Form 990

Extended to November 15, 2023 Return of Organization Exempt From Income Tax

anue Code (except private foundations)

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service			Go to www.irs.gov/Form990 for instructions and	the latest in	nformation.	Inspection
A For the 2022 calend		e 2022 calend	ar year, or tax year beginning and	ending		
	Check if applicab	le: C Name or	forganization		D Employer identificat	tion number
	Addre	urba	n Growers Collective, Inc.			
	Name		usiness as		82-3336616	5
	Initial		and street (or P.O. box if mail is not delivered to street address)	Room/suite		-
	Final	1200		118	773-376-88	382
	termii ated	n	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,916,732.
	Amer	nded Chia	ago, IL 60609		H(a) Is this a group retu	
	Appli		nd address of principal officer: Laurell Sims		for subordinates?	
L	pendi		as C above		H(b) Are all subordinates include	
1	Tax-ex	empt status:		or 527		
	Websi		ngrowerscollective.org		H(c) Group exemption r	
			X Corporation Trust Association Other	L Year	of formation: 2017 M S	
	art I	Summary			I	
	1	Briefly describ	e the organization's mission or most significant activities: ${ { m To} d}$	emonst	rate and supp	ort
ce			ties in developing community-based			
nar	2	Check this bo				S.
Governance	3	Number of vot			3	9
			lependent voting members of the governing body (Part VI, line 1b)			9
Activities &	5		of individuals employed in calendar year 2022 (Part V, line 2a)			48
/itie	6		of volunteers (estimate if necessary)			192
cti	7 a					0.
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	<u></u>	7b	0.
					Prior Year	Current Year
e	8	Contributions	and grants (Part VIII, line 1h)		4,138,937.	3,575,532.
nue	9	Program servi	ce revenue (Part VIII, line 2g)		299,844.	246,317.
Revenue	10	Investment ind	come (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
æ	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-3,889.	-79,916.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,434,892.	3,741,933.	
	13	Grants and sir	nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		0.	0.
ŝ	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)		977,438.	1,599,735.
Expenses	16a	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) <u>282, 6</u>	<u></u>	0.	0.
adx	b	Total fundrais	ing expenses (Part IX, column (D), line 25) 282, 6	77.	1 0 0 0 0 0 1	
ш	1 "		es (Part IX, column (A), lines 11a-11d, 11f-24e)		1,099,961.	1,381,534.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,077,399.	2,981,269.
	19	Revenue less	expenses. Subtract line 18 from line 12		2,357,493.	760,664.
Net Assets or				Be	eginning of Current Year	End of Year
sset	20	Total assets (F		······	5,224,971.	5,960,256.
et A:	21		(Part X, line 26)		222,564.	197,185.
	<u>22</u> art II		fund balances. Subtract line 21 from line 20		5,002,407.	5,763,071.

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

Sign	Signature of officer		Date						
	Laurell Sims, Co-CEO								
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature	Date Ch						
Paid	Jason L. Gierhahn	Jason L. Gierhahn		f-employed P02385275					
Preparer	Firm's name Desmond & Ahern,	Ltd	Firm's El	N 36-3321958					
Use Only	Firm's address 10827 S. Western	Avenue							
Chicago, IL 60643 Phone no.773-779-4									
May the IF	May the IRS discuss this return with the preparer shown above? See instructions								
232001 12-13	32001 12-13-22LHAFor Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2022)								

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Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	X]
1	Briefly describe the organization's mission:		
	Urban Growers Collective's work aims to address the ine		
	structural racism that exist in the food system and in		
	color. Rooted in growing food, UGC cultivates nourishin		
	which support health, economic development, healing and		
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.		כ
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	s? Yes X No	_
3	If "Yes," describe these changes on Schedule O.		J
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 or		
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 2,248,558. including grants of \$) (R	evenue \$ 166,401.)
	Eight urban farms operate on 11-acres of land predomina		
	Chicago's south side. These farms are production-orient	ed with staff	
	integrating education, training, leadership development	and food	
	distribution to meet program goals. Each farm utilizes	organic growing	
	methods and intensive growing practices that maximizes	space and	
	year-round production strategies.		
4b	(Code:) (Expenses \$ including grants of \$) (R	evenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (R	evenue \$.)
			_
			—
			—
			—
			—
			_
			_
			_
			_
			_
			_
4d	Other program services (Describe on Schedule O.)		—
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 2,248,558.	,	_
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Form 990 (2022)Urban Growers Collective, Inc.82-3336616Page 3Part IVChecklist of Required Schedules

			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		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		х
c	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
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? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
'	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		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		х
Ч	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VIII</i> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	11c		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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	15		х
16	foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		- 23
10	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? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 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		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	X
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 Part IV
 Checklist of Required Schedules (continued)
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		<u> </u>
D D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		- 23
20				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
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	0.7		x
~~	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	00-	х	
	"Yes," complete Schedule L, Part IV	28a	~	x
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	00-		x
~~	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
•	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		<u>x</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			- v
• •	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	0	v	
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 20		162	
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 20 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
Ŭ	(gambling) winnings to prize winners?	1c	Х	
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	4			(_)

