Form 8879-TE

IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2024, or fiscal year beginning

07-01 , 2024, and ending 06-30 , 2025

⁵│ 2024

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

Name of filer EIN or SSN Bag It 74-3097354 Name and title of officer or person subject to tax Mindy Griffith, President/Executive Dir. Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here x **b** Total revenue, if any (Form 990, Part VIII, column (A), line 12) 741,169 Form 990-EZ check here . . . Form 1120-POL check here . . 3a Form 990-PF check here . . . **b** Tax based on investment income (Form 990-PF, Part V, line 5) Form 8868 check here b Balance due (Form 8868, line 3c) 5a Form 990-T check here 6a Form 4720 check here 7a **b** FMV of assets at end of tax year (Form 5227, Item D) Form 5227 check here 8a Form 5330 check here 9a 9b Form 8038-CP check here . . . **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10a Declaration and Signature Authorization of Officer or Person Subject to Tax I am an officer of the above entity or Under penalties of perjury, I declare that I am a person subject to tax with respect to (name of entity) and that I have examined a copy of the , (EIN) 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account, To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only x I authorize Jennifer J Phillips CPA PLL to enter my PIN 96523 as my signature Enter five numbers, but do not enter all zeros on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Mindy Griffith (Nov 14, 2025 09:02:41 MST) Signature of officer or person subject to tax 11-13-2025 Part III **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 869365 85641 Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. 11-13-2025 ERO's signature Date

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

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.

Open to Public Inspection

A	For the	2024 calend	lar year, or tax y	ear beginnin	ig		07-01	, 2024, a	nd end	ing	0.6	6-30 , 20)25		
		applicable:	C Name of organiza		-							oyer identifica		nber	
\Box	Address		Doing business a									74-309			
$\overline{}$	Name cha	-			mail is not delivered t	o etroot address)			Room/su	uito	E Telen	hone number	7554		
$\overline{}$	nitial retu	-		•	BLVD SUITE	•			ROOMIIISU	iile	L Telep		75 04	502	
=		rn/terminated			untry, and ZIP or forei						(520) 575-9602 G Gross receipts				
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ш,	пррисаци	n pending	F Name and addre	ess or principal om	cer:							for subordinates?	$\overline{}$	$\overline{}$	
			 	-04/) /	\ \(\tau_{} \)					H(b) Are all s			∐ Yes	. NO	
				501(c) () (insert no.)	4947(a)(1) or	<u> </u>			1		st. See instructi	ons		
	Nebsite:		V.BAGITCANCI							H(c) Group e					
				Trust	ation Other		L Ye	ar of formation	on: 200)4 M S	State of leg	gal domicile:	AZ		
Га	rt I	Summar	•	U111											
	1		ibe the organizat		or most significa	ant activities:	Bag It	educa ⁻	tes,	supports	s and	empower	s the	<u>ose</u>	
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Activities & Governance	2		ox if the orga		•	•					ا م ا				
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	В	Net unrelated	d business taxab	ne income tro	m Form 990-1, F	Part I, line 11 •	<u></u>	• • • •			7b	_		0	
	_	Cambrilla di ama	a and monte (Da	m4.\/III B.a.a. 4 la\						Prior Year	200	Cur	rent Year		
ø	8		s and grants (Pai								,090			1,942	
Š	9	•	vice revenue (Pa		•						,653			2,504	
Revenue	10		ncome (Part VIII,	. , ,		•					,402			3,648	
œ	11		ue (Part VIII, colu			•					,103			3,075	
	12		e - add lines 8 th							584	,248			1,169	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)											<u>0</u>		
	14	Benefits paid to or for members (Part IX, column (A), line 4)									146.0		0		
es	15		aries, other compensation, employee benefits (Part IX, column (A), lines 5-10)							199	,017		14	6,835	
Expenses			•	•										0	
φx			sing expenses (F		, , ,	-\		37,718		100	4 4 4				
Ш	17	•	ses (Part IX, colu			•					,144			2,803	
	18		ses. Add lines 13								,161			9,638	
	19 ,	Revenue les	s expenses. Sub	oliaci iirie To i	rom ine 12 .				+		,913)			1,531	
Net Assets or	20	Total assets	(Part X, line 16)						Begi	inning of Curre		End	of Year		
Sset	21		es (Part X, line 16)	2)							,539			3,987	
et	22		or fund balances.	,	21 from line 20						,260			8,177	
	rt II		re Block	Oubtract line	21 110111111111111111111111111111111111					154	,279			5,810	
			clare that I have exam	ined this return, in	ncluding accompanyi	ng schedules and sta	tements, and	to the best o	f my know	ledge and belie	ef, it is				
			claration of preparer (,	Ü					
		Mind	y Griffith	Mindu Griffith	(Nov 14, 2025 09:02:41 M	CT)						11-13	1-202	5	
Sig	n	Signature of office	_	Milidy Griffith	(NOV 14, 2025 09.02.41 M	31)					Da		-202	<u> </u>	
Her	e	Mind	y Griffith,	Procido	nt/Evoquti	vo Dir									
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		Preparer's na		Pr	eparer's signature		Da	ite		Check	X if	PTIN			
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May	the ID	S discuss this	return with the p	ucson AZ		etructione						247-708' ☑	/ Yes	No	
iviay	THE IIV	J diacuaa tilla	return with the p	reparer snow	ii above: GEE III	511 UU1101 15 •						· · · •	169	<u> </u>	

