X, line 12.
(1) Financial derivatives (2) Closely hald equally interests (3) Other (4) (6) (7) (8) (9) (9) (9) (9) (1) (1) (1) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9				(c) Method of valuation:
				Cost or end-of-year market value
(2) Closely held equity interests	(4) Figureial d			
(3) Other   (A)				
(A) (B) (C) (C) (B) line 12.) (C) (B) line 12.) (C) (B) line 12.) (C)	• •			
(5) (C)				
(C) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C				
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(6) (H) (F) (H) (H) (H) (H) (H) (H) (H) (H) (H) (H			50.	
(1)   Cost of each of year X, col. (B) line 12.				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12)   (c) Method of valuation: Cost or end of year market value   (c) Method of valuation: Cost or end of valuation: Cost or				
Investments - Program Related.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.   (a) Method of virulation: Cost or ent of dyear market value	(Ḥ)	(1) 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.				
(a) Description of investment (b) Book value (c) Method of valuation: Cost or and of year market value (c) (c) Method of valuation: Cost or and of year market value (c)	Part VIII	Investments - Program Related.	orm 000 Part IV I	ne 11c See Form 990 Part X line 13.
(1)   Cost or end of year market value   (1)   (2)   (3)   (4)   (4)   (5)   (6)   (6)   (7)   (8)   (9)   (9)   (9)   (9)   (1)   (				(c) Method of valuation:
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(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value (c) Description (c) Descript	(1)			
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Pook value (c) Part X	(2)			
(5) (6) (7) (8) (9) Total, (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Description (c)	(3)			
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(7)   (8)   (9)   (8)   (9)   (8)   (9)   (8)   (9)	(5)			
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value (1) RIGHT-OF-USE ASSETS 422 (2) OTHER RECEIVABLES 294 (3) OTHER CURRENT ASSETS 25 (4) DEPOSIT (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  (1) Federal income taxes (2) LEASE LIABILITIES (3) TENANT SAVINGS PAYABLE (5) (6) (7) (8) (9) (9) (9) (9) (1) Federal Savings Payable (10) OTHER PAYABLES (3) OTHER PAYABLES	(6)			
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1   1   1   2   2   2   2   2   2   2	(8)			
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Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value (1) RIGHT-OF-USE ASSETS 422   (2) OTHER RECEIVABLES 2.94   (3) OTHER CURRENT ASSETS 2.5   (4) DEPOSIT 1.4   (5)   (6)   (7)   (8)   (9)   (7)   (8)   (9)   (7)   (8)   (9)   (7)   (7)   (8)   (9)   (7)   (7)   (8)   (9)   (7)   (7)   (8)   (9)   (7)   (7)   (8)   (9)   (7)   (7)   (8)   (9	Total. (Column	(b) must equal Form 990, Part X, col. (B) line 13.)		
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1	Soncado			422,2
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3	0.050			25,5
(4)	5.700.51			14,9
(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  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) LEASE LIABILITIES (3) TENANT SAVINGS PAYABLE (4) OTHER PAYABLES (5) (6) (7) (8)	_(4)	DEPOSIT		
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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) LEASE LIABILITIES 447 (3) TENANT SAVINGS PAYABLE 99 (5) (6) (7) (8)	Total. (Column		********	151,2
Ine 25.   (a) Description of liability   (b) Book value   (1) Federal income taxes   (2) LEASE LIABILITIES   (3) TENANT SAVINGS PAYABLE   (4) OTHER PAYABLES   (5)   (6)   (7)   (8)   (9)	Part X	Other Liabilities.		14 445 Cas Farms 000 Port V
1.       (a) Description of liability       (b) Book value         (1) Federal income taxes       447         (2) LEASE LIABILITIES       35         (3) TENANT SAVINGS PAYABLE       35         (4) OTHER PAYABLES       9         (5)       (6)         (7)       (8)		Complete if the organization answered "Yes" on F	orm 990, Part IV,	ine 11e or 11f. See Form 990, Part A,
1. (a) Description of isothry  (1) Federal income taxes  (2) LEASE LIABILITIES  (3) TENANT SAVINGS PAYABLE  (4) OTHER PAYABLES  (5)  (6)  (7)  (8)		line 25.		
(2) LEASE LIABILITIES (3) TENANT SAVINGS PAYABLE (4) OTHER PAYABLES (5) (6) (7) (8)	1.	(a) Description of liability		(b) Book value
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(4) OTHER PAYABLES (5) (6) (7) (8)		LIABILITIES		
(4) OTHER PAYABLES (5) (6) (7) (8)		IT SAVINGS PAYABLE		35,8
(5) (6) (7) (8)	(4) OTHER	PAYABLES		9,5
(6) (7) (8)				
(7) (8)				
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100				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	Total (Colum	n (h) must equal Form 990. Part X. col. (B) line 25.)		492,8
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	2 Liability for	uncertain tax positions. In Part XIII, provide the text of the foot		

3038 Page 4

Sche	edule D (Form 990) 2022 THE DRAKE HOUSE, INC.			
	Reconciliation of Revenue per Audited Financial State Complete if the organization answered "Yes" on Form 990	ements With Rever	nue per Return.	
1	Total revenue, gains, and other support per audited financial statements		11	3,019,791
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	******************		
a	n and a second s	2a		
b				
C	- I follower was to			
d				
e	The state of the s		2e	
3	Subtract line 2e from line 1			3,019,791
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1		
a	the highest and Target COO. Dort VIII. Goo. 7h	4a		
b	- 1 (- 1 to 1 t			
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	3,019,791
	art XII Reconciliation of Expenses per Audited Financial Sta	tements With Expe	enses per Return.	
****	Complete if the organization answered "Yes" on Form 99	0, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	2,522,231
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		5 Zercentes C. A. S. 411 C. W.	
a	The state of the s	2a		
_	Prior year adjustments	1 1		
	The state of the s	CONTRACTOR OF THE PARTY OF THE		
C	**************************************	155501		
	Other (Describe in Part XIII.)	SHEET	2e	
	Add lines 2a through 2d			2,522,231
3	Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1;		I SAN STATE OF THE SAN	
4		4a		
	Investment expenses not included on Form 990, Part VIII, line 7b			
h	- · · · · · · · · · · · · · · · · · · ·	l Ah l	1000000000	
	Other (Describe in Part XIII.)		46	
С	Add lines 4a and 4b		4c	2.522.231
5	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			2,522,231
5 P:	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  art XIII Supplemental Information.		5	
5 <b>P</b> :	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  art XIII Supplemental Information.  vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a and 4	art IV, lines 1b and 2b; F	art V, line 4; Part X, line	
5 <b>P</b> :	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  art XIII Supplemental Information.  vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro-	art IV, lines 1b and 2b; F vide any additional infor	eart V, line 4; Part X, line	е
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c 5 Prov 2; Pr	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  art XIII Supplemental Information.  vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro	art IV, lines 1b and 2b; F vide any additional infor	rart V, line 4; Part X, linenation.	
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Schedule D (Fo	rm 990) 2022	THE DRAKE	HOUSE,	INC.	20-0943038	Page 5
Part XIII	Supplemen	tal Information	(continued)			
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### **SCHEDULE G** (Form 990)

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization	NC				Employer identificat	
Part I Fundraising Activities. Complete if	the organization	on an	SWel	red "Yes" on Form 99		
Form 990-EZ filers are not required to	o complete thi	s par	t.			
1 Indicate whether the organization raised funds through a	any of the followin	g activ	ities.	Check all that apply.		
a Mail solicitations	e 🗌 Solicitation	n of no	n-gov	ernment grants		
b Internet and email solicitations	f 🗌 Solicitation	n of go	vernm	nent grants		
c Phone solicitations	g 🔲 Special fu	ndraisi	ng ev	ents		
d In-person solicitations						
2a Did the organization have a written or oral agreement workey employees listed in Form 990, Part VII) or entity	in connection with	ı profe	ssiona	al fundraising services? 🦼		Yes No
b If "Yes," list the 10 highest paid individuals or entities (fu compensated at least \$5,000 by the organization.	undraisers) pursua			ments under which the fur	ndraiser is to be	
(i) Name and address of individual or entily (fundraiser)	(ii) Activity	raise cust con	id fund- r have ody or trol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
	İ	Yes	No			
1						
2						
		_				
3						
4						
5						
		+	-			-
6						
7		1				
8						
9						
10						
Total						
List all states in which the organization is registered or registration or licensing.		contri	oution	s or has been notified it is	s exempt from	
. *************************************			117151			
	***************				0110170707070	******
	****		*****			24424444444444444444
			*****			

Schedule G (Form 990) 2022 THE DRAKE HOUSE, INC.

20-0943038

-	than \$15,000	Events. Complete if the organ of fundraising event contributions greater than \$5,000.	nization answered "Yes" on I	Form 990, Part IV, line 1 orm 990-EZ, lines 1 and	8, or reported more 6b. List events with
	gross receipt	(a) Event #1  MISC. FUNDRAISE	(b) Event #2  FASHION SHOW	(c) Other events	(d) Total events (add col. (a) through
Φ		(event type)	(event lype)	(total number)	col. (c))
Revenue	1 Gross receipts	392,792	120,579	109,607	622,978
	2 Less: Contributions 3 Gross income (line 1 minuline 2)	us	120,579	109,607	622,978
	4 Cash prizes				
	5 Noncash prizes				
enses	6 Rent/facility costs	**			
Direct Expenses	7 Food and beverages	0.			
	8 Entertainment	14			
	9 Other direct expenses				
P	11 Net income summary.  Part III Gaming. Co	ary. Add lines 4 through 9 in column ( Subtract line 10 from line 3, column ( Emplete if the organization ans Form 990-EZ, line 6a.	(d)wered "Yes" on Form 990, F		
Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
<u>~</u>	1 Gross revenue				
ses	2 Cash prizes				
Expe	3 Noncash prizes				
Direct Exper	4 Rent/facility costs	A.S.			
	5 Other direct expenses		Von 9/	Vac %	
	6 Volunteer labor	Yes %	Yes %	Yes %	
	7 Direct expense summ	ary. Add lines 2 through 5 in column (	(d)		
	8 Net gaming income si	ummary. Subtract line 7 from line 1, c	olumn (d)		
	a Is the organization license	n the organization conducts gaming ac ed to conduct gaming activities in each	h of these states?	***************************************	Yes No
	a Were any of the organizat	tion's gaming licenses revoked, suspe	ended, or terminated during the tax	year?	Yes No
	,				

