GOETZ, BAILEY & YALE, PS

159 SOUTH WORTHEN ST STE 100 WENATCHEE, WA 98801 509-662-9691 Client 55175CG May 15, 2023

HAND IN HAND IMMIGRATION SERVICES PO BOX 4255 WENATCHEE, WA 98807-4255 509-888-4833

FEDERAL FORMS

Form 990

2022 Return of Organization Exempt from Income Tax

Schedule A

Organization Exempt Under Section 501(c)(3)

Schedule O

Supplemental Information Application for Extension

Form 8868 Form 8879-TE

IRS e-file Signature Authorization

FEE SUMMARY

Preparation Fee

GOETZ, BAILEY & YALE, PS 159 SOUTH WORTHEN ST STE 100 WENATCHEE, WA 98801 509-662-9691

May 15, 2023

HAND IN HAND IMMIGRATION SERVICES PO BOX 4255 WENATCHEE, WA 98807-4255

Dear LADIES AND GENTLEMEN:

Enclosed for your review:

Form 990

2022 Return of Organization Exempt from Income Tax

Each tax return or form listed above should be filed in accordance with the enclosed filing instructions.

Please be sure to call us if you have any questions.

Sincerely,

Chris W. Goetz, CPA

Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Α	For th	ne 2022 c	022 calendar year, or tax year beginning						, 2022, and ending				, 20				
В	Check i	f applicable	e:	С						•	tification number						
	Пас	dress chan	ress change HAND IN HAND IMMIGRATION SER						RVICES					83-4208668			
	-	me change	PO BOX 4255 COPY									E Tele	E Telephone number				
		-		WENATCHEE,		807-425		FOR YOUR	FILES			509-888-4833					
	\vdash	itial return	" BAILEY & YALE P.S									303 000 1033					
	Fin	al return/term	ninated									C 0	s receipts	\$ 440	2,919.		
	∐ Ar	nended retu									Torra	this a group re			122		
	L Ar	plication pe	ending	F Name and addre	ss of principa	al officer:					1 ' '			H.,	· H		
				SAME AS C	ABOVE					,	In(D) A	re all subordina "No," attach a	ites include list. See in	ed? _ Yenstructions.	s No		
ı	Tax-	exempt sta	itus:	X 501(c)(3)	501(c) () (nsert no.)	4947(a)(1) or	527							
J	We	bsite:	WWV	.HANDINHA	NDIS.O	RG					H(c) G	roup exemption	number				
ĸ	Form	of organiza	ation:	X Corporation	Trust	Association	Other		L Year	of forma	tion: 1	.998	1 State of	legal domicile: W	Ά		
	ırt I					d			- · · · · · · · · · · · · · · · · · · ·								
	1	Briefly d	Summary iefly describe the organization's mission or most significant activities: TO PROVIDE ASSISTANCE FOR IMMIGRAN										NTS				
			ATTAIN U.S. CITIZENSHIP.														
Activities & Governance		7777				==											
Пä																	
ē	2	Check ti	this box if the organization discontinued its operations or disposed of more than 25% of its net assets.														
g G	3	Number	per of voting members of the governing body (Part VI, line 1a)										. 3	1	6		
વ્ય	4	Number	of ind	lependent votin	g member	s of the gov	erning boo	ty (Part VI,	line 1b))			. 4		6		
es	5	Total nu	ımher	of individuals e	mploved i	n calendar y	ear 2022	(Part V, line	e 2a)				. 5		5		
₹	6	Total nu	ımber	of volunteers (e	stimate if	necessary)							. 6		0		
₹	7a	Total un	relate	d business reve	nue from	Part VIII, co	lumn (C),	line 12					. 7a		0.		
_	b	Net unre	elated	business taxab	le income	from Form	990-T, Pa	rt I, line 11					. 7b		0.		
												Prior Ye	ar	Current			
	8	Contribu	utions	and grants (Pa	rt VIII, line	a 1h)						184	,211.		<u>6,856.</u>		