Form	990 (2024) Bag It 74-3097354 Pag	ge 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	П
1	Briefly describe the organization's mission:	
	Bag It educates, supports and empowers those impacted by cancer.	
	bag it educates, supports and empowers those impacted by cancer.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services? Yes X No	
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$363,532 including grants of \$) (Revenue \$86,612)	
	Since 2003, Bag It has provided education and resources to help cancer patients and their	
	families cope with diagnosis and treatment. The Bag It Bag is available in English, Spanish	
	Bicultural, and 10 cancer-specific editions. To date, over 102,200 Bags have been distributed	
	through medical facilities and organizations in all 50 states, Washington D.C., and Puerto Ricc	
	as well as directly to individuals. Surveys show Bag It helps patients feel more organized,	
	communicate better with providers, and manage stress. Bag It partners with The Beacon Group to	
	assemble and ship Bags, providing jobs for people with disabilities, and continues as the prima	iry
	beneficiary of a local bike race for the 13th year.	
4b	(Code:) (Expenses \$189,780 including grants of \$) (Revenue \$\$25,892)	
	Bag It's 5-day leadership conference, Escape to THRIVE, held its 13th event in January 2025,	
	hosting 35 advocates from 20 states, Canada, Puerto Rico, and Colombia. Participants represente	
	diverse backgrounds and 15 cancer types, with 89% survivors and 15% LGBTQ advocates. Sessions	
	addressed advancing advocacy, intersectionality, DEI+B in cancer care, burnout recovery, and	
	end-of-life legacy. 97% rated the conference highly valuable, and over 200 organizations have	—
	participated since the program's launch in 2011.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
		—
		—
4d	Other program services (Describe on Schedule O.)	
TU	(Expenses \$ including grants of \$) (Revenue \$)	
40		—
4e	Total program service expenses 553,312	

Page 3

Bag It **Checklist of Required Schedules** Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
•	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			Х
7	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	<u> </u>		
•	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а				
	complete Schedule D, Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С		l		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	444		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		Х
'	the organization's separate of consolidated infancial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		v
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			Х
124	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If</i>			Λ
-	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
_	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	l .		
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	,-		
•-	If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b 24	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	24		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Checklist of Required Schedules (continued) Part IV Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Х 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 Х 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25a transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Х Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete Schedule L. Part I 25b Х 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 Х 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these 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). a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes." complete Schedule L. Part IV 28a X 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c X Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 conservation contributions? If "Yes," complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Х 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Х 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 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV. and Part V. line 1 34 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Х If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 related organization? If "Yes," complete Schedule R, Part V, line 2 36 Х Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Х Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 38 x Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No **1a** Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 7 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 0 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

Form 990 (2024) 74-3097354 Page 5 Bag It Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b х 3a х 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O b 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X **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 Accounts (FBAR). 5a 5a Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Х С 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b Х 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a х If "Yes," did the organization notify the donor of the value of the goods or services provided? Х Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was С 7с If "Yes," indicate the number of Forms 8282 filed during the year d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e е 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b b 10 Section 501(c)(7) organizations. Enter: 10a а b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: а b Gross income from other sources. (Do not net amounts due or paid to other sources 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13c С х 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 Х If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities 17 that would result in the imposition of an excise tax under section 4951, 4952, or 4953? 17

If "Yes," complete Form 6069.