		Page 3
Schedule G (Form 990) 2022 THE DRAKE HOUSE, INC. 20-0943038  11 Does the organization conduct gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity		
formed to administer charitable gaming?	Yes	No No
13 Indicate the percentage of gaming activity conducted in:	20	
a The organization's facility		%_
b An outside facility 13b		%_
14 Enter the name and address of the person who prepares the organization's gaming/special events books and		
records:		
Name	*****	
**************************************		
Address		
15a Does the organization have a contract with a third party from whom the organization receives gaming	<del></del>	
revenue?	Yes	No
b If "Yes," enter the amount of gaming revenue received by the organization \$ and the		
amount of gaming revenue retained by the third party \$		
c If "Yes," enter name and address of the third party:		
Name	51.55.11.55.57)	
Address	0.0000000000000000000000000000000000000	
## 10th 10 ftd 10 ftd 10 ftd 10 SM Beatret Artistawy Association for any area as a second with the second for t		
16 Gaming manager information:		
Name		
Gaming manager compensation \$		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes	∏ No
retain the state gaming license?	les	
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or		
spent in the organization's own exempt activities during the tax year \$	v). and	
Part IV Superior and Ash a	v), and m	
Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information	Ji I <sub>el</sub>	
See instructions.		
3 - 100 - 10	*****	
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		A 6 9 4 6 6 6 6 6

### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

OMB No. 1545-0047

2022

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number 20-0943038

Types of Property		THE DRAKE	HOUS	SE, INC.			20-09	943038		
Art — Works of art   Art — Harmon of certifications or progress in the properties of progress certification amounts in the properties of progress certification amounts or progress certification amounts of progress certification amounts or progress certification or progress certification amounts or progress certification amounts or progress certification amounts or progress certification or progress certification amounts or progress certificat	Pa	rt I Types of Property								
2 AT—Historical triassures 3 AT—Fractional Interests 4 Books and publications 5 Cothing and household goods 8 X 344,680 FAIR MARKET VALUE  8 Cars and other vehicles 8 Intellectual property 8 Securities—Publicly traded 9 Securities—Publicly traded 10 Securities—Closely held stock 11 Securities—Publicly traded 12 Securities—Publicly traded 13 Securities—Interests 14 Cualified conservation contribution—Historic structures 14 Cualified conservation contribution—Uniter structures 15 Real estate—Residential 16 Real estate—Commercial 17 Real estate—Commercial 18 Callectibles 19 Food inventory 10 Drugs and medical supplies 21 Taidermy 22 Drugs and medical supplies 23 Selentific specimens 24 Archeological artifacts 25 Other (_TMPROVEMENTS_) X 1 130,160 FATR MARKET VALUE  10 Market (			Check if	Number of contributions or	Noncash contribution amounts reported on		Method of o	determining		
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28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?  b If "Yes," describe the arrangement in Part II.  31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  b If "Yes," describe in Part II.  33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,		Willich the organization completed is	01111 0200,	Turt V, Boriso Florino	***********				Yes	No
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used for exempt purposes for the entire holding period?  b If "Yes," describe the arrangement in Part II.  31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  b If "Yes," describe in Part II.  33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,	Jua	29 that it must hold for at least 3 ve	ars from the	ne date of the initial cont	ribution, and which isn't red	quired to be				
b If "Yes," describe the arrangement in Part II.  31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  b If "Yes," describe in Part II.  33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,								30a		X
Does the organization have a gift acceptance policy that requires the review of any nonstandard  contributions?  Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  b If "Yes," describe in Part II.  If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,	l.			g panoa	85					
contributions?  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  b If "Yes," describe in Part II.  33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,		Describe the arrangement	rentance	nolicy that requires the r	eview of any nonstandard					
Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  b If "Yes," describe in Part II.  If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,	31							31		X
contributions?  b If "Yes," describe in Part II.  33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,	20	Contributions?	ird parties	or related organizations	to solicit, process, or sell r	noncash	*****	16.05087037		
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33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,										
* pp. 7/a +p. 7/a		IT Yes, describe in Part II.	mount in o	olumn (c) for a type of p	roperty for which column (s	a) is checke	d.			
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Schedule M (For	m 990) 2022	THE	DRAKE	HOUSE,	INC.		age 2
Part II	Suppler the orga	nental nizatior	Informati i is reporti	<b>on</b> . Provide ng in Part I,	the inform column (b	mation required by Part I, lines 30b, 32b, and 33, and whether b), the number of contributions, the number of items received, art for any additional information.	
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### 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.

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

THE DRAKE HOUSE, INC.

Employer identification number 20-0943038

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT THE DRAKE HOUSE, INC. IS A CRISIS RESIDENTIAL ASSESSMENT CENTER FOR HOMELESS WOMEN AND CHILDREN IN NORTH FULTON COUNTY, GEORGIA. IMMEDIATE RESIDENTIAL HOUSING, COMBINED WITH AN EMPOWERMENT PROGRAM DESIGNED TO PROVIDE STABILITY FOR THE CHILDREN AND ASSIST THE FAMILY IN THE DRAKE HOUSE, INC. ADDRESSES WORKING TOWARD HOUSING SELF-SUFFICIENCY. THE LONG-STANDING NEED FOR EMERGENCY HOUSING FOR WOMEN AND CHILDREN IN THE IT OFFERS RESIDENTIAL HOUSING AND IN-DEPTH NORTH FULTON COMMUNITY. THE TARGET POPULATION IS SINGLE MOTHERS WITH ASSESSMENTS TO FAMILIES THESE MOTHERS MAY BE UNEMPLOYED OR UNDEREMPLOYED AND LACK MINOR CHILDREN. SUFFICIENT INCOME TO MEET ALL EXPENSES OF LIFE IN THE NORTH FULTON WOMEN AND CHILDREN ENTERING THE DRAKE HOUSE ARE OFFERED A COMMUNITY VARIETY OF SUPPORT SERVICES TO EMPOWER AND EDUCATE THEM AND MOVE THEM RESIDENTS PARTICIPATE IN A GOAL SETTING PROCESS TOWARDS SELF-SUFFICIENCY. INITIAL GOALS INCLUDE ADDRESSING MEDICAL NEEDS OF AND AN EMPOWERMENT PLAN. THE MOTHER AND THE CHILDREN, AND THE EDUCATIONAL NEEDS OF THE CHILDREN. ONSITE LIFE SKILLS CLASSES ARE CONDUCTED EVERY WEEK ON TOPICS SUCH AS JOB READINESS, PERSONAL FINANCES, PARENTING SKILLS, AND HEALTH AND WELLNESS. AN ADVOCACY PROGRAM PROVIDES ENCOURAGEMENT, MOTIVATION, AND SUPPORT DURING THE GOAL OF THE DRAKE HOUSE, INC. IS TO CREATE AN THE FAMILY'S STAY. ENVIRONMENT THAT ALLOWS HOMELESS FAMILIES TO BE INCLUDED IN NORTH FULTON COMMUNITY LIFE, ENJOY A STABILIZED, IMPROVED QUALITY OF LIFE, MAKE INCREASINGLY RESPONSIBLE CHOICES, EXERT GREATER CONTROL OVER THEIR LIFE COMPETENCIES, DEVELOP AND EXERCISE THEIR COMPETENCIES AND TALENTS, AND

THE DRAKE HOUSE, INC.

Employer identification number 20-0943038

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

THE FORM 990 IS REVIEWED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF

DIRECTORS. THE EXECUTIVE COMMITTEE IS COMPRISED OF THE PRESIDENT, VICE

PRESIDENT, TREASURER, AND SECRETARY. THE ADDITIONAL MEMBERS OF THE BOARD

DO NOT RECEIVE A COPY OF THE FORM 990 UNLESS THEY REQUEST IT.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
THE DRAKE HOUSE, INC. ENSURES ENFORCEMENT OF THE CONFLICT OF INTEREST

POLICY BY REQUIRING THAT ALL CONFLICTING INTERESTS ARE FULLY DISCLOSED.

THE INDIVIDUAL WITH THE CONFLICT OF INTEREST IS EXCLUDED FROM THE

DISCUSSION AND APPROVAL OF THE TRANSACTION. A COMPETITIVE BID OR

COMPARABLE VALUATION MUST EXIST, AND THE BOARD OF DIRECTORS OR DULY

CONSTITUTED COMMITTEE MUST DETERMINE THAT THE TRANSACTION IS IN THE BEST

INTEREST OF THE ORGANIZATION.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE COMPENSATION OF THE EXECUTIVE DIRECTOR IS REVIEWED AND APPROVED BY THE

EXECUTIVE COMMITTEE AND THEN THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