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Form	990 (2022) Urban Growers Collective, Inc. tV Statements Regarding Other IRS Filings and Tax Compliance (continued)	82-3336	616	P	age 5	
				Yes	No	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a 48				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	is?	2b	Х		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X	
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<u>5a</u>		X	
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact		<u>5b</u>		Х	
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		<u>5c</u>			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit			v	
	any contributions that were not tax deductible as charitable contributions?		<u>6a</u>		<u>X</u>	
D	If "Yes," did the organization include with every solicitation an express statement that such contribution are the deductible?		Ch			
7	were not tax deductible?		6b			
	Organizations that may receive deductible contributions under section 170(c). Did the exception receive a payment in excepts of $$75$ mode partly as a contribution and partly for goods and can	viene provided to the pover?	70		х	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser If "Yes," did the organization notify the donor of the value of the goods or services provided?		7a 7b			
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa	s required				
C	to file Form 8282?	siequileu	7c		х	
Ь	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e		Х	
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		Х	
	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g			
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h			
	sponsoring organization have excess business holdings at any time during the year?					
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b			
10	Section 501(c)(7) organizations. Enter:	1				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	4			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	4			
	Section 501(c)(12) organizations. Enter:	1				
	Gross income from members or shareholders	<u>11a</u>	-			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b	1.0			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a			
b 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
	Is the organization licensed to issue qualified health plans in more than one state?		13a			
u	Note: See the instructions for additional information the organization must report on Schedule O.		100			
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
~	organization is licensed to issue qualified health plans	13b				
с	Enter the amount of reserves on hand	13c	1			
			14a		Х	
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
	excess parachute payment(s) during the year?		15		X	
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		X	
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17			
	If "Yes," complete Form 6069.					
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 Part VI
 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

l	Enter the number of voting members of the governing body at the end of the tax year 1a	9		
I				
	See de de la sector d'hour de la desta de la sector d'han en anticidad e sector de la sector de la sector de la			
b	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
	Enter the number of voting members included on line 1a, above, who are independent 1b	9		
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		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. 4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			x
	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
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	10		
		8a	x	
	The governing body?		X	
	Each committee with authority to act on behalf of the governing body?		- 23	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		x
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	. 9		
becu	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No X
	Did the organization have local chapters, branches, or affiliates?	<u>10a</u>		^
	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?			
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	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		Х	
р,	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	. 12 b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
1	on Schedule O how this was done	12c		X
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	. 14		X
	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?			
-	The organization's CEO, Executive Director, or top management official	15a		X
	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
1	taxable entity during the year?	16a		x
	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		
	ion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed			
	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)	availa	ble
1	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a statements available to the public during the tax year.	and finan	cial	
20 3	State the name, address, and telephone number of the person who possesses the organization's books and records Laurell Sims - 773-376-8882			
-	1200 West 35th Street, Suite 118, Chicago, IL 60609			
	12-13-22	Form	ז 990	(202 [,]

Urban Growers Collective, Inc.

Part VII	Со	mpensation of	of Officers,	Directors,	Trustees,	Key E	Employees,	Highest	Compens	ated
	En	nployees, and	Independe	ent Contra	ctors					

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)			(0	C) ition			(D)	(E)	(F)
Name and title	Average		not c	heck	more	than o		Reportable	Reportable	Estimated
	hours per week	offi	, unles cer an	ss per d a d	rson i irecto	s botr r/trus	tee)	compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	or dire	e e			ted		organization	(W-2/1099-MISC/	from the
	related	istee o	truste		e	pensa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tru	ional		ploye	t com		1099-NEC)		and related
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Erika Allen	40.00			0	-		4			
CEO Operations				Х				124,054.	0.	3,827.
(2) Laurell Sims	40.00									
CEO Financials				Х				114,254.	0.	3,700.
(3) Erika Dudley	1.00									
President		Х		Х				0.	0.	0.
(4) Melissa Clark	1.00									
Treasurer		Х		Х				0.	0.	0.
(5) Margot Pritzker	1.00									
Secretary		Х		Х				0.	0.	0.
(6) Camille Kerr	1.00									
Board member		Х						0.	0.	0.
(7) Norma Sanders	1.00									
Board member		Х						0.	0.	0.
(8) Jessie Perez	1.00									
Board member		Х						0.	0.	0.
(9) Janelle St. John	1.00									
Board member		Х						0.	0.	0.
(10) Desiree Sanders	1.00									_
Board member		Х						0.	0.	0.
(11) Carrie Schloss	1.00									
Board member		Х						0.	0.	0.
		1								
		_								
]								
232007 12-13-22										Form 990 (2022)

232007 12-13-22

Form 990 (2022)