Part VI Governance, Mar

Se	ction 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.			
b	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	<i>,</i> , , , , , , , , , , , , , , , , , ,	00	.,	
a b	The governing body?	8a 8b	x x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	00		
•	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? • •	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-		
a	The organization's CEO, Executive Director, or top management official	15a	X	.,
b	Other officers or key employees of the organization	15b		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
·ou	with a taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)	_	_	
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	☑ Own website ☑ Another's website ☑ Upon request ☐ Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	Melinda Criffith (520) 575-9602 5049 F Broadway Blyd Ste 155 Tucson AZ 85711			

Form 990 (2024) Bag It 74-3097354 Page 7

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

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

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

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

Check this box if neither the organization nor any relat	ed organizati	on con	nper	nsate	ed ar	ny curr	ent	officer, director, or t	trustee.	
			•		(C)					
(A)	(B)				sition			(D)	(E)	(F)
Name and title	Average	,				nan one s both ar		Reportable	Reportable	Estimated amount
	hours					/trustee)		compensation	compensation	of other
	per week (list any							from the organization (W-2/	from related organizations (W-2/	compensation from the
	hours for	Individual trustee or director	Inst	Office	Key	Hig/ em/	Former	1099-MISC/	1099-MISC/	organization and
	related	vidua lirect	Institutional	cer	'em	hest oloye	mer	1099-NEC)	1099-NEC)	related organizations
	organizations	al tru or	nal t		Key employee	com				
	below dotted line)	stee	trustee		ě	pens				
	dotted line)		ě			Highest compensated employee				
(4)	45.00									
(1)Mindy Griffith	45.00							60 164	0	
President/Executive Director	0.00	Х		Х				69,164	0	0
(2)Richard White	2 .00	.,								
Director	1 00	Х						0	0	0
(3)LaNita Price	<u>1 .00</u>	х						o	o	0
Director	1.00	Х						U	U	0
(4) Deborah Hoffman	1 .00	х						o	o	0
(5) Susannah Cooper	1.00							0	0	<u> </u>
Director		x						o	0	0
(6)Ben Katsel	1.00								•	
Director	=	x						0	o	0
_(7)Erin_Pixley	1.00								Ŭ	
Director	=	х						0	o	0
(8)I'sis Berry	1.00									
Director		х						0	o	0
(9)Raquel Cooley	1.00									,
Director		x						0	0	0
(10)Miguel Gomez	1.00									
Treasurer		х		х				0	0	0
(11)Ginny Kokorudz	3.00									
Board Chair		х		х				0	0	0
<u>(12)</u>										
(13)										
<u>(14)</u>										

Part VII Section A. Officers, Directors, I	rustees, i	\ey c	:mk	OIO	yee	s, an	a r	ignest Comp	ensated	Empic	yees	(contin	ued)
					(C) sition								
(A) Name and title	(B) Average	,		eck m	nore th	nan one		(D) Reportable	(E) Reportat	ماد	Fetime	(F) ated amou	ınt
really and the	hours	box, unless person is both ar officer and a director/trustee)						compensation from the	compensa	tion		of other	
	per week (list any							organization (W-2/	from related organizations (W-2/		fr	pensatior om the	
	hours for	Individual trustee or director	nstitu	Officer	Key employee	Highe: emplo	Former	1099-MISC/ 1099-NEC)	1099-MIS 1099-NE		-	ization an organizat	
	related organizations	lual tri	tional		nploy	st con yee	٦						
	below dotted line)	ıstee	nstitutional trustee		ee	Highest compensated employee							
	,		Φ			ated							
<u>(15)</u>													
<u>(16)</u>													
<u>(17)</u>													
<u>(18)</u>													
<u>(19)</u>													
(20)													
(21)													
(22)													
(23)													
(24)													
<u>(25)</u>													
1b Subtotal					• •		•	69,164					
c Total from continuation sheets to Part VII, Sect d Total (add lines 1b and 1c)								69,164		0			0
Total number of individuals (including but n	ot limited to								nan \$100,	000 of			
reportable compensation from the organiza	ition										ı	Vaa	0
3 Did the organization list any former officer, director	or, trustee, ke	y emp	love	e, or	high	nest co	mpe	ensated				Yes	No
employee on line 1a? If "Yes," complete Schedule	J for such in	dividu	al								3		x
4 For any individual listed on line 1a, is the sum of norganization and related organizations greater that													
individual											4		x
5 Did any person listed on line 1a receive or accrue								ation or individual					
for services rendered to the organization? <i>If "Yes,</i> Section B. Independent Contractors	" complete S	chedul	e J f	or s	uch p	person)				5		X
Complete this table for your five highest co	mpensated	indep	enc	dent	t coı	ntract	ors	that received mo	re than \$	100,000) of		
compensation from the organization. Repo	rt compens	ation	for t	he (cale	ndar	yea	r ending with or	within the	organiz	zation's	tax ye	ar.
(A) Name and business addres	ss							(B) Description of servic	es		(C) Compensa	ation	
								·			- '		
2 Total number of independent contractors (in received more than \$100,000 of compensa	_					ose li	ste	d above) who					