COMPENSATION OF OFFICERS AND KEY EMPLOYEES IS APPROVED BY THE EXECUTIVE

COMMITTEE.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

PAGE 1 OF 1

Form **4562** 

**Depreciation and Amortization** 

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

ZUZZ

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

THE DRAKE HOUSE INC

Identifying number 20-0943038

	THE DR		INC.					
	ess or activity to which this form relates							
	DIRECT DEPRECIAT	TON	orty Under Section	n 170				
Pa	nt I Election To Exper Note: If you have a	ise Certain Prop	erty Under Section	n 179	molete Part	ŧ		
							1	1,080,000
1	Maximum amount (see instruction		instructions)				2	2/000/000
2	Total cost of section 179 property Threshold cost of section 179 pro						3	2,700,000
3	Reduction in limitation. Subtract li						4	
4	Dollar limitation for tax year. Subtract li	ne 4 from line 1. If zero or	loss enter 0. If married	iling congrately se	ee instructions	*****	5	
5	Dollar limitation for tax year. Subtract in			Cost (business use of		lected cost		
6	(a) Description	п от ргорогсу	(-,					
_	Listed property. Enter the amount	from line 20			7			
7	Total elected cost of section 179						8	
8	Tentative deduction. Enter the sn						9	
9	Carryover of disallowed deduction						10	
10	Business income limitation. Enter	the smaller of husine	ss income (not less tha	n zero) or line 5	5. See instruction	ns	11	
11 12	Section 179 expense deduction.						12	
13	Carryover of disallowed deduction				13			
Note:	: Don't use Part II or Part III below	for listed property. Ins	tead, use Part V.					
	rt II Special Depreciat	ion Allowance a	nd Other Depreci	ation (Don't	include listed	propert	y. Se	e instructions.)
14	Special depreciation allowance for	or qualified property (o	ther than listed propert	/) placed in sen	/ice			
	during the tax year. See instruction						14	
15	Property subject to section 168(f)						15	
16	Other depreciation (including ACI						16	210,881
CONTRACTOR OF THE PARTY OF THE	rt III MACRS Deprecia	tion (Don't includ	e listed property. S	ee instructio	ns.)			
-	CONTRACTOR OF THE PARTY OF THE							
			Section A					
17	MACRS deductions for assets pla	aced in service in tax y					17	0
17 18	If you are electing to group any assets place	ed in service during the tax ye	rears beginning before	2022 set accounts, check	here			0
	If you are electing to group any assets place	ed in service during the tax ye	rears beginning before ar into one or more general as vice During 2022 Tax	2022 set accounts, check Year Using the	here			0
	If you are electing to group any assets place	ed in service during the tax ye	rears beginning before	2022 set accounts, check Year Using the	here		ystem	(g) Depreciation deduction
	If you are electing to group any assets place Section B—	Assets Placed in Ser (b) Month and year placed in	rears beginning before ar into one or more general as vice During 2022 Tax (c) Basis for depreciation (business/investment use	2022 set accounts, check Year Using the	e General Depre	eciation S	ystem	
18	If you are electing to group any assets place Section B—  (a) Classification of property	Assets Placed in Ser (b) Month and year placed in	rears beginning before ar into one or more general as vice During 2022 Tax (c) Basis for depreciation (business/investment use	2022 set accounts, check Year Using the	e General Depre	eciation S	ystem	
18 19a	If you are electing to group any assets place Section B—  (a) Classification of property  3-year property	Assets Placed in Ser (b) Month and year placed in	rears beginning before ar into one or more general as vice During 2022 Tax (c) Basis for depreciation (business/investment use	2022 set accounts, check Year Using the	e General Depre	eciation S	ystem	
18 19a b	Section B—  (a) Classification of property  3-year property  5-year property	Assets Placed in Ser (b) Month and year placed in	rears beginning before ar into one or more general as vice During 2022 Tax (c) Basis for depreciation (business/investment use	2022 set accounts, check Year Using the	e General Depre	eciation S	ystem	
19a b c	If you are electing to group any assets place Section B—  (a) Classification of property  3-year property  5-year property  7-year property	Assets Placed in Ser (b) Month and year placed in	rears beginning before ar into one or more general as vice During 2022 Tax (c) Basis for depreciation (business/investment use	2022 set accounts, check Year Using the	e General Depre	eciation S	ystem	
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19a b c d e	If you are electing to group any assets place Section B—  (a) Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property	Assets Placed in Ser (b) Month and year placed in	rears beginning before ar into one or more general as vice During 2022 Tax (c) Basis for depreciation (business/investment use	set accounts, check Year Using the (d) Recovery period  25 yrs.	e General Depre	eciation S (f) Meth	ystem	
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19a b c d e f	If you are electing to group any assets place Section B—  (a) Classification of property  3-year property  5-year property  10-year property  15-year property  20-year property  Residential rental	Assets Placed in Ser (b) Month and year placed in	rears beginning before ar into one or more general as vice During 2022 Tax (c) Basis for depreciation (business/investment use	2022 set accounts, check Year Using the (d) Recovery period  25 yrs. 27.5 yrs.	(e) Convention  MM  MM  MM  MM	S/L S/L S/L	ystem	
19a b c d e f	If you are electing to group any assets place Section B—  (a) Classification of property  3-year property  5-year property  10-year property  15-year property  20-year property  Residential rental property  Nonresidential real property	d in service during the tax ye  Assets Placed in Ser  (b) Month and year placed in service	vears beginning before ar into one or more general as vice During 2022 Tax  (c) Basis for depreciation (business/investment use only-see instructions)	2022 set accounts, check Year Using the (d) Recovery period  25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	MM MM MM MM MM	S/L S/L S/L S/L	ystem	(g) Depreciation deduction
19a b c d e f	If you are electing to group any assets place Section B—  (a) Classification of property  3-year property  5-year property  10-year property  15-year property  20-year property  Residential rental property  Nonresidential real property	d in service during the tax ye  Assets Placed in Ser  (b) Month and year placed in service	rears beginning before ar into one or more general as vice During 2022 Tax (c) Basis for depreciation (business/investment use	2022 set accounts, check Year Using the (d) Recovery period  25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	MM MM MM MM MM	S/L S/L S/L S/L	ystem	(g) Depreciation deduction
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19a b c d e f g h	Section B—  (a) Classification of property  3-year property  5-year property  10-year property  15-year property  20-year property  Residential rental property  Nonresidential real property  Section C—A	d in service during the tax ye  Assets Placed in Ser  (b) Month and year placed in service	vears beginning before ar into one or more general as vice During 2022 Tax  (c) Basis for depreciation (business/investment use only-see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs.	MM MM MM MM MM Alternative Dep	S/L	ystem	(g) Depreciation deduction
19a b c d e f g h i 20a	Section B—  (a) Classification of property  3-year property  5-year property  10-year property  20-year property  Residential rental property  Nonresidential real property  Section C—A:  Class life	d in service during the tax ye  Assets Placed in Ser  (b) Month and year placed in service	vears beginning before ar into one or more general as vice During 2022 Tax  (c) Basis for depreciation (business/investment use only-see instructions)	2022 set accounts, check Year Using the (d) Recovery period  25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.  Year Using the  12 yrs. 30 yrs.	MM MM MM MM Alternative Dep	S/L	ystem	(g) Depreciation deduction
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19a b c d e f g h i 20a b c d d	(a) Classification of property  3-year property  5-year property  10-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Class life  12-year  30-year  40-year  Listed property. Enter amount fro	Assets Placed in Ser  (b) Month and year placed in service  (b) Month and year placed in service  service	vears beginning before ar into one or more general as vice During 2022 Tax  (c) Basis for depreciation (business/investment use only-see instructions)	2022  set accounts, check Year Using the  (d) Recovery period  25 yrs.  27.5 yrs.  27.5 yrs.  39 yrs.  Year Using the  12 yrs.  30 yrs.  40 yrs.	MM MM MM Alternative Dep	S/L	ystem	(g) Depreciation deduction
19a b c d e f g h i 20a b c d d P 2	(a) Classification of property  3-year property  5-year property  10-year property  20-year property  20-year property  Residential rental property  Nonresidential real property  Class life  12-year  30-year  40-year  Section Section Section  Summary (See in:	Assets Placed in Ser  (b) Month and year placed in service  (b) Month and year placed in service  ssets Placed in Service  structions.)  om line 28 , lines 14 through 17, of your return. Partners	vears beginning before ar into one or more general as vice During 2022 Tax  (c) Basis for depreciation (business/investment use only-see instructions)  ice During 2022 Tax \( \)	25 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.  12 yrs. 30 yrs. 40 yrs.	MM MM MM Alternative Dep	S/L	ystem	(g) Depreciation deduction

5059 The Drake House, Inc.

20-0943038

Federal Asset Report Form 990, Page 1

FYE: 6/30/2023

		Date		Bus Sec Basis
Asset	Description	In Service	Cost	% 179Bonus for Depr PerConv Meth Prior Current
1.0001				
0.1	Descriptions			
	Office Building	10/03/06	560,000	560,000 31 MO S/L 280,000 17,778
16	Playground Equipment	11/28/06	10,208	10,208 10 MO S/L 10,208 0
17	Other Improvements/Landscaping	12/31/06	5,000	5,000 10 MO S/L 5,000 0
23	Mary Drake Sign	1/19/07	6,368	6,368 10 MO S/L 6,368 0 12,000 10 MO S/L 12,000 0
	Plumbing - Valves on water mains	12/07/07	12,000 3,525	12,000 10 MO S/L 12,000 0 3,525 10 MO S/L 3,525 0
27	Miscellaneous Repairs	2/08/08 1/29/08	2,400	2,400 10 MO S/L 2,400 0
29 33	Windows (7) Patio Doors - Apartments	6/04/09	1,200	1,200 10 MO S/L 1,200 0
	Patio Doors - Apartments	7/08/09	2,508	2,508 10 MO S/L 2,508 0
48	Main Breaker - Rewire	8/31/09	291	291 10 MO S/L 291 0
49	Cabinets - Apartment A1	9/16/09	585	585 10 MO S/L 585 0 3.708 10 MO S/L 3.708 0
	Patio Doors - Apartments	2/04/10	3,708	3,708 10 MO S/L 3,708 0 766 10 MO S/L 766 0
52	Dormer Roofs - Building A	1/15/10	766 1,135	1,135 7 MO S/L 1,135 0
55 56	Furniture & Accessories - Middle School Re Furniture & Accessories - Preschool Room	11/01/09	694	694 7 MO S/L 694 0
57	Bronze Plaque	11/01/09	424	424 7 MO S/L 424 0
60	Pavers	11/01/09	3,500	3,500 10 MO S/L 3,500 0
61	Grade & Timbers	11/01/09	1,650	1,650 10 MO S/L 1,650 0
62	Outdoor Seating	11/01/09	997	997 10 MO S/L 997 0 400 7 MO S/L 400 0
63	Tables	11/01/09 11/01/09	400 330	400 7 MO S/L 400 0 330 10 MO S/L 330 0
	Paint Kitchen Cabinets	11/01/09	3,000	3,000 10 MO S/L 3,000 0
65 76	Apartment Building	7/01/10	561,116	561,116 31 MO S/L 213,758 17,814
	Land - Apartment	7/01/10	62,346	62,346 0 Land 0 0
84	TDC Kitchen Update	9/27/11	1,250	1,250 3 MO S/L 1,250 0
	Wireless Installation	7/01/12	6,250	6,250 5 MO S/L 6,250 0 7,500 10 MO S/L 7,426 74
91	Computer Installation	7/01/12 10/25/12	7,500 3,300	7,500 10 MO S/L 7,426 /4 3,300 10 MO S/L 3,190 110
	Built-in Cabinets - Social Worker Office HVAC	4/29/13	67,619	67,619 10 MO S/L 61,984 5,635
	TDC - Point of Sale System	6/21/13	4,354	4.354 5 MO S/L 4,354 0
	Lighting System	5/01/13	3,277	3,277 7 MO S/L 3,277 0
108	Office Buildout Design & Engineering Serv	6/30/14	14,340	14,340 10 MO S/L 11,472 1,434 10,533 7 MO S/L 10,533 0
109	Shed	6/30/14	10,533	10,533 7 MO S/L 10,533 0 1,000 10 MO S/L 883 100
	HVAC - Unit A7 Salesforce.com CRM System	8/27/13 3/31/14	1,000 10,213	10.213 5 MO S/L 10,213 0
122 123	Gutters & Carpentry Work - Apartments	2/20/14	7,200	7,200 10 MO S/L 6,000 720
124	Gutters & Carpentry Work - Office	3/12/14	3,820	3,820 10 MO S/L 3,183 382
125	Roof - Apartments	2/20/14	12,860	12,860 10 MO S/L 10,717 1,286
126	Roof - Office	2/20/14	8,550	8,550 10 MO S/L 7,125 855 2,196 7 MO S/L 2,196 0
127	Furniture for Children's Room	7/18/13	2,196	2,196 7 MO S/L 2,170 0 2,974 10 MO S/L 2,131 298
149	Landscaping Tub/Shower Valve	5/07/15 3/24/15	2,974 1,250	1,250 10 MO S/L 906 125
151 154	60 Inch TV	4/01/15	963	963 5 MO S/L 963 0
	Folding Tables (4)	6/11/15	556	556 7 MO S/L 556 0
	Folding Chairs (16)	6/11/15	784	784 7 MO S/L 784 0
157	Poppies I Painting	5/11/15	4,800	4,800 7 MO S/L 4,800 0 249 7 MO S/L 249 0
	Utility Cart	5/11/15 5/11/15	249 269	249 7 MO S/L 249 0 269 7 MO S/L 269 0
161	Cafeteria Table Portable Double Sided Bike Rack	5/11/15	519	519 7 MO S/L 519 0
163	Frigidaire Gallery Refrigerator/Freezer	5/11/15	1,967	1,967 7 MO S/L 1,967 0
	Salesforce Updates	7/23/15	1,800	1,800 3 MO S/L 1,800 0
168	Salesforce CRM System - Phase I	3/05/13	2,185	2,185 5 MO S/L 2,185 0
	Website Development	7/01/15	4,827	4,827 3 MO S/L 4,827 0 504 7 MO S/L 486 18
170	Training Table 1 of 6	9/24/15 4/21/16	504 2,510	2,510 7 MO S/L 2,211 299
	Fixtures for TDC Sandy Springs Training Table 2 of 6	9/24/15	504	504 7 MO S/L 486 18
172 173	Training Table 2 of 6	9/24/15	504	504 7 MO S/L 486 18
174	Training Table 4 of 6	9/24/15	504	504 7 MO S/L 486 18
	Training Table 5 of 6	9/24/15	504	504 7 MO S/L 486 18
176	Training Table 6 of 6	9/24/15	504	504 7 MO S/L 486 18 1,579 5 MO S/L 1,579 0
177	Wireless Access Point Device 1 of 5	1/28/16	1,579	1,579 5 MO S/L 1,579 0 1,579 5 MO S/L 1,579 0
178	Wireless Access Point Device 2 of 5 Wireless Access Point Device 3 of 5	1/28/16 1/28/16	1,579 1,579	1,579 5 MO S/L 1,579 0
179	Wireless Access Point Device 3 of 5 Wireless Access Point Device 4 of 5	1/28/16	1,579	1,579 5 MO S/L 1,579 0
	Wireless Access Point Device 5 of 5	1/28/16	1,579	1,579 5 MO S/L 1,579 0
182	Wireless Upgrade Devices	2/01/16	733	733 5 MO S/L 733 0 365 5 MO S/L 365 0
183	iPad	3/18/16	365	365 5 MO S/L 365 0 365 5 MO S/L 365 0
184	iPad	3/18/16	365	JUJ J 1910 J/L JUJ 0