12390712 402354 190568

2022.04000 URBAN GROWERS COLLECTIVE, 190568_1

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	990 (2	2022) Urban	Gro	wers	Cc	11	ec	ti	ve	·,	In	IC.	82-33	<u>;366</u>	516	Pa	age 8
Par	t VII	Section A. Officers, Directors	, Trust	ees, Key	/ Emp	oloy	ees,	and	l Hig	ghes	t Co	ompensated Employee	s (continued)				
		(A)		(B)				(0				(D)	(E)			(F)	
		Name and title		Avera				Posi	ition			Reportable	Reportable		Fst	timate	h
		Name and the		hours						than c s both		compensation	compensation			ount	
				weel						r/trust		from	from related	·		other	
				(list ar		tor						the	organizations	.		bensa	tion
				hours		Individual trustee or director				_		organization	(W-2/1099-MIS		-	om the	
				relate	ed	e or	stee			Highest compensated employee		(W-2/1099-MISC/	1099-NEC)	<i>°</i> /		anizati	
				organiza	tions	ruste	In stitutional trustee		ee	nper		1099-NEC)	1000 1120)		•	I relate	
				belov		lual t	tiona		Vold	st col yee	<u>_</u>	10001120)				nizatio	
				line)		ndivio	ıstitu	Officer	Key employee	ighe: mplo	Former				orgu	- medation	5110
							-I	0	×	Ξe	ш			\rightarrow			
			ł														
														\rightarrow			
														\rightarrow			
			-														
														\rightarrow			
														\rightarrow			
			ł														
										-				-+			
			-														
												000 000		_			
	Subto											238,308.		0.		7,52	27.
С	Total	from continuation sheets to P	Part VII	, Section	η Α							0.		0.			0.
d	Total	(add lines 1b and 1c)										238,308.		0.	7	7,52	27.
2		number of individuals (including										eceived more than \$100.	000 of reportable				
		ensation from the organization	,							,		,					2
	een p															Yes	No
•						I.					ايم : ما			E F			
3		ne organization list any former of													-		37
		a? If "Yes," complete Schedule .												-	3		X
4	For ar	ny individual listed on line 1a, is	the su	m of repo	ortabl	e co	mpe	ensat	tion	and	oth	er compensation from the	ne organization				
	and re	elated organizations greater tha	n \$150	,000? If	"Yes,	" со	mple	ete S	Sche	dule	J fo	or such individual		L	4		X
5		ny person listed on line 1a receiv															
	rende	red to the organization? If "Yes,	com	olete Sch	nedule	ə.J fa	or su	ıch r	oers	on .		-			5		Х
Sect		Independent Contractors			0000			<u>, 101</u>		211				······			
1		blete this table for your five high	est con	nnonsato	d inc	lono	ndor	nt co	ontra	actor	e th	nat received more than \$	100 000 of comp	oneati	ion fro	m	
•		ganization. Report compensation												chisati			
	the or				Jar ye	ear e	nuir	ig w							(0		
		() Name and bus	A)	addraaa		370		-				(B) Description of s	onviooo	<i>C</i> /	(C omper)	•
		Name and bus	5111655 6	auuress		NC	ONE				_	Description of s	ervices		Juhei	ISALIUI	1
											\dashv						
2	Total	number of independent contrac	tors (in	cludina t	out no	ot lin	nited	to t	thos	se lis	ted	above) who received mo	ore than				
		000 of compensation from the c		J. J					C			· · · · · · · · · · · · · · · · · · ·					
	÷.50,								-				I	r	Form S	990 (*	2022)
														г			-066)

	n 990 () rt VII	2022) Urb	oan Grow	ers	Collect	ive, Inc.		82-3336	616 Page 9
1 u		Check if Schedule O		onse o	or note to anv lin	e in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts nts	1 a	Federated campaigns	<u>1a</u>						
àrar oun	b		1b						
Am (С	• • • • • • • • • • • • • • • • • • • •							
Gifi	d		<u>1d</u>		200 700				
ns,	е	Government grants (contr			328,722.				
er S	f	All other contributions, gifts,		2	246 910				
l di Di ti Di ti Di ti		similar amounts not included			246,810. 262.				
Contributions, Gifts, Grants and Other Similar Amounts	g b	Noncash contributions included in Total. Add lines 1a-1f				3,575,532			
0 0		Total. Add lines 1a-11			Business Code	5,575,552	•		
Ð	2 a	Program servi	ce		900099	207,709	. 207,709.		
vice	b	- 1			900099	38,608			
Ser	c								
Program Service Revenue	d								
ogr	е								
Å	f	All other program service	revenue						
	g	Total. Add lines 2a-2f				246,317.	•		
	3	Investment income (includ	ding dividends,	intere	st, and				
	4	Income from investment of	=						
	5	Royalties							
	_	_	(i) Rea	al	(ii) Personal				
	6 a	Gross rents	6a						
			6b						
	с	Rental income or (loss)	6c						
		Net rental income or (loss)	5) (i) Secur		(ii) Other				
	<i>i</i> a	Gross amount from sales of		ILIES					
	h	assets other than inventory Less: cost or other basis	7a						
Ð	U	and sales expenses	7b						
venue	с	Gain or (loss)	7c						
		Net gain or (loss)							
Other Re		Gross income from fundraisi							
0		contributions reported on							
		Part IV, line 18	-	8a					
	b								
		Gross income from gamin	-						
		Part IV, line 19							
	b	Less: direct expenses							
	10 a	Gross sales of inventory, I							
		and allowances			94,883.				
		Less: cost of goods sold			174,799.				
	С	Net income or (loss) from	sales of invento	ory		-79,916	-79,916.		
S					Business Code				
leot ue	11 a						+	+	
cellaneo <u>Sevenue</u>	b						+	-	
Miscellaneous Revenue	с А			—					
Ë		All other revenue Total. Add lines 11a-11d							
	<u>е</u> 12	Total revenue. See instruction				3,741.933	. 166,401.	0.	0.
23200	9 12-13-								Form 990 (2022)

 Form 990 (2022)
 Urban Growers Collective, Inc.