74-3097354

Form 990 (2024)
Part VIII Bag It
Statement of Revenue

		Check if Schedule O contains a response	ons	e or note to any l	ine in this Part V	/III		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Giffs, Grants and Other Similar Amounts	1a b c d e f	Membership dues			601,942			
<u>8</u>	I	Bag sales	_		41,629			41,629
er v		Escape registrations	_	900099	25,892			25,892
en en	l .	Community events	_	900099	44,983			44,983
Program Service Revenue	d		_					
, _	t e	All other program convince revenue	_					
Ф.		All other program service revenue			110 504			
	3	Investment income (including dividends, interesther similar amounts)	est, a	and	3,648			3,648
	4	Income from investment of tax-exempt bond p						
	5	Royalties	• •	(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7a	Gross amount from sales of assets other than inventory 7a		(ii) Other				
evenue		Less: cost or other basis and sales expenses 7b Gain or (loss) 7c						
ě		. ,						
Other Ro	8a	Net gain or (loss)	8a	20,972				
		Less: direct expenses	8b	6,178				
		Net income or (loss) from fundraising events	·		14,794			14,794
		Gross income from gaming activities. See Part IV, line 19 Less: direct expenses	9a 9b	-,				
					4.750			4.750
		, , , ,	Ė		4,750			4,750
			10a 10b					
		· · · · · · · · · · · · · · · · · · ·						
		, , , , , ,		Business Code				
S	11a			22.2				
nor Tue	b							
ella ven	c							
Miscellanous Revenue		All other revenue		900099	3,531			3,531
Σ		Total. Add lines 11a-11d			3,531			3,331
		Total revenue. See instructions			741 169	0	0	139 227

Page 9

Form 990 (2024) Bag It 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									
Do r	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)					
8b, 9	9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments. See Part IV, line 21									
2	Grants and other assistance to domestic									
	individuals. See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and									
	foreign individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	68,219	33,601	23,988	10,630					
6	Compensation not included above to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	64,973	64,973							
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)	3,272	2,736	358	178					
9	Other employee benefits									
10	Payroll taxes	10,371	8,674	1,134	563					
11	Fees for services (nonemployees):									
а	Management									
b	Legal									
С	Accounting	14,030		14,030						
d	Lobbying									
е	Professional fundraising services. See Part IV, line 17 • •									
f	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25, column									
	(A), amount, list line 11g expenses on Schedule O.) • •	39,136	30,793	2,843	5,500					
12	Advertising and promotion	1,019	1,019							
13	Office expenses	24,242	6,637	2,875	14,730					
14	Information technology									
15	Royalties									
16	Occupancy	7,433		7,433						
17	Travel	2,976	2,976							
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	175,951	175,951							
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization									
23	Insurance	5,128		5,128						
24	Other expenses. Itemize expenses not covered									
	above. (List miscellaneous expenses on line 24e. If									
	line 24e amount exceeds 10% of line 25, column									
	(A), amount, list line 24e expenses on Schedule O.)									
а	Supplies	198,458	196,143		2,315					
b	Community events	17,057	14,864		2,193					
C	Other program expenses	13,658	13,658							
d	- 									
е	All other expenses	3,715	1,287	819	1,609					
25	Total functional expenses. Add lines 1 through 24e	649,638	553,312	58,608	37,718					
26	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 if									
	following SOP 98-2 (ASC 958-720)									