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194   Farking Lot Faving & String Foliate Center   195   Concrete Curbing - Drake Center   6/30/16   2,100   1,040   10   MO S/L   659     196   Tree Removal for Parking Lot Resurfacing   3/01/16   1,040   1,040   10   MO S/L   659     197   The Drake Center Addition   8/19/15   267,315   267,315   31   MO S/L   57,989     201   Tree Removal at Apartments   12/08/16   3,500   3,500   10   MO S/L   1,954     202   Tree Removal at Playground   6/08/17   3,400   3,400   10   MO S/L   1,728     203   16   Hot Water Heaters   8/17/16   10,946   10,946   10   MO S/L   6,385     204   HVAC - A6   11/30/16   2,300   2,300   10   MO S/L   1,284     205   HVAC - B6   11/30/16   2,300   2,300   10   MO S/L   1,284     206   HVAC - B7   11/30/16   2,300   2,300   10   MO S/L   1,284     207   HVAC - B8   11/30/16   2,300   2,300   10   MO S/L   1,284     208   HVAC - B1   1/11/17   2,500   2,500   10   MO S/L   1,375     209   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10   MO S/L   1,375     210   HVAC - A1   1/12/17   2,500	
186         iPad         3/18/16         365         365         5 MO S/L         365           187         HVAC Unit - 2.5 Ton - A-5         9/25/15         2,300         2,300 10 MO S/L         1,553           189         Exterior Lighting for Buildings A & B         1/06/16         4,760         4,760 10 MO S/L         3,094           191         HVAC System A-8         3/11/16         2,275         2,275 10 MO S/L         1,441           192         HVAC System B-5         3/11/16         2,275         2,275 10 MO S/L         1,441           193         Exterior Lighting for The Drake Center         12/09/15         3,000         3,000 10 MO S/L         1,441           193         Exterior Lighting for The Drake Center         12/09/15         3,000         3,000 10 MO S/L         1,441           193         Exterior Lighting for The Drake Center         12/09/15         3,000         3,000 10 MO S/L         1,975           194         Parking Lot Paving & Striping - Drake Center         16/30/16         17,858         17,858 10 MO S/L         1,975           195         Concrete Curbing - Drake Center         6/30/16         2,100         2,100 10 MO S/L         1,260           196         Tree Removal for Parking Lot Resurfacing         3/01/16 <t< td=""><td><math>\frac{m}{0}</math></td></t<>	$\frac{m}{0}$
187   HVAC Unit - 2.5 Ton - A-5   9/25/15   2,300   2,300   10 MO S/L   1,553   189   Exterior Lighting for Buildings A & B   1/06/16   4,760   4,760   10 MO S/L   3,094   191   HVAC System A-8   3/11/16   2,275   2,275   10 MO S/L   1,441   192   HVAC System B-5   3/11/16   2,275   2,275   10 MO S/L   1,441   192   HVAC System B-5   3/11/16   2,275   2,275   10 MO S/L   1,441   193   Exterior Lighting for The Drake Center   12/09/15   3,000   3,000   10 MO S/L   1,975   194   Parking Lot Paving & Striping - Drake Center   12/09/15   3,000   3,000   10 MO S/L   1,975   195   Concrete Curbing - Drake Center   6/30/16   2,100   2,100   10 MO S/L   1,260   196   Tree Removal for Parking Lot Resurfacing   3/01/16   1,040   1,040   10 MO S/L   659   197   The Drake Center Addition   8/19/15   267,315   267,315   31 MO S/L   57,989   197   The Drake Center Addition   8/19/15   267,315   267,315   3,500   3,500   10 MO S/L   1,954	0
189   Exterior Lighting for Buildings A & B   1/06/16   4,760   4,760   10 MO S/L   3,094     191   HVAC System A-8   3/11/16   2,275   2,275   10 MO S/L   1,441     192   HVAC System B-5   3/11/16   2,275   2,275   10 MO S/L   1,441     193   Exterior Lighting for The Drake Center   12/09/15   3,000   3,000   10 MO S/L   1,975     194   Parking Lot Paving & Striping - Drake Center   3/07/16   17,858   17,858   10 MO S/L   1,310     195   Concrete Curbing - Drake Center   6/30/16   2,100   2,100   10 MO S/L   1,260     196   Tree Removal for Parking Lot Resurfacing   3/01/16   1,040   1,040   10 MO S/L   659     197   The Drake Center Addition   8/19/15   267,315   267,315   31 MO S/L   57,989     201   Tree Removal at Apartments   12/08/16   3,500   3,500   10 MO S/L   1,954     202   Tree Removal at Playground   6/08/17   3,400   3,400   10 MO S/L   1,728     203   16 Hot Water Heaters   8/17/16   10,946   10,946   10,946   10 MO S/L   6,385     204   HVAC - A6   11/30/16   2,300   2,300   10 MO S/L   1,284     205   HVAC - B6   11/30/16   2,300   2,300   10 MO S/L   1,284     206   HVAC - B7   11/30/16   2,300   2,300   10 MO S/L   1,284     207   HVAC - B8   11/30/16   2,300   2,300   10 MO S/L   1,284     208   HVAC - B1   1/11/17   2,500   2,500   10 MO S/L   1,375     209   HVAC - B4   1/11/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12	230
191	476 227
193   Exterior Lighting for The Drake Center   12/09/15   3,000   3,000   10 MO S/L   1,975     194   Parking Lot Paving & Striping - Drake Cent   3/07/16   17,858   17,858   10 MO S/L   11,310     195   Concrete Curbing - Drake Center   6/30/16   2,100   2,100   10 MO S/L   1,260     196   Tree Removal for Parking Lot Resurfacing   3/01/16   1,040   1,040   10 MO S/L   659     197   The Drake Center Addition   8/19/15   267,315   267,315   31 MO S/L   57,989     201   Tree Removal at Apartments   12/08/16   3,500   3,500   10 MO S/L   1,954     202   Tree Removal at Playground   6/08/17   3,400   3,400   10 MO S/L   1,728     203   16 Hot Water Heaters   8/17/16   10,946   10,946   10,946   10,946   10,946   10,946     204   HVAC - A6   11/30/16   2,300   2,300   10 MO S/L   1,284     205   HVAC - B6   11/30/16   2,300   2,300   10 MO S/L   1,284     206   HVAC - B7   11/30/16   2,300   2,300   10 MO S/L   1,284     207   HVAC - B8   11/30/16   2,300   2,300   10 MO S/L   1,284     208   HVAC - B1   1/11/17   2,500   2,500   10 MO S/L   1,375     209   HVAC - B4   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   10 MO S/L   1,375     210   HVAC - A1   1/12/17   2,500   2,500   2,500   2,500   2,500   2,500     210   HVAC - A1   1/12/17   2,500   2,500	227
194   Parking Lot Paving & Striping - Drake Cent   3/07/16   17,858   17,858   10 MO S/L   17,510   195   Concrete Curbing - Drake Center   6/30/16   2,100   2,100   10 MO S/L   1,260   196   Tree Removal for Parking Lot Resurfacing   3/01/16   1,040   1,040   10 MO S/L   659   197   The Drake Center Addition   8/19/15   267,315   267,315   31 MO S/L   57,989   201   Tree Removal at Apartments   12/08/16   3,500   3,500   10 MO S/L   1,954   202   Tree Removal at Playground   6/08/17   3,400   3,400   10 MO S/L   1,728   203   16 Hot Water Heaters   8/17/16   10,946   10,946   10 MO S/L   6,385   204   HVAC - A6   11/30/16   2,300   2,300   10 MO S/L   1,284   205   HVAC - B6   11/30/16   2,300   2,300   10 MO S/L   1,284   206   HVAC - B7   11/30/16   2,300   2,300   10 MO S/L   1,284   207   HVAC - B8   11/30/16   2,300   2,300   10 MO S/L   1,284   208   HVAC - B1   1/11/17   2,500   2,500   10 MO S/L   1,375   209   HVAC - B4   1/12/17   2,500   2,500   10 MO S/L   1,375   2,500   10 HO S/L   1,375   2,500   10 HO S/L   1,375   2,500   2,500   10 MO S/L   1,375   2,500	300
195   Concrete Cutoffing	,786 210
197   The Drake Center Addition   8/19/15   267,315   267,315   31 MO S/L   57,989	104
202 Tree Removal at Playground 203 16 Hot Water Heaters 204 HVAC - A6 205 HVAC - B6 206 HVAC - B7 207 HVAC - B8 207 HVAC - B8 208 HVAC - B1 209 HVAC - B1 209 HVAC - B4 200 HVAC - B4 20	,486 350
203 16 Hot Water Heaters 8/17/16 10,946 10,946 10 MO S/L 6,385 204 HVAC - A6 11/30/16 2,300 2,300 10 MO S/L 1,284 205 HVAC - B6 11/30/16 2,300 2,300 10 MO S/L 1,284 206 HVAC - B7 11/30/16 2,300 2,300 10 MO S/L 1,284 207 HVAC - B8 11/30/16 2,300 2,300 10 MO S/L 1,284 208 HVAC - B1 1/11/17 2,500 2,300 10 MO S/L 1,375 209 HVAC - B4 1/11/17 2,500 2,500 10 MO S/L 1,375 210 HVAC - A1 1/12/17 2,500 2,500 10 MO S/L 1,375	340
204     HVAC - A6     11/30/16     2,300     2,300     10 MO S/L     1,284       205     HVAC - B6     11/30/16     2,300     2,300     10 MO S/L     1,284       206     HVAC - B7     11/30/16     2,300     2,300     10 MO S/L     1,284       207     HVAC - B8     11/30/16     2,300     2,300     10 MO S/L     1,284       208     HVAC - BI     1/11/17     2,500     2,500     10 MO S/L     1,375       209     HVAC - B4     1/12/17     2,500     2,500     10 MO S/L     1,375       210     HVAC - AI     1/12/17     2,500     2,500     10 MO S/L     1,375	,095
206 HVAC - B7	230 230
207 HVAC - B8	230
208 HVAC - BI 1/11/17 2,500 2,500 10 MO S/L 1,375 209 HVAC - B4 1/11/17 2,500 2,500 10 MO S/L 1,375 210 HVAC - AI 1/12/17 2,500 2,500 10 MO S/L 1,375	230
209 HVAC - B4 210 HVAC - A1 1/12/17 2,500 2,500 10 MO S/L 1,375	250 250
1 /10 HVAC - AL	250
1/12/17 2,500 2,500 10 MO S/L 1,3/3	250
212 HVAC - A3 3/06/17 2,500 2,500 10 MO S/L 1,333	250 250
213 HVAC - A4 2/06/17 2,500 2,500 10 MO S/I 1333	250
214 HVAC B2 3/06/17 2 500 2.500 10 MO S/L 1,333	250
216 Sign for TDC Sandy Springs 11/17/16 3,420 3,420 3,420 5 MO S/L 3,420	0
1 /1 riouring at 1 DC Sandy Springs	0
218 Outdoor Security Lights at 150 Sandy Spit 1700/17 3,200 3,200 5 MO S/L 3,200	0
220 The Drake Village Apartments 2/14/17 957,038 957,038 31 MO S/L 104,570	,382 0
221 Land - The Drake Village Apartments 2/14/17 400,000 12,920 10 MO S/L 5,706	,292
223 Replacement of Cast Ion Pipes under VIII 2/05 612,095 612,095 31 MO S/L 79,346 1	,431
225 TDV Vinyl Flooring 5/03/18 4,115 4,115 10 MO S/L 1,715	411
228 Total Appliances 6/2/18 4.672 4.672 7 MO S/L 2,670	667
230 Custom Playground 8/17/17 20,093 20,093 10 MO S/L 9,712	2,009
231 Outdoor Pavilion 6/18/18 12,137 12,137 10 MO 5/L 4,833	,214 3,886
234 Depoted Leptons 1/01/19 6.102 6.102 5 MO S/L 4,271	,221
235 TDV Fence & Gates 7/11/18 4,861 4,861 10 MO S/L 1,944	487 .791
236 TDV Roof Replacement 6/24/19 17,908 17,908 10 MO S/L 5,372 10/29/18 14,960 14,960 10 MO S/L 5,485	,496
237 Favilion 1/30/19 26.820 26.820 10 MO S/L 9,164	2,682
239 TDV HomeAid Renovations 1/17/19 222,754 222,754 31 MO S/L 24,161	7,072 3,282
244 TDCA Leasehold Improvements 12/05/19 16,414 16,414 5 MO S/L 8,481 245 Pine Rehabilitation 1/07/20 19,625 19,625 30 MO S/L 1,635	655
245 Pipe Rehabilitation 1707/20 13,025 1245 Pipe Rehabilitation 1707/20 1245 Pipe Pipe Rehabilitation 1707/20 Pipe Pipe Rehabilitation 1707/20 Pipe Pipe Pipe Pipe Pipe Pipe Pipe Pipe	3,170
248 Speed Queen Stacked Washer & Dryer 5/11/20 3,685 3,685 5 MO S/L 1,597	737 737
249 Speed Queen Stacked Washer to Edys	1,558
250 Payrioli Clear Schedus 6/18/21 6.342 6.342 10 MO S/L 634	634
253 Classroom Heat Pump 5 Ton 8/31/20 6,925 6,925 10 MO S/L 1,270	692 1,825
254 Pipe Keliab - Dunung B	1,851
256 Tulti Area improvement 6/28/21 5,986 5 MO S/L 1,197	1,197
258 Website 12/28/20 6,000 6,000 3 MO S/L 3,000	2,000 2,352
260 Microsoft Feating Telephony 8/16/21 3,411 31 MO S/L 90	109
261 Drake Center Awnings 8/16/21 2,884 2,884 31 MO S/L 76	92
263 Drake Apartment Building B Cabinets 8/18/21 52,671 52,671 10 MO 5/L 4,383	5,267 2,019
204 Deske Apartment Building A Repositions 9/22/21 62.947 62.947 30 MO S/L 1,574	2,098
266 Drake Apartment Building A Pipe Rehab 10/14/21 57,500 57,500 31 MO S/L 1,369	1,825
267 Drake Apartments Building A Cabinets 11/10/21 55,227 55,227 10 MO S/L 5,002	5,523 5,932
260 Desky Apartments Windows 6/09/22 22.356 22,356 30 MO S/L 62	745
270 Family Service Center HVAC 3/31/22 10,785 10,785 30 MO S/L 90	359 941
271 27" Speed Queen Multi-Cycle Stacked Laur 5/19/22 9,410 9,410 10 MO 5/L /6	787
272 Dell Latitude 5520 Laptop 6/01/22 3,937 3,937 3 WO 3/L 30	

