**Caution:** Forms printed from within Adobe Acrobat may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

CLIENT'S COPY

945 LINCOLN STREET Lander, Wyoming 82520



Phone 307.332.4545 www.307cpas.com

March 19, 2024

Goshen Help 1933 Main Street Torrington, WY 82240

Enclosed is the organization's 2022 Exempt Organization return.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-TE to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-TE to us by August 15, 2024.

The return was prepared from information submitted by you without verification. Please review it carefully and contact us if you have any questions. If this return is audited, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records.

Eric B. Andrews, CPA



(Rev. January 2022)

## Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

►	File a	separate	application	for	each ret	urn.

Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

#### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	r Name of exempt organization or other filer, see instructions.		Taxpayer identification number (T			N)	
print	GOSHEN HELP			47-5106845			
File by the due date for filing your	1933 MAIN STREET	ee instruc	tions.				
return. See instruction		oreign add	Iress, see instructions.				
Enter th	e Return Code for the return that this application is for (fil	e a separa	te application for each return)				1
Applica	tion	Return	Application			Ret	urn
ls For		Code	Is For			Co	de
Form 99	0 or Form 990-EZ	01	Form 1041-A			08	8
Form 47	20 (individual)	03	Form 4720 (other than individual)			09	9
Form 99	0-PF	04	Form 5227			1(	0
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			1.	1
Form 99	0-T (trust other than above)	06	Form 8870			12	2
Form 99	0-T (corporation) KYLE BORGER	07					
• If this box 1 I r th	organization does not have an office or place of busines is is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ▶ equest an automatic 6-month extension of time until e organization named above. The extension is for the org calendar year or . X tax year beginning OCT 1, 2022 the tax year entered in line 1 is for less than 12 months, of Change in accounting period	Group Exe and atta AUGU: anization's	emption Number (GEN) I ich a list with the names and TINs of ST 15, 2024, to file s return for: d endingSEP 30, 2023	f this is fo all memb	r the whole ers the ex npt organiz 	e group, check t	
ar	this application is for Forms 990-PF, 990-T, 4720, or 6069 ny nonrefundable credits. See instructions. this application is for Forms 990-PF, 990-T, 4720, or 6069			3a	\$		0.
	timated tax payments made. Include any prior year over			3b	\$		0.
_	alance due. Subtract line 3b from line 3a. Include your pa						
	ing EFTPS (Electronic Federal Tax Payment System). See	•		3c	\$		0.
Caution instructi	: If you are going to make an electronic funds withdrawal ons.	(direct de	bit) with this Form 8868, see Form 8	453-TE ar	nd Form 88	379-TE for paym	ient