74-3097354 Bag It

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	16,426	1	8,627
	2	Savings and temporary cash investments	103,548	2	230,272
	3	Pledges and grants receivable, net	5,500	3	
	4	Accounts receivable, net	6,208	4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
G	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	184,319	8	128,021
As	9	Prepaid expenses and deferred charges	21,538	9	27,067
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	337,539	16	393,987
	17	Accounts payable and accrued expenses	135,595	17	111,512
	18	Grants payable		18	
	19	Deferred revenue	47,665	19	36,665
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iab		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	183,260	26	148,177
		Organizations that follow FASB ASC 958, check here			
es		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	154,279	27	245,810
Bal	28	Net assets with donor restrictions		28	
힏		Organizations that do not follow FASB ASC 958, check here			
Ę		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
٩ss	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	154,279	32	245,810
	33	Total liabilities and net assets/fund balances	337,539	33	393,987
EEA					Form 990 (2024)

Form **990** (2024)

Page **11**

-orm	1990 (2024) Bag It	74-3097	354	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		741,	169
2	Total expenses (must equal Part IX, column (A), line 25)	2		649,	638
3	Revenue less expenses. Subtract line 2 from line 1	3		91,	531
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		154,	279
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			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		245,	810
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule 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.				
	X Separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

EEA

Form **990** (2024)

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.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Inspection

Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number Bag It 74-3097354 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). 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**. X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 12 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. а 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, С its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization must generally 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 II, 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 (iii) Type of organization (iv) Is the organization (v) Amount of monetary (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D)

(E)

Schedule A (Form 990) 2024 Page 2 74-3097354 Bag It 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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2020 **(b)** 2021 (c) 2022 (d) 2023 (e) 2024 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 257,250 215,600 339,950 443,090 601,942 1,857,832 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 257,250 215,600 339,950 443,090 601,942 1,857,832 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) 834,328 Public support. Subtract line 5 from line 4 . 1,023,504 Section B. Total Support (d) 2023 Calendar year (or fiscal year beginning in) (a) 2020 **(b)** 2021 (c) 2022 (e) 2024 (f) Total 7 Amounts from line 4 257,250 215,600 339,950 443,090 601,942 1,857,832 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 277 3,072 2,501 5,402 3,648 14,900 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.) 11 Total support. Add lines 7 through 10 1,872,732

13	First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a	a sect	ion 501(c)(3)	
	organization, check this box and stop here			\Box
Secti	on C. Computation of Public Support Percentage			
14	Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	54.65	%
15	Public support percentage from 2023 Schedule A, Part II, line 14	15	52.58	%
16a	33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33	/3%	or more, check this	
	box and stop here . The organization qualifies as a publicly supported organization			x
b	33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is	s 33 1	/3% or more, check	
	this box and stop here . The organization qualifies as a publicly supported organization			
17a	10%-facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a,	or 16l	o, and line 14 is	
	10% or more, and if the organization meets the facts-and-circumstances test, check this box and sto	op he	re. Explain in	
	Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as	a pub	licly supported	
	organization			
b	10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a,	16b, d	or 17a, and line	
	15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box a	nd st o	op here. Explain	
	in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies a	ıs a p	ublicly supported	
	organization			
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check	this b	ox and see	
	instructions			Г

Gross receipts from related activities, etc. (see instructions)

12

836,936

12

Schedule A (Form 990) 2024 Bag It 74-3097354 Page 3

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support			-		•	
Calen	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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	Amounts included on lines 2 and 3						
	received from other than disqualified					1	
	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.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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.)						
14	First 5 years. If the Form 990 is for the or	ganization's fi	rst, second, thi	rd, fourth, or fit	fth tax year as	a section 501(c)(3)
	organization, check this box and stop her	е					
Secti	on C. Computation of Public Suppor	rt Percentag	je				
15	Public support percentage for 2024 (line 8		•	13, column (f))		15	%
16	Public support percentage from 2023 Sch					16	%
Secti	on D. Computation of Investment Inc						
17	Investment income percentage for 2024 (I	ine 10c, colur	nn (f), divided b	y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2023					18	%
19a	33 1/3% support tests - 2024. If the orga						
	17 is not more than 33 1/3%, check this be	•	-	-			anization 🗌
b	33 1/3% support tests - 2023. If the organization						
	line 18 is not more than 33 1/3%, check this box	-	-			-	
20	Private foundation. If the organization did	d not check a	box on line 14,	19a, or 19b, c	heck this box a	and see instruc	tions 🗌

Schedule A (Form 990) 2024 Page 4 74-3097354 Bag It

Part IV **Supporting Organizations**

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

S

ecti	ion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
С	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.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
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.	4b		
С	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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line			
	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons, as defined in section 4946 (other than foundation managers and organizations			
	described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
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.	9b		
С	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.	9с		
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.	10a		
h	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.)