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# Federal Asset Report Form 990, Page 1

Accet	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	Рег	Conv Meth	Prior	Current
273 274 275 276 277 278 279 280	TDH Campus Computer Equipment Upgraci Resource Center Land - Resource Center Germicidal UVC system Smart Boards Interactive Displays Fire Alarm for Drake Center Drake Center Renovation Office Furniture - Drake Center		37,667 389,100 160,900 4,883 10,728 11,556 226,323 5,407		<u> </u>	37,667 389,100 160,900 4,883 10,728 11,556 226,323 5,407	5 31 0 5 5 10 31 7	MO S/L MO S/L Land MO S/L	1,883 0 0 0 0 0 0 0	7,534 3,088 0 895 1,073 578 2,994 322
281 282	Golf Cart - Evolution EV Carpet & Installation	10/20/22 6/30/23	10,343 5,647		_	10,343 5,647		MO S/L MO S/L	0	1,379
202	Total Other Depreciation	-	5,842,244		-	5,842,244			1,284,079	210,881
Total ACRS and Other Depreciation			5,842,244		=	5,842,244			1,284,079	210,881
	Grand Totals Less: Dispositions and Transfers Less: Start-up/Org Expense Net Grand Totals					5,842,244 0 0 5,842,244			1,284,079 0 0 1,284,079	210,881 0 0 210,881

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## GA Asset Report Form 990, Page 1

		D.I.		Di-	C A	C A	Endoral	Difference
Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Fed - GA
7,3301								
Othor	Depreciation:							
Other	Office Building	10/03/06	560,000	560,000	280,000	17,778	17,778	0
16	Playground Equipment	11/28/06 12/31/06	10,208 5,000	10,208 5,000	10,208 5,000	0	0	
17 23	Other Improvements/Landscaping Mary Drake Sign	1/19/07	6,368	6,368	6,368	Ö	0	0
26	Plumbing - Valves on water mains	12/07/07	12,000	12,000	12,000	0	0	
27	Miscellaneous Repairs	2/08/08 1/29/08	3,525 2,400	3,525 2,400	3,525 2,400	0	0	
29 33	Windows (7) Patio Doors - Apartments	6/04/09	1,200	1,200	1,200	0	0	0
47	Patio Doors - Apartments	7/08/09	2,508	2,508	2,508	0	0	
48	Main Breaker - Rewire	8/31/09 9/16/09	291 585	291 585	291 585	0	0	
49 50	Cabinets - Apartment Al Patio Doors - Apartments	2/04/10	3,708	3,708	3,708	0	0	0
52	Dormer Roofs - Building A	1/15/10	766	766	766	0	0	
55	Furniture & Accessories - Middle School Re Furniture & Accessories - Preschool Room	11/01/09	1,135 694	1,135 694	1,135 694	0	0	
56 57	Bronze Plaque	11/01/09	424	424	424	0	0	0
60	Pavers	11/01/09	3,500	3,500	3,500	0	0	
61	Grade & Timbers	11/01/09 11/01/09	1,650 997	1,650 997	1,650 997	0	0	
62 63	Outdoor Seating Tables	11/01/09	400	400	400	0	0	0
64	Paint	11/01/09	330	330	330	0	0	
65 76	Kitchen Cabinets Apartment Building	11/01/09 7/01/10	3,000 561,116	3,000 561,116	3,000 213,758	17,814	17,814	
80	Land - Apartment	7/01/10	62,346	62,346	0	0	0	0
84	TDC Kitchen Update	9/27/11	1,250	1,250	1,250	0	0	
90 91	Wireless Installation Computer Installation	7/01/12 7/01/12	6,250 7,500	6,250 7,500	6,250 7,426	74	74	
92	Built-in Cabinets - Social Worker Office	10/25/12	3,300	3,300	3,190	110	110	
93	HVAC	4/29/13	67,619	67,619 4,354	61,984 4,354	5,635 0	5,635 0	
106	TDC - Point of Sale System Lighting System	6/21/13 5/01/13	4,354 3,277	3,277	3,277	0	Ö	0
108	Office Buildout Design & Engineering Serv	6/30/14	14,340	14,340	11,472	1,434	1,434	0
109	Shed	6/30/14 8/27/13	10,533	10,533 1,000	10,533	0 100	0 100	
111	HVAC - Unit A7 Salesforce.com CRM System	3/31/14	10,213	10,213	10,213	0	C	0
123	Gutters & Carpentry Work - Apartments	2/20/14	7,200	7,200	6,000	720	720	
	Gutters & Carpentry Work - Office	3/12/14 2/20/14	3,820 12,860	3,820 12,860	3,183 10,717	382 1,286	382 1,286	
125	Roof - Apartments Roof - Office	2/20/14	8,550	8,550	7,125	855	855	0
127	Furniture for Children's Room	7/18/13	2,196	2,196	2,196	0	200	
149	Landscaping	5/07/15 3/24/15	2,974 1,250	2,974 1,250	2,131 906	298 125	298 125	
151	Tub/Shower Valve 60 Inch TV	4/01/15	963	963	963	0	(	0
155	Folding Tables (4)	6/11/15	556	556	556	0	(	
	Folding Chairs (16)	6/11/15 5/11/15	784 4,800	784 4,800	784 4,800	0	(	
160	Poppies I Painting Utility Cart	5/11/15	249	249	249	0	(	0000
161	Cafeteria Table	5/11/15	269	269	269	0	(	200
162	Portable Double Sided Bike Rack Frigidaire Gallery Refrigerator/Freezer	5/11/15 5/11/15	519 1,967	519 1,967	519 1,967	0	(	
	Salesforce Updates	7/23/15	1,800	1,800	1,800	0	(	0
168	Salesforce CRM System - Phase I	3/05/13	2,185	2,185	2,185	0	(	9,59
169	Website Development Training Table 1 of 6	7/01/15 9/24/15	4,827 504	4,827 504	4,827 486	18	18	(1)43
171	Fixtures for TDC Sandy Springs	4/21/16	2,510	2,510	2,211	299	299	0
	Training Table 2 of 6	9/24/15	504	504	486	18 18	18 18	
173	Training Table 3 of 6 Training Table 4 of 6	9/24/15 9/24/15	504 504	504 504	486 486	18	18	8 0
175	Training Table 4 of 6 Training Table 5 of 6	9/24/15	504	504	486	18	18	8 0
176	Training Table 6 of 6	9/24/15	504	504	486	18	18	0 0
177	Wireless Access Point Device 1 of 5 Wireless Access Point Device 2 of 5	1/28/16 1/28/16	1,579 1,579	1,579 1,579	1,579 1,579	0		0 0
179	Wireless Access Point Device 3 of 5	1/28/16	1,579	1,579	1,579	0		0 0
180	Wireless Access Point Device 4 of 5	1/28/16	1,579	1,579	1,579	0		0 0
181	Wireless Access Point Device 5 of 5 Wireless Upgrade Devices	1/28/16 2/01/16	1,579 733	1,579 733	1,579 733	0		0 0
183	iPad	3/18/16	365	365	365	0		0 0
	iPad	3/18/16	365	365	365	0		0 0
I								