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

	_		EXTENDED TO AUGUST 15, 20			OMB No. 1545-0047
	Q	90	Return of Organization Exempt Fror			つつつつ
Forr	n 🛡	50	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code		itions)	
Depa	rtment	of the Treasury	Do not enter social security numbers on this form as it ma Go to www.irs.gov/Form990 for instructions and the late			Open to Public Inspection
		enue Service	-	SEP 30, 202	23	Inspection
_	heck if		f organization	D Employer iden		on number
a	oplicab	le:			inouti	
	Addre chang	Je GOSH	EN HELP			
	Name] Chang Initial	ge Doing bi	usiness as WYO HELP	47-5106	<u>5845</u>	
	_return		and street (or P.O. box if mail is not delivered to street address)			<b>C</b> 0
	Jreturr termii	ő-	MAIN STREET	307-532	<u> </u>	
	ated ]Amer		own, state or province, country, and ZIP or foreign postal code INGTON, WY 82240	<b>G</b> Gross receipts \$	<u> </u>	794,824.
	_returr ]Appli	IOKK	nd address of principal officer:KYLE BORGER	H(a) Is this a grou		
	Jtion pendi		MAIN STREET, TORRINGTON, WY 82240	for subordina <b>H(b)</b> Are all subordinat		
<u> </u>			<b>X</b> 501(c)(3) $501(c)()$ (insert no.) $4947(a)(1)$ or $2240$			See instructions
	Vebsi		WYOHELP.COM	H(c) Group exempt		
-		f organization:		Year of formation: 201		
	rt I	Summary				
e	1	Briefly describ	e the organization's mission or most significant activities: IMPROVE	THE QUALITY	OF	LIFE FOR
ance		PEOPLE	IN NEED BY EMPOWERING THEM TO BECOME	MORE SELF SU	JFFI	CIENT
& Governance	2	Check this bo	x if the organization discontinued its operations or disposed of	nore than 25% of its ne	t asset	
<b>NO</b>	3				3	10
8 0	4		lependent voting members of the governing body (Part VI, line 1b)		4	10
Activities	5		of individuals employed in calendar year 2022 (Part V, line 2a)		5	25
tivit	6		of volunteers (estimate if necessary)		6	16
Act			d business revenue from Part VIII, column (C), line 12		7a	0.
	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	Prior Year	7b	Current Year
	0	Contributions	and grants (Part VIII, line 1h)	857,810	+	794,824.
Revenue	8 9			-	).	0.
evel	10	•	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)		5.	0.
Å	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,82		0.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	859,631		794,824.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)	168,201		73,495.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		).	0.
se			r compensation, employee benefits (Part IX, column (A), lines 5-10)	638,970		547,468.
Expenses	16a	Professional f	undraising fees (Part IX, column (A), line 11e)	(	).	0.
xpe	b		ing expenses (Part IX, column (D), line 25) 0 .	016 00		010 000
ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	216,283		210,626.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,023,452		831,589.
<u>r</u> s	19	Revenue less	expenses. Subtract line 18 from line 12	-163,821 Beginning of Current Ye		-36,765.
Net Assets or Fund Balances	00	Total accest: "		58,888		End of Year 20,358.
Asse Bal	20 21	Total assets (F		1,765		20,338.
Net /	21 22		(Part X, line 26) fund balances. Subtract line 21 from line 20	57,123		20,358.
	rt II				. •	20,000
		-	I declare that I have examined this return, including accompanying schedules and st	atements, and to the best o	f my kn	owledge and belief. it is
			. Declaration of preparer (other than officer) is based on all information of which pre		<b>,</b>	<b>,</b>

Sign	Signature of officer Date				
Here	KYLE BORGER, EXECUTIVE DI				
	Type or print name and title				
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN	
Paid	ERIC B. ANDREWS, CPA			self-employed P01951372	
Preparer	Firm's name SUMMIT WEST CPA G	ROUP, P.C.		Firm's EIN 83-0254900	
Use Only	Ise Only Firm's address 945 LINCOLN ST				
	LANDER, WY 82520 Phone no. 307-332-454				
May the I	RS discuss this return with the preparer shown abo	ove? See instructions		X Yes No	