Schedule A (Form 990) 2024 Bag It 74-3097354 Page 5 Part IV Supporting Organizations (continued) Yes No 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 11a 11c below, the governing body of a supported organization? A family member of a person described on line 11a above? 11b A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, 11c provide detail in Part VI. Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported 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 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 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 1 organization's governing documents in effect on the date of notification, to the extent not previously provided? 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 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. b The organization is the parent of each of its supported organizations. Complete line 3 below. С The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). Yes 2 No Activities Test. Answer lines 2a and 2b below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of 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 2a that these activities constituted substantially all of its activities. Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. 3a

3b

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

Schedule A (Form 990) 2024 Bag It 74-3097354 Page 6

Part	<u> </u>			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	j trus	st on Nov. 20, 1970 <i>(expl</i>	ain in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organi	izati	ons must complete Section	ons A through E.
Sect	on 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		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally in	ntegrated Type III suppor	ting organization
	(see instructions).			

EEA Schedule A (Form 990) 2024

c Excess from 2022

d Excess from 2023 e Excess from 2024 -

	e A (Form 990) 2024 Bag It		74-3		7354 Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued	<i>d)</i>	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e			1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organ	izations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required -	provide details in Part	/I)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2024 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2024	s	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2024				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2024				
а	From 2019				
b	From 2020				
С	From 2021				
d	From 2022				
е	From 2023				
f	Total of lines 3a through 3e				
<u>g</u>	Applied to underdistributions of prior years			_	
	Applied to 2024 distributable amount				
<u>i</u>	Carryover from 2019 not applied (see instructions)				
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2024 from				
	Section D, line 7: \$				
	Applied to underdistributions of prior years			_	
	Applied to 2024 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2024, if			_	
5	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain</i> in <i>Part VI</i> . See instructions.				
6	Remaining underdistributions for 2024. Subtract lines 3h				
U	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2025. Add lines 3j				
,	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2020				
b b	Excess from 2021				

Schedule A (Form 990) 2024 EEA

Schedule A (Form 990) 2024 74-3097354 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

EEA Schedule A (Form 990) 2024

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2024

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-C below. Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