5059 The Drake House, Inc.

20-0943038

FYE: 6/30/2023

## GA Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Difference Fed - GA
185	iPad	3/18/16	365	365	365	0	0	0
186	iPad	3/18/16	365	365	365	0	0	0
187	HVAC Unit - 2.5 Ton - A-5	9/25/15	2,300	2,300	1,553	230	230	0
		1/06/16	4,760	4,760	3,094	476	476	0
191	HVAC System A-8	3/11/16	2,275	2,275	1,441	227	227 227	0
	HVAC System B-5	3/11/16 12/09/15	2,275 3,000	2,275 3,000	1,441 1,975	227 300	300	ő
193	Exterior Lighting for The Drake Center Parking Lot Paving & Striping - Drake Cent		17,858	17,858	11,310	1,786	1,786	ŏ
194 195	Concrete Curbing - Drake Center	6/30/16	2,100	2,100	1,260	210	210	0
196	Tree Removal for Parking Lot Resurfacing	3/01/16	1,040	1,040	659	104	104	0
197	The Drake Center Addition	8/19/15	267,315	267,315	57,989	8,486	8,486	0
	Tree Removal at Apartments	12/08/16	3,500	3,500	1,954	350	350	0
202	Tree Removal at Playground	6/08/17	3,400	3,400	1,728	340	340	0
	16 Hot Water Heaters	8/17/16	10,946	10,946 2,300	6,385 1,284	1,095 230	1,095 230	0
	HVAC - A6	11/30/16 11/30/16	2,300 2,300	2,300	1,284	230	230	ő
	HVAC - B6 HVAC - B7	11/30/16	2,300	2,300	1,284	230	230	0
		11/30/16	2,300	2,300	1,284	230	230	0
	HVAC - B1	1/11/17	2,500	2,500	1,375	250	250	0
	HVAC - B4	1/11/17	2,500	2,500	1,375	250	250	0
210	HVAC - AI	1/12/17	2,500	2,500	1,375	250	250	0
211	HVAC - A2	1/12/17	2,500	2,500	1,375	250	250 250	0
212	HVAC - A3	3/06/17	2,500	2,500	1,333 1,333	250 250	250	ŏ
	HVAC - A4	3/06/17 3/06/17	2,500 2,500	2,500 2,500	1,333	250	250	ŏ
	HVAC - B2 HVAC - B3	3/06/17	2,500	2,500	1,333	250	250	0
213		11/17/16	3,420	3,420	3,420	0	0	0
	Flooring at TDC Sandy Springs	11/07/16	3,722	3,722	3,722	0	0	0
218	Outdoor Security Lights at TDC Sandy Spri	11/16/16	3,685	3,685	3,685	0	0	0
219	Materials & Labor at TDC Sandy Springs	2/09/17	3,200	3,200	3,200	20.282	20.292	0
	The Drake Village Apartments	2/14/17	957,038	957,038	164,570 0	30,382	30,382 0	ő
221	Land - The Drake Village Apartments	2/14/17	400,000 12,920	400,000 12,920	5,706	1,292	1,292	ő
223 224	Replacement of Cast Iron Pipes under A-1/1 TDV Renovations	6/15/18	612,095	612,095	79,346	19,431	19,431	Ö
225	TDV Vinyl Flooring	5/03/18	4,115	4,115	1,715	411	411	0
228	TDH Appliances	6/13/18	20,839	20,839	17,018	3,821	3,821	0
229	Outdoor Furniture for Pavilion	6/22/18	4,672	4,672	2,670	667	667	0
230	Custom Playground	8/17/17	20,093	20,093	9,712	2,009	2,009 1,214	0
231	Outdoor Pavilion	6/18/18	12,137 44,426	12,137 44,426	4,855 32,579	1,214 8,886	8,886	
233	2019 Ford Truck Transit Wagon T350	10/31/18 1/01/19	6,102	6,102	4,271	1,221	1,221	Ŏ
234	Donated Laptops TDV Fence & Gates	7/11/18	4,861	4,861	1,944	487	487	
	TDV Roof Replacement	6/24/19	17,908	17,908	5,372	1,791	1,791	0
237		10/29/18	14,960	14,960	5,485	1,496	1,496	
	HVAC System	1/30/19	26,820	26,820	9,164	2,682	2,682	0
239		1/17/19	222,754	222,754	24,161	7,072	7,072 3,282	
244	TDCA Leasehold Improvements	12/05/19 1/07/20	16,414 19,625	16,414 19,625	8,481 1,635	3,282 655	655	
245	2000년 전문 17 HO NEW HOLD (1984년 17 HOLD HOLD HOLD HOLD HOLD HOLD HOLD HOLD	6/11/20	95,098	95,098	6,604	3,170	3,170	
246 248	Speed Queen Stacked Washer & Dryer	5/11/20	3,685	3,685	1,597	737	737	
249		5/11/20	3,685	3,685	1,597	737	737	
	Pavilion Clear Screens	12/28/20	15,584	15,584	2,338	1,558	1,558	
251	Chain Link Fence	6/18/21	6,342	6,342	634	634	634	
253	Classroom Heat Pump 5 Ton	8/31/20	6,925	6,925	1,270	692 1,825	692 1,825	
	Pipe Rehab - Building B	6/01/21 6/18/21	57,500 18,510	57,500 18,510	2,305 1,851	1,823	1,851	
	Turf Area Improvement Dell Small Business Equipment	6/28/21	5,986	5,986	1,197	1,197	1,197	
257	Website	12/28/20	6,000	6,000	3,000	2,000	2,000	0
260	Microsoft Teams Telephony	1/13/21	11,760	11,760	3,528	2,352	2,352	. 0
261	Drake Center Awnings	8/16/21	3,411	3,411	90	109	109	
262	Drake Apartment Awnings	8/16/21	2,884	2,884	76	92 5 267	92 5 267	
263	Drake Apartment Building B Cabinets	8/18/21	52,671	52,671	4,389	5,267 2,019	5,267 2,019	
	Drake Apartment Plumbing Renovations	8/27/21	60,586	60,586 62,947	1,683 1,574	2,019	2,019	
265	Drake Apartment Building A Renovations	9/22/21 10/14/21	62,947 57,500	57,500	1,369	1,825	1,825	
266	Drake Apartment Building A Pipe Rehab Drake Apartments Building A Cabinets	11/10/21	55,227	55,227	3,682	5,523	5,523	0
	Drake Apartment Renovations	2/23/22	177,948	177,948	1,977	5,932	5,932	0
269	Drake Apartments Windows	6/09/22	22,356	22,356	62	745	745	0
270	Family Service Center HVAC	3/31/22	10,785	10,785	90	359	359 941	
271	27" Speed Queen Multi-Cycle Stacked Laur	5/19/22 6/01/22	9,410 3,937	9,410 3,937	78 66	941 787	787	
272	Dell Latitude 5520 Laptop	0/01/22	2,731	3,231	00	, 37	, 0 ,	(1986)

5059 The Drake House, Inc.

20-0943038

FYE: 6/30/2023

### GA Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Difference Fed - GA
273	TDH Campus Computer Equipment Upgrac	4/08/22	37,667	37,667	1,883	7,534	7,534	0
274	Resource Center	3/31/23	389,100	389,100	0	3,088	3,088	0
275	Land - Resource Center	3/30/23	160,900	160,900	0	0	0	0
276	Germicidal UVC system	8/10/22	4,883	4,883	0	895	895	0
277	Smart Boards Interactive Displays	1/03/23	10,728	10,728	0	1,073	1,073	0
278	Fire Alarm for Drake Center	12/21/22	11,556	11,556	0	578	578	0
279	Drake Center Renovation	2/06/23	226,323	226,323	0	2,994	2,994	0
280	Office Furniture - Drake Center	2/01/23	5,407	5,407	0	322	322	0
281	Golf Cart - Evolution EV	10/20/22	10,343	10,343	0	1,379	1,379	0
282	Carpet & Installation	6/30/23	5,647	5,647		0		
	<b>Total Other Depreciation</b>		5,842,244	5,842,244	1,284,079	210,881	210,881	0
	Total ACRS and Other Deprec	iation	5,842,244	5,842,244	1,284,079	210,881	210,881	0
	Grand Totals Less: Dispositions Less: Start-up/Org Expense Net Grand Totals		5,842,244 0 0 5,842,244	5,842,244 0 0 5,842,244	1,284,079 0 0 1,284,079	210,881 0 0 210,881	210,881 0 0 210,881	0 0 0

5059 The Drake House, Inc.

20-0943038

FYE: 6/30/2023

Bonus Depreciation Report Form 990, Page 1

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
107	Lighting System	5/01/13	3,277		0	0	0	3,277
		Grand Total	3,277		0	0	0	3,277

5059 The Drake House, Inc.
20-0943038 Depreciation Adjustment Report

FYE: 6/30/2023

**All Business Activities** 

AMT
Adjustments/
Preferences

Description AMT Form Unit Asset There are no assets that meet the criteria of this report