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2022) GOSHEN HELP 47-5106845 Page 2
	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: IMPROVE THE QUALITY OF LIFE FOR PEOPLE IN NEED BY EMPOWERING THEM TO
	BECOME MORE SELF SUFFICIENT.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes," describe these new services on Schedule O.
3	It "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$775,238. including grants of \$73,495. ) (Revenue \$
	DETERMINE THE NEEDS OF THE COMMUNITIES SERVED BY WORKING IN HARMONY
	WITH EXISTING AGENCIES TO PROVDE SOLUTIONS TO OVERCOME POVERTY BY
	ASSISTING WITH RENT, UTILITIES, AND PROVIDING A FOOD PANTRY FOR THE
	NEEDY.
4b	(Code:         ) (Expenses \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 775,238.
	Eorm <b>990</b> (2022

-	~~~	(0000)
⊢orm	990	(2022)

Form 990 (2022) GOSHEN HELP
Part IV Checklist 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	X	
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 during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	· ·		
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part III</i>	8		x
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? <i>If "Yes," complete Schedule D, Part V</i>	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,	10		
	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	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
	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 Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d		x
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i>	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i>	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
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		X
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		X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		x
	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	<b></b>		x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	1 1

Form	990	(2022)
	330	(2022)

Form 990 (2022) GOSHEN HELP
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	<u> </u>
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			v
~ ~	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	04-		x
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
h	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
		240		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h		258		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete</i>			
		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	230		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes, " complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
o=	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
20	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		x	
Par	Note: All Form 990 filers are required to complete Schedule O           Ct V         Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	L
rai				
	Check if Schedule O contains a response or note to any line in this Part V		Vac	
1	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 36		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 1b 0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	•		
U	(gambling) winnings to prize winners?	1c	х	
	Agenerity, minimize to bize minior.			

47-5106845	Page 5
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Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)				
				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	25			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		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 Accounts (FBAR).				
			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	·····	5c		<b> </b>
6a					
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				37
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the	- F	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	·····	7b		<b> </b>
С					
	to file Form 8282?		7c		X
	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 contract?	- r	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	F	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as require	- r	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 10	98-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		0		
•	sponsoring organization have excess business holdings at any time during the year?		8		
	Sponsoring organizations maintaining donor advised funds.		0-		
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9a 9b		
	Section 501(c)(7) organizations. Enter:		30		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b				
	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders 11a				
	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b				
	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
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				
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				<b> </b>
	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?	ļ	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 activities				1
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	ļ	17		
	If "Yes," complete Form 6069.				

GOSHEN HELP

Form 990 (2022)

				X
0	Check if Schedule O contains a response or note to any line in this Part VI			Δ
Sec	tion A. Governing Body and Management			
	Enter the number of voting members of the governing body at the end of the tax year 10		Yes	No
та				
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. Enter the number of voting members included on line 1a, above, who are independent 1b 10			
b		-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	•		x