 Part IX
 Statement of Functional Expenses

Do	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 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,	050 051	110 011	FF 100	F C 010
	trustees, and key employees	252,851.	118,911.	57,130.	76,810
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)	1 1 7 0 0 1 0	010 600	1 ()) /)	00 047
7	Other salaries and wages	1,172,919.	919,629.	162,343.	90,947
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)	64,585.	48,252.	9,340.	6 002
9	Other employee benefits	109,380.	48,252. 79,809.		6,993 12,739
10	Payroll taxes	109,300.	79,009.	16,832.	12,759
11	Fees for services (nonemployees):				
a	Management				
b	Γ	27,617.	701.	26,914.	2
	Accounting	27,017.	/01•	20,914.	4
d					
e f	Investment management fees				
ı g					
9	column (A), amount, list line 11g expenses on Sch 0.)	369,673.	216,867.	83,030.	69,776
12	Advertising and promotion	23,340.	6,489.	5,835.	11,016
13	Office expenses	41,876.	12,516.	27,569.	1,791
14	Information technology	27,423.	7,230.	11,340.	8,853
15	Royalties		,		
16	Occupancy	72,305.	60,720.	9,153.	2,432
17	Travel	28,133.	24,348.	3,684.	101
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	86,359.	86,359.		
23	Insurance	19,812.	18,669.	692.	451
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 0.)				
а	Program supplies	608,249.	591,993.	15,524.	732
b	Vehicle and maintenance	54,490.	54,490.		
с	Bad debt	16,106.		16,106.	
d	Professional developmen	4,774.	1,575.	3,184.	15
е	All other expenses	1,377.		1,358.	19.
25	Total functional expenses. Add lines 1 through 24e	2,981,269.	2,248,558.	450,034.	282,677
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)				Form 990 (202

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Form 990 (2022)

32

33

Total liabilities and net assets/fund balances

Total net assets or fund balances

Urban Growers Collective, Inc. Part X | Balance Sheet

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

2,845,200. 2,981,466. 1 1 Cash - non-interest-bearing 695,053. 2 Savings and temporary cash investments 2 1,497,852. 1,379,647. 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 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 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 7 8 Inventories for sale or use 8 24,369. 13,689. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 486,536. basis. Complete Part VI of Schedule D _____ 10a 168,959. 356,150. 317,577. b Less: accumulated depreciation _____ 10b 10c 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 501,400. 572,824. 15 15 Other assets. See Part IV, line 11 5,224,971. 5,960,256. 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 16 153,242. 95,775. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 39,322. Secured mortgages and notes payable to unrelated third parties 23 23 30,000. 30,000. 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 71,410. 0. 25 of Schedule D 222,564. 197,185. 26 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 2,777,274. 3,017,241. 27 27 Net assets without donor restrictions 2,985,797. Net assets with donor restrictions 1,985,166. 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31

5,960,256. Form 990 (2022)

5,763,071.

(B) End of year

(A) Beginning of year

11 2022.04000 URBAN GROWERS COLLECTIVE, 190568_1

5,002,407.

5,224,971.

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33

Form 990 (2022)

Assets

Liabilities

Net Assets or Fund Balances

Form	990 (2022) Urban Growers Collective, Inc.	82-3	336616	Pag	_{ge} 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	3,741		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,981		
3	Revenue less expenses. Subtract line 2 from line 1	3	760		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,002	4(07.
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	5,763	,0	<u>71.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			X
				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	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule 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?		<u>3a</u>		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	200	

Form **990** (2022)