5059 The Drake House, Inc. 20-0943038 Future Depreciation Report FYE: 6/30/24

FYE: 6/30/2023

Form 990, Page 1

5059 The Drake House, Inc.
20-0943038 Future Depreciation Report FYE: 6/30/24

FVE: 6/30/2023 Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
184	iPad	3/18/16	365	0	0
185	iPad	3/18/16	365	0	0
186	iPad	3/18/16	365	0	0
187	HVAC Unit - 2.5 Ton - A-5	9/25/15	2,300 4,760	230 476	0
189	Exterior Lighting for Buildings A & B	1/06/16 3/11/16	4,760 2,275	228	ő
191	HVAC System A-8	3/11/16	2,275	228	ŏ
192 193	HVAC System B-5 Exterior Lighting for The Drake Center	12/09/15	3,000	300	ő
193	Parking Lot Paving & Striping - Drake Center	3/07/16	17,858	1,785	0
195	Concrete Curbing - Drake Center	6/30/16	2,100	210	0
196	Tree Removal for Parking Lot Resurfacing	3/01/16	1,040	104	0
197	The Drake Center Addition	8/19/15	267,315	8,486	0
201	Tree Removal at Apartments	12/08/16	3,500	350	0
202	Tree Removal at Playground	6/08/17	3,400	340	0
203	16 Hot Water Heaters	8/17/16	10,946	1,095 230	0
204	HVAC - A6	11/30/16 11/30/16	2,300 2,300	230	ő
205	HVAC - B6	11/30/16	2,300	230	ő
206 207	HVAC - B7 HVAC - B8	11/30/16	2,300	230	0
207	HVAC - B1	1/11/17	2,500	250	0
209	HVAC - B4	1/11/17	2,500	250	0
210	HVAC - A1	1/12/17	2,500	250	0
211	HVAC - A2	1/12/17	2,500	250	0
212	HVAC - A3	3/06/17	2,500	250	0
213	HVAC - A4	3/06/17	2,500	250 250	0
214	HVAC - B2	3/06/17	2,500 2,500	250 250	0
215	HVAC - B3	3/06/17 11/17/16	3,420	0	ŏ
216 217	Sign for TDC Sandy Springs Flooring at TDC Sandy Springs	11/07/16	3,722	ŏ	ŏ
218	Outdoor Security Lights at TDC Sandy Springs	11/16/16	3,685	Ō	0
219	Materials & Labor at TDC Sandy Springs	2/09/17	3,200	0	0
220	The Drake Village Apartments	2/14/17	957,038	30,382	0
221	Land - The Drake Village Apartments	2/14/17	400,000	0	0
223	Replacement of Cast Iron Pipes under A-1/A-5	2/07/18	12,920	1,292	0
224	TDV Renovations	6/15/18	612,095	19,432 412	0
225	TDV Vinyl Flooring	5/03/18 6/13/18	4,115 20,839	0	0
228	TDH Appliances Outdoor Furniture for Pavilion	6/22/18	4,672	668	ŏ
229 230	Custom Playground	8/17/17	20,093	2,009	0
231	Outdoor Pavilion	6/18/18	12,137	1,213	0
233	2019 Ford Truck Transit Wagon T350	10/31/18	44,426	2,961	0
234	Donated Laptops	1/01/19	6,102	610	0
235	TDV Fence & Gates	7/11/18	4,861	486	0
236	TDV Roof Replacement	6/24/19	17,908	1,791	0
237	Pavilion	10/29/18 1/30/19	14,960 26,820	1,496 2,682	0
238	HVAC System	1/17/19	222,754	7,071	ő
239 244	TDV HomeAid Renovations TDCA Leasehold Improvements	12/05/19	16,414	3,283	ŏ
244	Pipe Rehabilitation	1/07/20	19,625	654	0
246	Elevated Walkways & Stairs Replacement	6/11/20	95,098	3,170	0
248	Speed Queen Stacked Washer & Dryer	5/11/20	3,685	737	0
249	Speed Queen Stacked Washer & Dryer	5/11/20	3,685	737	0
250	Pavilion Clear Screens	12/28/20	15,584	1,558	0
251	Chain Link Fence	6/18/21	6,342	635 693	0
253	Classroom Heat Pump 5 Ton	8/31/20	6,925 57,500	1,825	0
254	Pipe Rehab - Building B	6/01/21 6/18/21	18,510	1,851	ő
256	Turf Area Improvement Dell Small Business Equipment	6/28/21	5,986	1,197	0 0 0 0
257 258	Website	12/28/20	6,000	1,000	0
260	Microsoft Teams Telephony	1/13/21	11,760	2,352	0
261	Drake Center Awnings	8/16/21	3,411	108	0
262	Drake Apartment Awnings	8/16/21	2,884	91	0
263	Drake Apartment Building B Cabinets	8/18/21	52,671	5,267	0
264	Drake Apartment Plumbing Renovations	8/27/21	60,586	2,020	0
265	Drake Apartment Building A Renovations	9/22/21	62,947 57,500	2,098 1,826	0
266	Drake Apartment Building A Pipe Rehab	10/14/21 11/10/21	57,500 55,227	5,522	0
267	Drake Apartment Building A Cabinets	2/23/22	177,948	5,931	ŏ
268	Drake Apartment Renovations Drake Apartments Windows	6/09/22	22,356	746	0
269 270	Family Service Center HVAC	3/31/22	10,785	360	0
271	27" Speed Queen Multi-Cycle Stacked Laundry	5/19/22	9,410	942	0
1					

5059 The Drake House, Inc.
20-0943038 Future Depreciation Report FYE: 6/30/24

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
272	Dell Latitude 5520 Laptop	6/01/22	3,937	787	0
273	TDH Campus Computer Equipment Upgrades	4/08/22	37,667	7,533	0
274	Resource Center	3/31/23	389,100	12,352	0
275	Land - Resource Center	3/30/23	160,900	0	0
276	Germicidal UVC system	8/10/22	4,883	977	0
277	Smart Boards Interactive Displays	1/03/23	10,728	2,145	0
278	Fire Alarm for Drake Center	12/21/22	11,556	1,155	0
279	Drake Center Renovation	2/06/23	226,323	7,185	0
280	Office Furniture - Drake Center	2/01/23	5,407	772	Õ
	Golf Cart - Evolution EV	10/20/22	10,343	2,069	ň
281	- · · · · · · · · · · · · · · · · · · ·	6/30/23	5,647	565	ň
282	Carpet & Installation	0/30/23	3,047		
	Total Other Depreciation		5,842,244	209,026	0
	Total ACRS and Other Depreciation		5,842,244	209,026	0
	Grand Totals		5,842,244	209,026	0

Form **990** 

## Event Income and Deduction Worksheet Description ICE CREAM FUNDRAISER

Name THE DRAKE HOUSE, INC.

Taxpayer Identification Number 20-0943038

2022

Income & Expense Summary:		Expense Details - Indirect Expense:
Gross receipts or sales     1		Advertising and promotion
2. Advertising income 2.		Office
3. Circulation income 3.		Printing/publication/postage
4. Other income 4.		Info technology/Maintenance
5. Returns and allowances 5.		Royalties & License Fees
6. Contributions received 6.	40,927	Occupancy/Real Estate Taxes
7. Total revenue. Add lines 1 through 6 7.		Travel & Repairs
		Travel/entertainment (officials)
8. Cost of Goods Sold 8.		Conferences/meetings
9. Employment Expense 9.		
10. Fees for services 10.		Interest
11. Indirect Expense		Insurance
12. Depreciation Expense 12.	1,418	Total Indirect Expense
13. Exempt Activity Expense 13.		Formula Details Department European
14. Fundraising Expense 14.		Expense Details - Depreciation Expense:
15. Total expenses. Add lines 8 through 1415.		On investment property
16. Net Income/Loss. Line 7 minus Line 1516.	39,509	On non-investment property
		Amortization
		Depletion
Expense Details - Cost of Goods Sold:		Total Depreciation Expense
Beginning inventory		
Purchases		Expense Details - Exempt Activity Expense:
Labor		Repairs and Maintenance
Section 263A costs		Bad debts
Other costs		Taxes/licenses
Ending inventory		Charitable contributions
Total Cost of Goods Sold		Dividend recd deductions
***************************************		Readership costs
Expense Details - Employment Expense:		Other expenses 1,418
Compensation of officers		Total Exempt Activity Expense 1,418
		55.55 55.55
Other salaries and wages		Expense Details - Fundraising Expense:
Pension plan contributions		Cash prizes
Other employee benefits		
Payroll taxes		Non-cash prizes
Total Employment Expense		Rent and facility costs
		Food & beverages (Part II only)
Expense Details - Fees for Services:		Entertainment (Part II only)
Management		Other direct expenses
Legal		Total Fundraising Expense
Accounting		
Lobbying		
Professional fundraising		
Investment management		
Other		
Total Fees for Services		
Information is indicated for use on Form 990-T, Sched	ule A:	Allocation of Expense to Program Service Accomplishments:
Schedule A, UBIT Activity Code Seq #		First
Part V, Debt Financing	· <del>-</del>	Second
<del></del>		Third
Part VI, Controlled Org Income		
Part VII, Investments for C(7)(9)(17)		All other
Part VIII, Exploited Activities		
Part IX, Advertising Income		

Form **990** 

THE DRAKE HOUSE,

#### **Event Income and Deduction Worksheet**

Description MISC. FUNDRAISERS

INC.

Taxpayer Identification Number

20-0943038

2022

Income & Expense Summary:	Expense Details - Indirect Expense:
1. Gross receipts or sales 1.	Advertising and promotion
2. Advertising income 2.	Office
3. Circulation income 3.	Printing/publication/postage
4. Other income 4.	Info technology/Maintenance
5. Returns and allowances 5.	Royalties & License Fees
6. Contributions received 6. 392,792	Occupancy/Real Estate Taxes
7. Total revenue. Add lines 1 through 6 7. 392,792	Travel & Repairs
8. Cost of Goods Sold 8.	Travel/entertainment (officials)
9. Employment Expense 9.	Conferences/meetings
10. Fees for services 10	Interest
11. Indirect Expense 11.	Insurance
12. Depreciation Expense 12.	Total Indirect Expense
13. Exempt Activity Expense 13. 1,174	Charles and Charles and
14. Fundraising Expense 14.	Expense Details - Depreciation Expense:
15. Total expenses. Add lines 8 through 1415. 1,174	On investment property
16. Net Income/Loss. Line 7 minus Line 1516. 391, 618	On non-investment property
To. Net income/Loss. Line / minus Line 1010.	Amortization
	Depletion
Fundamental Control Condo Solds	Total Depreciation Expense
Expense Details - Cost of Goods Sold:	Total Depreciation Expense
Beginning inventory	Expense Details - Exempt Activity Expense:
Purchases	,
Labor	Repairs and Maintenance
Section 263A costs	Bad debts
Other costs	Taxes/licenses
Ending inventory	Charitable contributions
Total Cost of Goods Sold	Dividend recd deductions
	Readership costs  Other expenses  1,174
Expense Details - Employment Expense:	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Compensation of officers	Total Exempt Activity Expense 1,174
Other salaries and wages	Formula Datable Foundations European
Pension plan contributions	Expense Details - Fundraising Expense:
Other employee benefits	Cash prizes
Payroll taxes	Non-cash prizes
Total Employment Expense	Rent and facility costs
	Food & beverages (Part II only)
Expense Details - Fees for Services:	Entertainment (Part II only)
Management	Other direct expenses
Legal	Total Fundraising Expense
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	
Information is indicated for use on Form 990-T, Schedule A:	Allocation of Expense to Program Service Accomplishments:
Schedule A, UBIT Activity Code Seq #	First
Part V, Debt Financing	Second
Part VI, Controlled Org Income	Third
Part VII, Investments for C(7)(9)(17)	All other
Part VIII, Exploited Activities	
Part IX, Advertising Income	

Form **990** 

#### **Event Income and Deduction Worksheet**

Description FASHION SHOW

Des

THE DRAKE HOUSE,

INC.