•	officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			x
	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 7-	Did the organization have members or stockholders?	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7-		x
	more members of the governing body?	7a		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			x
~	persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	0-	x	
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			x
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Л
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		No.	
10-	Did the eventiation have lead charters branches as officiates?	10-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		- 23
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b		10-	x	
12a		12a		X
b		12b		
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10-	x	
40	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14 45	Did the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by independent			
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-	x	
a L	The organization's CEO, Executive Director, or top management official	15a		X
D	Other officers or key employees of the organization	15b		
10-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-		x
	taxable entity during the year?	16a		
D	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	401-		
<u> </u>	exempt status with respect to such arrangements?	16b		
17 10			) av a''	able
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	is only	) avail	anie
	for public inspection. Indicate how you made these available. Check all that apply.			
40	X Own website Another's website X Upon request Other (explain on Schedule O)	-1 C		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	id tina	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records <b>KYLE BORGER</b> - 307-532-0269			
	1933 MAIN STREET, TORRINGTON, WY 82240			

GOSHEN HELP

Form 990 (2022)

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.

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See 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.

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	ition	thon	000	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week		cer an	dad	recto	or/trus	tee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	or di	ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/	from the
	organizations	ustee	trust		ee	upens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	lual tr	tional		nploy	st cor yee	L	1033-1120)		organizations
	line)	ndivic	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationio
(1) KYLE BORGER	40.00	_	_	0	-					
EXECUTIVE DIRECTOR					х			71,497.	Ο.	0.
(2) SHELLY DUNCAN	2.00									
PRESIDENT		х		х				0.	0.	0.
(3) LESLIE PATTERSON	2.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(4) REBECCA PRALL	2.00									
SECRETARY		Х		Х				0.	0.	0.
(5) KIMBERLY HARRIS	2.00									
TREASURER		Х		Х				0.	0.	0.
(6) AMANDA SHAHADEY	2.00									
DIRECTOR		Х						0.	0.	0.
(7) CANDACE MUNDT	2.00									-
DIRECTOR		Х						0.	0.	0.
(8) LANDIS BENSON	2.00									
DIRECTOR		Х						0.	0.	0.
(9) MANDY HORATH	2.00									<u> </u>
DIRECTOR		X						0.	0.	0.
(10) MARTY ERTMAN	2.00								0	0
DIRECTOR	0.00	X						0.	0.	0.
(11) TYREL OWENS	2.00							0	0	0
DIRECTOR		X						0.	0.	0.
						-				
						-				

Form 990 (2022) GOSHEN H									47-53	1068	8 <b>4</b> 5 г	age <b>8</b>
Part VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C	Compensated Employe	es (continued)			
(A)	(B)			(C Pos	C)			(D)	(E)		(F)	
Name and title	Average hours per		not c	heck	more	than		Reportable	Reportable		Estimat	
		week box, unless person is both an officer and a director/trustee)						compensation from	compensatio from related		amount other	
	(list any	tor						the	organization		compensa	
	hours for	r direo				ted		organization	(W-2/1099-MIS		from th	
	related	stee o	rustee			en sat		(W-2/1099-MISC/	1099-NEC)		organiza	
	organizations below	Individual trustee or director	In stitutional trustee		Key employee	Highest compensated employee		1099-NEC)			and rela	
	line)	dividu	stituti	Officer	y emp	ghest	Former				organizat	ions
										_		
1b Subtotal								71,497.		0.		0.
c Total from continuation sheets to Part V								0.		0.		0.
d Total (add lines 1b and 1c)								71,497.		0.		0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) wr	no re	eceived more than \$100	,000 of reportab	le		0
compensation from the organization											Yes	No
2 Did the exception list any former officer	director truct						hia	when the component of a main		. п	163	
3 Did the organization list any former officer, line 1a? If "Yes." complete Schedule J for s			-	•			Ŭ		2	- 1	3	x
<ul><li>4 For any individual listed on line 1a, is the su</li></ul>								har companyation from			3	
and related organizations greater than \$15									the organization	- 1	4	x
5 Did any person listed on line 1a receive or a			•						idual for services		•	
rendered to the organization? If "Yes," com					-					- 1	5	x
Section B. Independent Contractors											-	
1 Complete this table for your five highest co	mpensated ind	depe	ende	ent c	ontr	racto	ors t	that received more than	\$100,000 of corr	npensa	tion from	
the organization. Report compensation for												
(A)								(B)			(C)	
Name and business	address	NC	ONE	Ξ				Description of s	services	Co	ompensatio	on
							-					
							-					
• Total number of index or deat contract.		<u></u>		d + -	+1	oc "			anyo there			