SCHE	CHEDULE A OMB No. 1545-0047 Public Charity Status and Public Support OMB No. 1545-0047						OMB No. 1545-0047		
(Form 9	90)			•					つりつつ
		Co		ization is a section 501 47(a)(1) nonexempt cha			or a section		2022
	of the Treasury			ttach to Form 990 or Fo					Open to Public
Internal Reve	nue Service		Go to www.irs.gov/	Form990 for instruction	ns and the	e latest inf	ormation.		Inspection
Name of	the organizati								identification number
	_	Urba	n Growers	Collective, 1	Inc.			8	2-3336616
Part I	Reason	for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructior	IS.	
The organ	nization is not a	private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)			
1	A church, co	nvention of ch	urches, or associatio	on of churches described	l in sectio	on 170(b)(1	1)(A)(i).		
2	A school des	cribed in sect i	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	า 990).)				
3	A hospital or	a cooperative	hospital service orga	anization described in se	ection 170)(b)(1)(A)(ii	ii).		
4	A medical res	earch organiz	ation operated in co	njunction with a hospital	described	l in sectio	on 170(b)(1)(A	.)(iii). Enter	the hospital's name,
	city, and stat	e:							
5	An organizati	on operated fo	or the benefit of a co	llege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in
	section 170	(b)(1)(A)(iv). (C	Complete Part II.)						
6	A federal, sta	te, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7 X	An organizati	on that norma	Ily receives a substa	ntial part of its support fi	rom a gove	ernmental	unit or from tl	ne general p	oublic described in
	section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8	A community	trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9	An agricultur	al research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a	land-grant	college
	or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of	the college	or
	university:								
10	An organizati	on that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	nip fees, and	d gross receipts from
	activities rela	ted to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support fi	rom gross investment
	income and ι	Inrelated busir	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the org	ganization a	Ifter June 30, 1975.
	See section	509(a)(2). (Cor	mplete Part III.)						
11 🗌	An organizati	on organized a	and operated exclusi	ively to test for public sa	fety. See	section 50	09(a)(4).		
12	An organizati	on organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
	-	-	-	d in section 509(a)(1) o	-			•	
			-	f supporting organizatior					
a	_	-	• •	upervised, or controlled		-		-	giving
			-	gularly appoint or elect a	• • • •	-			
		0	complete Part IV, Se						
b			-	or controlled in connect	tion with its	s supporte	ed organizatio	n(s), by hav	vina
				anization vested in the sa			-		-
			t complete Part IV,					3	
c 🗌			-	g organization operated	in connect	tion with, a	and functiona	llv integrate	d with
		-). You must complete I					
d		•	.,.	porting organization oper				rted organiz	ration(s)
u _	- 21	-	• • • • • •	ation generally must sat				0	()
				nplete Part IV, Sections					
e				written determination fro				II Type III	
				nally integrated supporti			турст, турс	п, турс п	
f Ent									
	Enter the number of supported organizations Provide the following information about the supported organization(s).								
	(i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization listed (v) Amount of monetary (vi) Amount of other								
	organizatior	I		(described on lines 1-10	Yes	No	support (see i	nstructions)	support (see instructions)
				above (see instructions))					

Total

Urban Growers Collective, Inc.

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

Sec	ction A. Public Support				.		
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	719,661.	670,639.	3354779.	4138937.	3575532.	12459548.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	719,661.	670,639.	3354779.	4138937.	3575532.	12459548.
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)						2559936.
	Public support. Subtract line 5 from line 4.						9899612.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	719,661.	670,639.	3354779.	4138937.	3575532.	12459548.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots						
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						12459548.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12 1	,738,663.
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, t	fourth, or fifth tax y	/ear as a section 5	01(c)(3)	
_	organization, check this box and stop	phere	-				
	ction C. Computation of Publi						
	Public support percentage for 2022 (I					14	79.45 %
	Public support percentage from 2021					15	62.80 %
16a	33 1/3% support test - 2022. If the o				14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2021. If the o	-			line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual		•••				
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact			•	•	VI how the organiz	zation
	meets the facts-and-circumstances te	•	•		•		
b	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets the						
	organization meets the facts-and-circu						
18	Private foundation. If the organization	on did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box ar		
						Schedule A	(Form 990) 2022

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Schedule A	Form 990	2022

Urban Growers Collective, Inc. Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	clion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
78	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	-				-	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
	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						
	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
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.)						
	First 5 years. If the Form 990 is for th	he organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	i01(c)(3) organ	ization,
	check this box and stop here	~			·		
Sec	ction C. Computation of Publ	ic Support Per	centage				
	Public support percentage for 2022 (column (f))		15	%
	Public support percentage from 2021					16	%
Sec	ction D. Computation of Inves	stment Income	e Percentage				
	Investment income percentage for 2					17	%
	Investment income percentage from					18	%
198	33 1/3% support tests - 2022. If the						
ı.	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2021. If the						
00	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	on ala not check a	box on line 14, 19	a, or 190, check t	his box and see ins		
23202	23 12-09-22		15			Sched	ule A (Form 990) 2022

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1

2

3a

Yes No

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

Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

Part IV | Supporting Organizations

Schedule A (Form 990) 2022

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

Schedule A (Form 990) 2022

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Sche	edule A (Form 990) 2022 Urban Growers Collective, Inc.	82-333661	b Pa	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion 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? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>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</i>		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	L
2	Did the organization operate for the benefit of any supported organization other than the supported		l
	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,		ĺ
	supervised or controlled the supporting organization	2	L

Section C. Type II Supporting Organizations

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

Section D	. All Type III	Supporting	Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the	- vear	(see instructions).
-	Oneon the box next to the method that the organization used to satisfy the integral r art rest during the	s your	(

- The organization satisfied the Activities Test. Complete line 2 below. а
- b The organization is the parent of each of its supported organizations. Complete line 3 below.

c 🗌] The organization supported a governmental entity	Describe in Part VI how you supported a governmental entity (see instructions).
-----	--	---

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 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.

b 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.

3b Schedule A (Form 990) 2022

2a

2b

3a

Yes No

Yes No

1

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Ра	rt v Type III Non-Functionally Integrated 509(a)(3) Support	ing Organ	Izations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ring trust on N	Nov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
-	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	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	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	d Type III supporting orga	nization (see

Schedule A (Form 990) 2022

Urban Growers Collective, Inc.