Taxpayer Identification Number

2022

20-0943038

Expense Details - Indirect Expense:
Office
Printing/publication/postage
Info technology/Maintenance
Royalties & License Fees
Occupancy/Real Estate Taxes
Travel & Repairs
Travel/entertainment (officials)
Conferences/meetings
Interest
Insurance
Total Indirect Expense
Expense Details - Depreciation Expense:
On non-investment property
120000000000000000000000000000000000000
Amortization
Depletion
Total Depreciation Expense
D. I. M. E A. A. M. E
Expense Details - Exempt Activity Expense:
Repairs and Maintenance
Bad debts
Taxes/licenses
Charitable contributions
Dividend recd deductions
Readership costs
Other expenses 22 , 673
Total Exempt Activity Expense 22,673
Expense Details - Fundraising Expense:
Cash prizes
Non-cash prizes
Rent and facility costs
Food & beverages (Part II only)
Entertainment (Part II only)
Other direct expenses
Total Fundraising Expense
Allocation of Expense to Program Service Accomplishments:
First
Second
Third
All other

Form **990** 

# Event Income and Deduction Worksheet Description TAPPIN' OUT HOMELESSNESS

THE DRAKE HOUSE, INC. Taxpayer Identification Number 20-0943038

2022

Income & Expense Summary:	Expense Details - Indirect Expense:
1. Gross receipts or sales 1.	Advertising and promotion
2. Advertising income 2.	
3. Circulation income 3.	
4. Other income 4.	
5. Returns and allowances 5.	Royalties & License Fees
6. Contributions received 6. 7	, 500 Occupancy/Real Estate Taxes
B. Contained and a contained a	, 500 Travel & Repairs
1. 10ta. 10to.	
8. Cost of Goods Sold 8.	
9. Employment Expense 9.	
10. Fees for services10.	
11. Indirect Expense 11.	
12. Depreciation Expense 12.	
13. Exempt Activity Expense 13.	
14. Fundraising Expense 14.	Expense Details - Depreciation Expense:
15. Total expenses. Add lines 8 through 1415.	On investment property
16. Net Income/Loss. Line 7 minus Line 1516. 7	, 500 On non-investment property
	Amortization
	Depletion
Expense Details - Cost of Goods Sold:	Total Depreciation Expense
Beginning inventory	
Purchases	E D. t. ile . Evennt Antivity Evennes:
Labor	Panaira and Maintenance
Section 263A costs	Ded debte
11 6 11 11 1 1 A 10 10 10 10 10 10 10 10 10 10 10 10 10	T
Other costs	Ct. 19 11 and 19 allows
Ending inventory	
Total Cost of Goods Sold	Readership costs
Expense Details - Employment Expense:	Other expenses
Compensation of officers	
Other salaries and wages	
Pension plan contributions	Expense Details - Fundraising Expense:
Other employee benefits	
Payroll taxes	Non-cash prizes
Total Employment Expense	Rent and facility costs
	Food & beverages (Part II only)
Expense Details - Fees for Services:	Entertainment (Part II only)
Management	Ollins dies at ausans
Legal	Total Foundations Funence
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	
	Allocation of Expense to Program Service Accomplishments:
Information is indicated for use on Form 990-T, Schedule A:	
Schedule A, UBIT Activity Code Seq #	First
Part V, Debt Financing	Second
Part VI, Controlled Org Income	Third
Part VII, Investments for C(7)(9)(17)	All other
Part VIII, Exploited Activities	
Part IX Advertising Income	

Form **990** 

THE DRAKE HOUSE,

#### **Event Income and Deduction Worksheet**

Description GIVING TUESDAY

INC.

2022

Taxpayer Identification Number 20-0943038

Income & Expense Summary:	Expense Details - Indirect Expense:
1. Gross receipts or sales 1.	Advertising and promotion
2. Advertising income 2.	Office
3. Circulation income 3.	Printing/publication/postage
4. Other income 4.	Info technology/Maintenance
5. Returns and allowances 5.	Royalties & License Fees
6. Contributions received 6. 61,180	Occupancy/Real Estate Taxes
7. Total revenue. Add lines 1 through 6 7. 61,180	Travel & Repairs
1. Total Total Title III.	Travel/entertainment (officials)
8. Cost of Goods Sold 8.	Conferences/meetings
9. Employment Expense 9.	
10. Fees for services 10.	Interest
11. Indirect Expense 11.	Insurance
12. Depreciation Expense12	Total Indirect Expense
13. Exempt Activity Expense 13.	
14. Fundraising Expense 14.	Expense Details - Depreciation Expense:
15. Total expenses. Add lines 8 through 1415.	On investment property
16. Net Income/Loss. Line 7 minus Line 1516. 61,180	On non-investment property
	Amortization
	Depletion
Expense Details - Cost of Goods Sold:	Total Depreciation Expense
Beginning inventory	
Purchases	Expense Details - Exempt Activity Expense:
Labor	Repairs and Maintenance
Section 263A costs	Bad debts
Other costs	Taxes/licenses
Ending inventory	Charitable contributions
Total Cost of Goods Sold	Dividend recd deductions
Total cost of coods cold	Readership costs
Expense Details - Employment Expense:	Other expenses
Compensation of officers	Total Exempt Activity Expense
	80.00.008
Other salaries and wages	Expense Details - Fundraising Expense:
Pension plan contributions	•
Other employee benefits	Cash prizes
Payroli taxes	Non-cash prizes
Total Employment Expense	Rent and facility costs
	Food & beverages (Part II only)
Expense Details - Fees for Services:	Entertainment (Part II only)
Management	Other direct expenses
Legal	Total Fundraising Expense
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	
634 C C C C C C C C C C C C C C C C C C C	
Information is indicated for use on Form 990-T, Schedule A:	Allocation of Expense to Program Service Accomplishments:
Schedule A, UBIT Activity Code Seq #	First
Part V, Debt Financing	Second
Part VI, Controlled Org Income	Third
Part VII, Investments for C(7)(9)(17)	All other
Part VIII, Exploited Activities	TOWN STEED TO BE A BOARD AND A STATE AND A STATE OF A S
Part IX Advertising Income	

Form **990/990PF** 

#### Rent Income and Deduction Worksheet

Description APARTMENT UNIT RENTALS

\_\_\_

2022

Name

THE DRAKE HOUSE, INC.

Taxpayer Identification Number 20-0943038

Use this summary worksheet to verify data entered for a specific activity for your rental information

1. Gross rents	11.
Expenses (see details on worksheets below):	
2. Fees for services	2
Depreciation Expense	
4 Direct Expense	4
= = 4.1 · · · · · · · · · · · · · · · · · · ·	5.
6. Net Income/Loss. Line 7 minus Line 13	6. 115,948
Expense Details - Fees for Services:	
Accounting	
Legal	
Commissions	
Management	
Other Professional Fees	
Total Fees for Services	***************************************
Expense Details - Depreciation Expense:	
On non-investment property	
On investment property	
Amortization	
Depletion	
Total Depreciation Expense	
	**************************************
Expense Details - Direct Expense:	
•	
Taxes/licenses	
Occupancy Expenses	
Repairs & Maintenance	
Travel/conferences/meetings	
Printing & Publication	
Advertising	
Insurance	
Utilities	
Supplies	
Total Direct Expense	
(Analysis)	
Information is indicated for use on Form 990-T, Schedule A:	
Schedule A, UBIT Activity Code Seq #	
	Expense Allocation to Program Service Accomplishments for 990/990
Part IV, Rent Income	First
Part V, Debt Financing	Second
Part VI, Controlled Org Income	Third
Part VII, Investments for C(7)(9)(17)	All other
<b>3</b> 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	orderestation learness au tenente differente (Company)

SCHEDULE G (Form 990 or 990-EZ)

9 Other expenses

#### **Fundraising Other Events**

For calendar year 2022, or tax year beginning

07/01/22 , and ending 0

06/30/23

Name

Employer Identification Number

т	HE DRAKE HOU	JSE, INC.			20-0	943038
		(a) Other event  GIVING TUESDAY  (event type)	(b) Other eveni  ICE CREAM FUNDR (event type)	(c) Other event  TAPPIN' OUT  (event type)	HOM	(d) Total other events (add col. (a) through col. (c))
Revenue	<ol> <li>Gross receipts</li> <li>Less: Charitable contributions</li> <li>Gross income</li> </ol>	61,180	40,927	7	,500	109,607
		61,180	40,927	7	,500	109,607
-	(line 1 minus line 2)					
	4 Cash prizes					
	5 Noncash prizes					
Direct Expenses	6 Rent/facility costs					
	7 Food/beverages	a)				
	8 Entertainment					

5059 The Drake House, Inc. 20-0943038 FYE: 6/30/2023

Federal Statements

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Part IX.	
Form 990.	
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Fund Raising \$ 9,704		Fund	6		22,673		583	452		236	1,418	1,174	72	4		\$ 29,983				
Management & General \$ 7,058	Form 990, Part IX, Line 24e - All Other Expenses					Management & General	11 032	2,452			424	329		172			52	м		\$ 14,464
Program Service \$ 71,461 \$ 71,461			Program Service	270 07	74,873		12,480	5,723	3,887	3,160	1,741			529	243	09	\$ 112,521			
Total Expenses \$ \$ 88,223 \$ \$ 88,223			Total		000	22,673	12,480	6,730	4,668	3,160	2,149	1,418	1,174	653	250	09	\$ 156,968			
Description PROFESSIONAL FEES TOTAL		Description		WOKKSHOPU MHOOFITANDOIIO	SPECIAL EVENT EXPENSES		EOUIPMENT RENTALS	PRINTING	BAD DEBT	MEMBERSHIP & DUES	SPECIAL EVENT EXPENSES	SPECIAL EVENT EXPENSES	& DELI	$\rightarrow$	FURNISHINGS	TOTAL				