2 Total number of independent contractors (i \$100,000 of compensation from the organi	•	UL III	nite	u 10		se lis D	sted	a above) who received n	iore man			

		Obset: If 0 - I _ I _ 0				an make to a set				Г
		Check if Schedule O	conta	ains a respo	nse	or note to any line	(A) (A) Total revenue	Related or exempt	<b>(C)</b> Unrelated business revenue	(D) Revenue exclu from tax und sections 512 -
!	1 a	Federated campaigns		1a						
		Membership dues								
		Fundraising events								
		Related organizations								
		Government grants (conti				721,574.				
2	f	All other contributions, gifts,	grant	s, and						
		similar amounts not included	abov	/e <b>1f</b>		73,250.				
	g	Noncash contributions included in	lines	1a-1f <b>1g</b> \$						
	h	Total. Add lines 1a-1f					794,824.			
						Business Code				
	2 a									
	b									
	с									
	d									
	е									
	f	All other program service	reve	nue						
	g	Total. Add lines 2a-2f								
	3	Investment income (inclue	•							
		other similar amounts)								
	4	Income from investment of	exempt bo	nd p	proceeds					
	5	Royalties								
				(i) Real		(ii) Personal				
	6 a	Gross rents	6a							
	b	Less: rental expenses $\dots$	6b							
		Rental income or (loss)	6c							
		Net rental income or (loss	)			1				
1	7 a	Gross amount from sales of		(i) Securiti	es	(ii) Other				
		assets other than inventory	7a							
	b	Less: cost or other basis								
		and sales expenses	7b							
		Gain or (loss)								
		Net gain or (loss)				·····				
	8 a	Gross income from fundraisi	-	•						
		including \$								
		contributions reported on		,						
		Part IV, line 18				ļ				
		Less: direct expenses			8b	L				
		Net income or (loss) from		-						
1	9 a	Gross income from gamin								
		Part IV, line 19			9a	ļ				
		Less: direct expenses			9b					
		Net income or (loss) from			<u></u>	······				
1	0 a	Gross sales of inventory,								
	_	and allowances								
		Less: cost of goods sold			10b					
+	С	Net income or (loss) from	sales	s of inventor	у					
						Business Code				
1	1 a					┞─────┤				
	b					┞─────┤				
	С									
		A 11 11						1	1	1
1		All other revenue Total. Add lines 11a-11d								

#### GOSHEN HELP

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response	se or note to any line in	this Part IX	, , ,	
Do	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	73,495.	73,495.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	71,497.	58,628.	12,869.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	440,028.	419,015.	21,013.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	35,943.	28,039.	7,904.	
11	Fees for services (nonemployees):				
а	Management				
	Legal				
	Accounting	1,100.		1,100.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	7,572.	5,760.	1,812.	
13	Office expenses	25,942.	25,626.	316.	
14	Information technology				
15	Royalties				
16	Occupancy	74,833.	74,833.		
17	Travel	8,236.	7,788.	448.	
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	4,216.		4,216.	
23	Insurance	3,146.		3,146.	
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	FOOD PURCHASE	19,934.	19,934.		
b	TRAINING	15,097.	15,097.		
с	COMMUNICATIONS	11,841.	11,841.		
d			25 1 22		
е	All other expenses	38,709.	35,182.	3,527.	
25	Total functional expenses. Add lines 1 through 24e	831,589.	775,238.	56,351.	0 .
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)				
	0 10 12 00				Earm <b>990</b> (202

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GOSHEN HELP

		Check if Schedule O contains a response or no	te to any l	ine in this Part X			
		·	<u> </u>		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			35,754.	1	3,491.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	stantial co	ntributor, or 35%			
		controlled entity or family member of any of the	se person	s		5	
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describe			6		
ŝ	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use				8	
As	9	<b>B</b>				9	
	1	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	26,924.			
	b	Less: accumulated depreciation	10b	10,057.	21,083.	10c	16,867.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		2,051.	15		
	16	Total assets. Add lines 1 through 15 (must equ			58,888.	16	20,358.
	17	Accounts payable and accrued expenses		1,765.	17	0.	
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete			21		
ŝ	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, subs					
abil		controlled entity or family member of any of the				22	
Ë	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line					
		of Schedule D	,			25	
	26	Total liabilities. Add lines 17 through 25			1,765.	26	0.
		Organizations that follow FASB ASC 958, ch		X			
ces		and complete lines 27, 28, 32, and 33.					
lan	27	Net assets without donor restrictions			2,348.	27	20,358.
Ba	28	Net assets with donor restrictions			54,775.	28	0.
pu		Organizations that do not follow FASB ASC					
ц.		and complete lines 29 through 33.					
s of	29	Capital stock or trust principal, or current funds	6			29	
set	30	Paid-in or capital surplus, or land, building, or e				30	
As	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			57,123.	32	20,358.
~	33	Total liabilities and net assets/fund balances			58,888.	33	20,358.
					•		Form <b>990</b> (2022)

Form **990** (2022)

Form 990 (2022)

Form	1 990 (2022) GOSHEN HELP	47-5106	845	Pag	ge <b>12</b>
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			24.
2	Total expenses (must equal Part IX, column (A), line 25)	2			89.