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Schedule A (Form 990) 2022

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instructions).

Schedule A (Form 990) 2022 Urban Growers Collective, Inc. Schedule A (Form 990) 2022 Continued Schedule A (Form 990) 2022 Schedule A (Form

Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	1			
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	3			
4	Amounts paid to acquire exempt-use assets	4			
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.	č		8	
9	Distributable amount for 2022 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-2022	S	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	: From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
b	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022	Urban	Growers	Collective	, Inc.	82-3336616 Page
Part VI	Supplemental Part IV, Section A, line 1; Part IV, Sect	Information. Pr lines 1, 2, 3b, 3c, 4l ion D, lines 2 and 3	ovide the expla o, 4c, 5a, 6, 9a, ; Part IV, Sectio	nations required by F 9b, 9c, 11a, 11b, an n E, lines 1c, 2a, 2b,	Part II, line 10; Part d 11c; Part IV, Sect 3a, and 3b; Part V,	II, line 17a or 17b; Part III, line 12; ion B, lines 1 and 2; Part IV, Section C, line 1; Part V, Section B, line 1e; Part V, r any additional information.
232028 12-09-2	2			20		Schedule A (Form 990) 202

		0			OMB No. 1545-0047
	HEDULE D		al Financial Statements		
(Forr	n 990)		nization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		2022
	tment of the Treasury I Revenue Service		ttach to Form 990. 0 for instructions and the latest information.		Open to Public Inspection
	e of the organizatio			Employe	r identification number
	-	Urban Growers Colle		8	2-3336616
Pa		-	d Funds or Other Similar Funds or Ad	counts.	Complete if the
	organization	answered "Yes" on Form 990, Part IV, line		(b) Funda an	d ather accounts
			(a) Donor advised funds	(b) Funds an	d other accounts
1		d of year			
2 3		contributions to (during year) grants from (during year)			
4		end of year			
5			writing that the assets held in donor advised fund	ds	
-	-		exclusive legal control?		Yes No
6			dvisors in writing that grant funds can be used o		
	for charitable purpo	oses and not for the benefit of the donor o	r donor advisor, or for any other purpose confer	ring	
	impermissible priva				Yes No
Pa	rt II Conserva	ation Easements. Complete if the org	ganization answered "Yes" on Form 990, Part IV	, line 7.	
1		ervation easements held by the organization			
		of land for public use (for example, recreat			
		natural habitat	Preservation of a cert	ified historic	structure
2		of open space	ied conservation contribution in the form of a co	nsonvation o	acoment on the last
2	day of the tax year.				at the End of the Tax Year
а				2a	
b				2b	
с	•		ucture included in (a)	2c	
d		ation easements included in (c) acquired a			
	historic structure lis	sted in the National Register		2d	
3	Number of conserv	ation easements modified, transferred, rele	eased, extinguished, or terminated by the organ	ization during	g the tax
	year				
4		here property subject to conservation eas			
5		on have a written policy regarding the per			
6		procement of the conservation easements it			
0	Stall and volunteer	nours devoted to monitoring, inspecting,	handling of violations, and enforcing conservation	on easements	s during the year
7	Amount of expense	 as incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation ea	sements dur	ing the year
•					
8	Does each conserv	ation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(B))(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describ	e how the organization reports conservation	on easements in its revenue and expense statem	nent and	
			ote to the organization's financial statements th	at describes	the
Da		bunting for conservation easements.	Art, Historical Treasures, or Other S	imilar Ac	soto
га		the organization answered "Yes" on Form			5013.
10			8, not to report in its revenue statement and bal	anco shoot w	vorke
Ia	e e		lic exhibition, education, or research in furtheral		
			icial statements that describes these items.		
b			8, to report in its revenue statement and balance	e sheet work	s of
			exhibition, education, or research in furtherance		
		ng amounts relating to these items:			
	(i) Revenue includ	led on Form 990, Part VIII, line 1		\$	
	.,				
2			asures, or other similar assets for financial gain,		
		nts required to be reported under FASB A			
a					
b	Assets included in	⊦orm 990, Part X		\$	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 09-01-22