ne	9	Progran	ontributions and grants (Part VIII, line 1h)rogram service revenue (Part VIII, line 2g)									36,051.		3	5,938.		
Revenue	10	Investm	stment income (Part VIII, column (A), lines 3, 4, and 7d)								17.			125.			
Be.	11																
	12	Total re	evenue	- add lines 8	through 11	l (must equa	al Part VIII	., column (A	A), line	12)	220,279.		44	2,919.			
	13	Grants	and si	milar amounts	paid (Part	IX, column	(A), lines	1-3)									
	14	Renefits	rants and similar amounts paid (Part IX, column (A), lines 1-3)enefits paid to or for members (Part IX, column (A), line 4)														
	15	Salaria	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)									178,757.		22	8,138.		
S																	
Expenses	Iba		ofessional fundraising fees (Part IX, column (A), line 11e)								177		7735				
Ž.	- b	Total fu	otal fundraising expenses (Part IX, column (D), line 25)								4 45	. 10.004			0.005		
Ú	17	Other e	expens	es (Part IX, col),					48,994.		2,885.					
	18					mn (A), line 25)					227,751.		1,023.				
	19	Revenu	Revenue less expenses. Subtract line 18 from line 12								·· _		<u>,472.</u>		1,896.		
Assets or	8									Be	Beginning of Current Year		r End of				
	E 20	Total a	ssets	(Part X, line 16)								127,090.		. 27	5,720.		
80	21			s (Part X, line 26)						4,011.			756.				
Net	22	Net ass	sets or	fund balances.	Subtract	line 21 from	line 20					123	,079.	. 27	4,964.		
_	art II																
	art II	Joigi	Signature Block of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and ation of preparer (other than officer) is based on all information of which preparer has any knowledge.														
cor	aer pen nplete.	aities of per Declaration	of prepa	arer (other than office	er) is based o	n all information	of which pre	parer has any l	knowledge	•							
Sign Here Paid Preparer Use Only		Sign	Signature of officer										Date				
		СП	mp.u.										EASURER				
			STEVE ROBINSON Type or print name and title														
				preparer's name		Preparer's s	ionature	۸	Ī	ate		Check	if	PTIN			
		1			CD.					15.	27	self-em	ш	P0000970)4		
				W. GOETZ,		777 C 777 T	- DC	·)		· • ·		3011 011		12000071			
			Firm's name GOETZ, BAILEY & YALE, PS									Firm's					
		nly Firr	Firm's address 159 SOUTH WORTHEN ST STE 100										Firm's EIN 91-1874918				
			WENATCHEE, WA 98801									Phone no. 509-662-9691					
M	av the	IRS disc	discuss this return with the preparer shown above? See instructions											X Yes	No		

2022 FEDERAL EXEMPT ORGANI	ZATION TAX :	SUMMARY	PAGE1
HAND IN HAND IMMIGR	RATION SERVICES	Francisco (Constitution of Constitution of Con	83-4208668
REVENUE	2022	2021	DIFF
CONTRIBUTIONS AND GRANTS. PROGRAM SERVICE REVENUE INVESTMENT INCOME	406,856 35,938 125	184,211 36,051 17	222,645 -113 108
TOTAL REVENUE	442,919	220,279	222,640
EXPENSES SALARIES, OTHER COMPEN., EMP. BENEFITS OTHER EXPENSES	228,138 62,885	178,757 48,994	49,381 13,891
TOTAL EXPENSES	291,023	227,751	63,272
NET ASSETS OR FUND BALANCES REVENUE LESS EXPENSES. TOTAL ASSETS AT END OF YEAR. TOTAL LIABILITIES AT END OF YEAR. NET ASSETS/FUND BALANCES AT END OF YEAR.	151,896 275,720 756 274,964	-7,472 0 4,011 123,079	159,368 275,720 -3,255 151,885