• Sec	ction 501(c)(4), (5), or (6) orga	nizations: Complete Part III.			
Name o	of organization			Employer id	entification number (EIN)
Bag I				74-30973	
Part	I-A Complete if the	e organization is exempt un	der section 501(c) or is a section 52	7 organization.
1	Provide a description of the o	rganization's direct and indirect politic	al campaign activities	in Part IV. See instructions f	or
	definition of "political campaig	gn activities."			
2	Political campaign activity exp	penditures. See instructions			\$
3	<u> </u>	ampaign activities. See instructions			
Part	I-B Complete if the	e organization is exempt un	der section 501(c)(3).	
1	•	se tax incurred by the organization und			
2		se tax incurred by organization manag			
3	If the organization incurred a	section 4955 tax, did it file Form 4720	for this year?		· · · · · · · · · · Yes · · · No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV.				
Part	I-C Complete if the	e organization is exempt un	der section 501(c), except section 5	01(c)(3).
1	, ,	ended by the filing organization for se	•		
	activities				\$
2	Enter the amount of the filing	organization's funds contributed to oth	ner organizations for se	ection	
	527 exempt function activities				\$
3	Total exempt function expend	itures. Add lines 1 and 2. Enter here a	ind on Form 1120-POL	-,	
					\$
4	Did the filing organization file	Form 1120-POL for this year?			· · · · · · Yes No
5	Enter the names, addresses,	and EINs of all section 527 political or	rganizations to which tl	he filing organization made	payments.
	For each organization listed,	enter the amount paid from the filing o	rganization's funds. Al	so enter the amount of politi	cal
	contributions received that we	ere promptly and directly delivered to a	a separate political orga	anization, such as a separa	te
	segregated fund or a political	action committee (PAC). If additional	space is needed, provi	ide information in Part IV.	İ
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Sched	ule C (Form 990) 2024 Bag It				74-3097	
Par	t II-A Complete if the organization	n is exempt ι	under section 5	01(c)(3) and file	ed Form 5768 (el	ection under
	section 501(h)).					
A C	heck $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	affiliated group (a	ind list in Part IV each	affiliated group mer	nber's name, address,	
	EIN, expenses, and share of excess	lobbying expenditu	ures).			
B C	heck if the filing organization checked box	A and "limited con	trol" provisions apply.			
	Limits on Lobb	ying Expendit	ures		(a) Filing	(b) Affiliated
	(The term "expenditures" m	neans amounts	paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence public	opinion (grassroo	ts lobbying)			
b	Total lobbying expenditures to influence a legis	lative body (direct	lobbying)			
c	Total lobbying expenditures (add lines 1a and	1b)				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines	1c and 1d)				
f	Lobbying nontaxable amount. Enter the amour	nt from the followin	g table in both			
	columns.					
	IF the amount on line 1e, col. (a) or (b), is:	THEN lobbyir	ng nontaxable amou	nt is:		
	not over \$500,000	20% of the am	ount on line 1e.			
	over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess o	ver \$500,000.		
	over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess o	ver \$1,000,000.		
	over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	er \$1,500,000.		
	over \$17,000,000	\$1,000,000.				
	Grassroots nontaxable amount (enter 25% of I	ine 1f)				
h						
i	Subtract line 1f from line 1c. If zero or less, en					
j	If there is an amount other than zero on either	line 1h or line 1i, d	lid the organization fil	e Form 4720		
•	reporting section 4911 tax for this year?					☐ Yes ☐ No
			Period Under Sec			
	(Some organizations that made a sec	ction 501(h) ele	ction do not have	to complete all	of the five column	s below.
			ructions for lines			
		-				
	Lobbyin	g Expenditures	During 4-Year Av	reraging Period		
		-			(4), 0004	(a) T ()
	Calendar year (or fiscal year	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
	beginning in)					
	Labbying portayable amount					
2a 	Lobbying nontaxable amount					
b	, , ,					
	(150% of line 2a, column (e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount					
	(150% of line 2d, column (e))					

EEA Schedule C (Form 990) 2024

f Grassroots lobbying expenditures

Schedule C (Form 990) 2024 Bag It 74-3097354

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). Page 3

For ea	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(;	a)	(b)	
	ption of the lobbying activity.	Yes	No	Amount	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local				
•	legislation, including any attempt to influence public opinion on a legislative matter or				
	referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part l	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or	secti	on	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?			3	
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5				
	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No;" OR (b) Part I	II-A, I	ine 3	s, is answe	red
	"Yes."				
1	Dues, assessments, and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of				
	political expenses for which the section 527(f) tax was paid):				
a	Current year		2a		
b	Carryover from last year		2b		
C	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying				
_	and political expenditures next year?		4		
5 Dort	Taxable amount of lobbying and political expenditures. See instructions	• •	5		
Part	<u> </u>	inna 1			
	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, I instructions); and Part II-B, line 1. Also, complete this part for any additional information.	mes i	and		
`					
<u>01. (</u>	Other activities to influence (Part II-B, line 1i)				
mh o	lattona dimostlu to lamislatona mamusatina to summont hil	1	mh o		
rne c	organization sent letters directly to legislators requesting to support bil	.IS.	The		
0220	nization's name was also included with other non-profit organizations in ac	14: ±:	on o 1		
organ	izacion's name was also included with other non-profit organizations in ac	iai ci	Onai		
recuir	est letters to legislators. The organization posted some materials on socia	1 ma	die		
<u>reduc</u>	st recters to regretations. The organization posted some materials on socia		шта		
showi	ing support of bills. The organization met with individuals virtually and i	n ne	rson	to	
2-1-OW-		pe			
share	stories of those impacted by cancer and how certain bills affect patients	and	l		
	Total Description of the Control of				

EEA Schedule C (Form 990) 2024

EEA Schedule C (Form 990) 2024

SCHEDULE G (Form 990) (Rev. December 2024)

Department of the Treasury

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.