Schedule D (Form 990) 2022

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Sche	dule D (Form 990) 2022 Urban G	rowers Coli	lecti	ve, I	nc.			82-33	3661	6 Ра	age 2
Par	t III Organizations Maintaining C	Collections of Ar	t, Histo	rical Tr	easures, or	[•] Other	[.] Similar	r Assets	(conti	nued)	
3	Using the organization's acquisition, access	ion, and other record	s, check	any of the	following that	make si	gnificant u	use of its			
	collection items (check all that apply):										
а	Public exhibition	c	1 🛄 L	oan or ex	change progra	ım					
b	Scholarly research	e	• 🗌 o	Other							
с	Preservation for future generations										
4	Provide a description of the organization's c	ollections and explair	n how the	ey further t	he organizatio	n's exen	npt purpos	se in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations of	of art, hist	torical trea	asures, or othe	r similar	assets		_		_
_	to be sold to raise funds rather than to be m								Yes		No
Par	t IV Escrow and Custodial Arran		ete if the	organizati	on answered "	Yes" on	Form 990	, Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod								-		-
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing ta	ble:							
									Amoun	t	
С	Beginning balance										
d	Additions during the year										
е	Distributions during the year										
f	Ending balance								7.4		1
	Did the organization include an amount on F						ty?	∟	Yes		No
Par	If "Yes," explain the arrangement in Part XIII t V Endowment Funds. Complete										
1 41		(a) Current year		ior year	(c) Two year		(d) Three y	ears hack	(e) Fou	r vears	hack
4	Designing of year balance	(a) ourient year		ior year		3 Duck			(0) 1 00	yours	buok
1a ⊾	Beginning of year balance										
U O	Contributions										
с d	Net investment earnings, gains, and losses										
u	Grants or scholarships										
е	Other expenditures for facilities										
4	and programs										
	Administrative expenses End of year balance										
g 2	Provide the estimated percentage of the cur		l e (line 1a	column (s)) held as:						
-	Board designated or quasi-endowment		e (inte rg, %		a)) field as.						
a h	Permanent endowment	%									
c c	Term endowment	%									
Ŭ	The percentages on lines 2a, 2b, and 2c sho	-									
3a	Are there endowment funds not in the posse		ation that	are held a	and administer	ed for th	e				
	organization by:						•			Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answere	ed "Yes" on Form 990), Part IV,	line 11a. S	See Form 990,	, Part X,	line 10.				
	Description of property	(a) Cost or o basis (investr		. ,	st or other s (other)	• • •	ccumulate preciation	ed	(d) Boo	k valu	e
1 a	Land	· · · · · ·									
	Buildings										
	Leasehold improvements										
	Equipment			48	36,536.	1	L68,9	59.	31	7,5	77.
	Other										0.
	. Add lines 1a through 1e. (Column (d) must e		X colum	n (R) line '	10c)				31	7,5	
		agaan onn oov, i all		. <u>, , , , , , , , , , , , , , , , , , ,</u>				<u></u>	D /5		

Schedule D (Form 990) 2022

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
(1)	(
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	[
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 000 Dort IV line	11d Son Form 000 Bart V line 15	
	Description		(b) Book value
(1) Security deposit (2) Investment in Green Era			<u> </u>
			30,171.
			41,253.
(4) Operating lease - right-of	-use		41,203.
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		572,824.
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) Finance lease			29,550.
(3) Operating lease			41,860.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		71,410.
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote to	the organization's financial statements th	
organization's liability for uncertain tax positions under	FASB ASC 740. Check he	ere if the text of the footnote has been pro	vided in Part XIII X

Schedule D (Form 990) 2022

232053 09-01-22

Schedule D (Form 990) 2022Urban Growers Collective, Inc.82-3336616Page 3Part VIIInvestments - Other Securities.

Jiedule D	(10111 330) 2022	01 Duit	01
Part VII	Investments	s - Other Secu	ritie

L X

Sche	edule D (Form 990) 2022 Urban Growers Collective			3336616 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stat	ements With Revenu	e per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.		
1	Total revenue, gains, and other support per audited financial statements			3,741,933.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants			
d				
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			3,741,933.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
•	Add lines 4a and 4b			
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			3,741,933.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12., rt XII Reconciliation of Expenses per Audited Financial Sta			
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	tements With Expen		ı.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial Sta	tements With Expen e 12a.	5 ses per Returr	
	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	tements With Expen e 12a.	5 ses per Returr	ı.
1	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements	tements With Expen e 12a.	5 ses per Returr	ı.
1 2	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	tements With Expen	5 ses per Returr	ı.
1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	tements With Expen e 12a. 2a 2b	5 ses per Returr	ı.
1 2 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c 2c	5 ses per Returr	ı.
1 2 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	5 ses per Returr	n. <u>2,981,269.</u> 0.
1 2 b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	5 ses per Return 1 2e	n. 2,981,269.
1 2 b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	5 ses per Return 1 2e	n. <u>2,981,269.</u> 0.
1 2 b c d 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Part XIII.)	2a 2b 2c 2d	5 ses per Return 1 2e	n. <u>2,981,269.</u> 0.
] 1 2 3 4 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	5 ses per Return 1 2e	n. <u>2,981,269.</u> 0.
] 1 2 3 4 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	5 ses per Return 1 2e 3	n. 2,981,269. 0. 2,981,269. 0.
1 2 d e 3 4 b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	5 ses per Return 1 2e 3 3	n. 2,981,269. 0. 2,981,269.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part X, Line 2:

FIN 48 Financial Statement Footnote:

The Organization was granted an exemption from federal income taxes by the
Internal Revenue Service pursuant to the provisions of Internal Revenue
Code (IRC) Section 501(c)(3). Contributions to the Organization qualify
for the charitable contribution deduction pursuant to IRS Section
170(b)(1)(A)(vi) and has been classified as an organization that is not a
private Foundation under Section 509(a)(2). The tax-exempt purpose of the
Organization and the nature in which it operates is described above.
Management believes the Organization continues to operate in compliance
with its tax-exempt purpose. Thus, no provision for income tax has been
provided for in the financial statements.
232054 09-01-22 Schedule D (Form 990) 2022 24
90712 402354 190568 2022.04000 URBAN GROWERS COLLECTIVE, 190568_1

Schedule D	(Form 990) 202
Dart XIII	Supplama

(continued)	
	Schedule D (Form 990) 2022

Transactions With Interested Persons

OMB No.	1545-0047
•	~~~

(Form 990)	Complete if t	he org	ganization ansv 28b, or 28c, o				,		ine 25a, 25b, 26, 40b.	27, 2	8a,		2	02	2
Department of the Treasury Internal Revenue Service	Go	to ww		h to F	orm 9	90 or Fo	orm 990-EZ.						pen T spect	o Pub ion	lic
Name of the organizatio	n					Em	ploye	r ident	ificati	on nu	mber				
			wers Col									366	16		
									n 501(c)(29) orgai						
Complete i	f the organization						ne 25a or 25b	, or	Form 990-EZ, Pa	irt V, I	ine 40	b.			
1 (a) Name of disqual	ified person	(b) F	Relationship betw person and or			lified	(0	c) D	escription of tran	sactic	n				cted?
	•		person and or	yaniza	allon				•				<u> </u>	es	No
													+	-+	
													-	-	
2 Enter the amount of	-		-	-			-	-	•						
3 Enter the amount c	of tax, if any, on li	line 2, above, reimbursed by the organization					\$								
Part II Loans to	and/or Fror	n Int	erested Pers	sons.											
						. Part V.	line 38a or F	orm	n 990, Part IV, line	e 26: (or if th	e oraa	nizatio	n	
-	n amount on For					, ,				,		3-			
(a) Name of	(b) Relatio	onship	(c) Purpose	(d) La	oan to or n the	(0)	Original	(1) Balance due) In	(h) Ap by bo	proved ard or	, .,	/ritten
interested person	with organ	ization	of loan		ization?	princi	pal amount			defa	ault?	comm	ittee?	agree	ment?
				То	From					Yes	No	Yes	No	Yes	No
															<u> </u>
															<u> </u>
															<u> </u>
Total	or Assistance		- Cit in a lasta -				\$								
			-				07								
· · · ·	f the organization					1			(-1) T	- 6					
(a) Name of intere	ested person		(b) Relationship interested pers				Amount of Assistance		(d) Type assistan			•) Purp assista	ose o ance	T
			the organiza		u i										
											-+				

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

Schedule L (Form 990) 2022

232131 11-01-22

	Growers Collective,	Inc.	82-3336	616	Page 2
Part IV Business Transactions Involvi	ng Interested Persons.				
Complete if the organization answered	<u>"Yes" on Form 990, Part IV, line 28a, 2</u>	8b, or 28c.	•		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's
	person and the organization	transaction	transaction	rever	nues?
Erika Allen	CEO of Operations	500,000.	Erika Allen		No X
					<u> </u>
					<u> </u>
					<u> </u>
					<u> </u>
Part V Supplemental Information.					
Provide additional information for respo	nses to questions on Schedule L (see i	instructions).			
Sch L, Part IV, Business Tr	ransactions Involvin	a Intereste	d Persons:		
		- <u> </u>			
(a) Name of Person: Erika A	Allen				
(d) Description of Transact	tion. Frika Allen is	the co-own	er of Green	ͲϽϪ	
(d) Description of fransact	cion. Erika Arren is		let of green	LINA	
LLC and the Board President	t of Green ERA NFP.	The Organi	zation rece	ived	
a grant to be used to invest	st in Green Era Sust	ainability	with a \$500	.000	
		<u></u>		,	
investment.					

Schedule L (Form 990) 2022

232132 11-01-22

12390712 402354 190568

SCHEDULE O (Form 990)

Name of the organization



204,690.

80,814.

67,077.

352,581.

Form 990, Part III, Line 1, Description of Organization Mission:

Urban Growers Collective, Inc.

through urban agriculture.

Form 990, Part VI, Section B, line 11b:

The Form 990 was provided to the entire Board of Directors prior to filing.

Form 990, Part VI, Section C, Line 19:

Organizing documents and financial statements available upon request.

Form 990, Part IX, Line 11g, Other Fees:

Consultants & Contractors:

Program service expenses

Management and general expenses

Fundraising expenses

Total expenses

Youth stipends:

Program service expenses	2,445.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	2,445.

Payroll service:

Program service expenses	8,745.
Management and general expenses	1,603.
Fundraising expenses	1,651.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (Form 990) 2022
232211 10-28-22	

28

Schedule O (Form 990) 2022 Name of the organization	Employer identification numbe
Urban Growers Collective, Inc.	82-3336616
Fotal expenses	11,999.
Other:	
Program service expenses	987.
Management and general expenses	613.
Fundraising expenses	1,048.
Total expenses	2,648.
Total Other Fees on Form 990, Part IX, line 11g, Col A	369,673.
Form 990, Part XII, line 2c:	
The process has not changed from the prior year.	
232212 10-28-22	Schedule O (Form 990) 20