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

OMB No. 1545-0047

Open to Public

Internal Revenue Service Inspection Name of the organization Employer identification number Bag It 74-3097354 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 а Mail solicitations Solicitation of nongovernment grants Internet and email solicitations f Solicitation of government grants b Phone solicitations Special fundraising events С In-person solicitations d 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, ☐ Yes ☐ No or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (iv) Gross receipts (i) Name and address of individual (or retained by) (ii) Activity custody or control of (or retained by) or entity (fundraiser) from activity fundraiser listed in contributions? organization col. (i) Yes No 1 2 3 5 6 7 8 9 10 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

		gross receipts greater than	ሲፎ ሰሰሰ		,	. List events with
		gross receipts greater triair	(a) Event #1 Breakfast (event type)	(b) Event #2 Gift a bag (event type)	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	16,639	4,333		20,972
ш	2	Less: Contributions Gross income (line 1				
		minus line 2)	16,639	4,333		20,972
	4	Cash prizes				
	5	Noncash prizes				
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Dir	8	Entertainment				
	9	Other direct expenses	6,178			6,178
	10 11	Direct expense summary. Add line Net income summary. Subtract lin				6,178 14,794
Pa	rt III			/		
		\$15,000 on Form 990-EZ, li	ne 6a.	i e		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
Sé	_					
8	2	Cash prizes				
Expenses	3	Cash prizes				
Direct Expense		·				
ಕ	3	Noncash prizes				
ಕ	3	Noncash prizes		☐ Yes%		
ಕ	3 4 5	Noncash prizes	No No	No No		
ಕ	3 4 5	Noncash prizes	No s 2 through 5 in column (d	No	No No	
Direct	3 4 5 6 7 8 E a ls	Noncash prizes	No s 2 through 5 in column (distract line 7 from line 1, columnation conducts gaming activities in each distract line 2 from line 1.	No umn (d) vities: of these states?	No	Yes No
Direct	3 4 5 6 7 8 E a ls	Noncash prizes	No s 2 through 5 in column (d) stract line 7 from line 1, column	No umn (d) vities: of these states?	No	Yes No
Direct	3 4 5 6 7 8 E a ls b lf — W	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add line Net gaming income summary. Substitute the state(s) in which the organizes the organization licensed to conduct "No," explain:	No s 2 through 5 in column (distract line 7 from line 1, column ation conducts gaming activities in each of the second columns are second at gaming activities in each of the second activities in eac	No No umn (d) vities: of these states?	e tax year?	Yes No

SCHEDULE O (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

Employer identification number

74-3097354

OMB No. 1545-0047

Bag It 01. Form 990 governing body review (Part VI, line 11)

The tax return is provided to the Board of Directors for their review and approval prior to filing the return.

02. Conflict of interest policy compliance (Part VI, line 12c) Members of the Board of Directors sign a conflict of interest policy statement annually. There is also a conflict of interest statement in the volunteer handbook. In connection with any actual or possible conflict of interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all materi facts to the Directors and members of committees with Governing Board delegated powers considering the proposed transaction or arrangement. After disclosure of the financial interest and all material facts, and after any discussion with the interested person, he/she shall leave the Governing Board or committee meeting while the determination of a conflict of interest is discussed and voted upon. The remaining Board or committee members shall decide if a conflict of interest exists. An interested person may make a presentation at the Governing Board or committee meeting, but after the presentation, he/she shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement involving the possible conflict of interest. The chairperson of the Governing Board or committee shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement. If a more advantageous transaction or arrangement is not reasonably possible under circumstances not producing a conflict of interest, the Governing Board or committee shall determine by a majority vote of the disinterested Directors whether the transaction or arrangement is in the Organization's best interest, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination it shall make its decision as to whether to enter into the transaction or arrangement. If the Governing Board or committee has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose. If, after hearing the member's response and after making further investigation as warranted by the circumstances, the Governing Board or committee determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action. 03. CEO, executive director, top management comp (Part VI, line 15a) The Board of Directors, independent of the Executive Director, determines annual salary. In the Fall of 2020, a review of the ASU Lodestar Center for Philanthropy & Nonprofit Innovation's Nonprofit Compensation and Benefits 2019 report was reviewed to assure adherence to guidelines. 04. Governing documents, etc, available to public (Part VI, line 19) governing documents, policies, and financial statements are available upon request The 990 is available on the website