3	Revenue less expenses. Subtract line 2 from line 1	3			65.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5'	7,1	23.
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	20	),3	58.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	X 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 separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	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 Scl	nedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

SCHEDULE A	١
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Department of the Treasury

Internal Revenue Service

(Form 990)

# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public Inspection

Nam	e of t	the organization							identification number		
			EN HELP						7-5106845		
Pa	rt I	Reason for Public	Charity Status.	(All organizations must c	omplete ti	nis part.) S	See instruction	ıs.			
The	organ	ization is not a private found	lation because it is: (	For lines 1 through 12, o	check only	one box.)					
1		A church, convention of ch				n 170(b)(*	1)(A)(i).				
2		A school described in sect	ion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	n 990).)						
3		A hospital or a cooperative									
4		A medical research organiz	ation operated in co	njunction with a hospita	l described	d in <b>sectio</b>	n 170(b)(1)(A	.)(iii). Enter	the hospital's name,		
		city, and state:									
5		An organization operated for		llege or university owned	d or opera	ted by a g	overnmental	unit descrik	ped in		
		section 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b>									
7	X	An organization that norma	•	intial part of its support f	from a gov	ernmental	unit or from t	the general	public described in		
-		section 170(b)(1)(A)(vi). (C									
8	$\square$	A community trust describe			-						
9		An agricultural research org	-			-		-	-		
		or university or a non-land-	grant college of agric	sulture (see instructions).	. Enter the	name, city	y, and state o	r the colleg	le or		
10		university:	lly receives (1) mere	then 22 1/20/ of its own	nort from	oostributie	no momboro	hin face of	nd aroon ronginto from		
10		An organization that norma activities related to its exen									
		income and unrelated busi							-		
		See section 509(a)(2). (Col				3363 acqu		ganzation			
11		An organization organized		ively to test for public sa	afety. See	section 50	)9(a)(4).				
12		An organization organized		•	•			arrv out the	e purposes of one or		
		more publicly supported or	-	-	-			-			
		lines 12a through 12d that									
а		<b>Type I.</b> A supporting orga	• •			-		-	/ giving		
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	ees of the s	supporting		
		organization. You must o	complete Part IV, Se	ections A and B.							
b		<b>Type II.</b> A supporting org	anization supervised	l or controlled in connec	tion with it	s support	ed organizatio	on(s), by ha	aving		
		control or management o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	oported		
		_ organization(s). You mus	t complete Part IV,	Sections A and C.							
С		Type III functionally interpretent of the second	egrated. A supporting	g organization operated	in connec	tion with, a	and functiona	Illy integrat	ed with,		
	_	_ its supported organizatio	n(s) (see instructions	s). You must complete l	Part IV, Se	ections A,	D, and E.				
d		Type III non-functionally	y integrated. A supp	orting organization oper	ated in co	nnection v	with its suppo	rted organ	ization(s)		
		that is not functionally int			-		-	d an attent	iveness		
		requirement (see instruct									
е		Check this box if the orga					а Туре I, Туре	e II, Type III			
	_	functionally integrated, o		nally integrated support	ing organi	zation.					
		er the number of supported of	•								
g		vide the following information i) Name of supported	n about the supporte	d organization(s).	(iv) Is the orga	nization listed	(v) Amount of	fmonetary	(vi) Amount of other		
	``	organization	(1) 211	(described on lines 1-10	in your governi Yes	ng document? No	support (see ir	,	support (see instructions)		
		-		above (see instructions))	163						
Tota	I										

#### Schedule A (Form 990) 2022

GOSHEN HELP

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	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	<b>(d)</b> 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	129,537.	382,104.	778,561.	859,631.	794,824.	2944657.
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 $\dots$						
4	Total. Add lines 1 through 3	129,537.	382,104.	778,561.	859,631.	794,824.	2944657.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						2944657.
Sec	tion 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	129,537.	382,104.	778,561.	859,631.	794,824.	2944657.
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.)	47.	500.	1,585.	1,821.		3,953.
11	Total support. Add lines 7 through 10						2948610.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third, <sup>r</sup>	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop						L
	ction C. Computation of Publ						00 07
	Public support percentage for 2022 (		•	( ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )		14	99.87 %
	Public support percentage from 2021					15	%
16a	33 1/3% support test - 2022. If the c						
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the c						
4-	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact			-	-	-	
	meets the facts-and-circumstances te	-		• • • •			
b	10% -facts-and-circumstances tes	-					10% or
	more, and if the organization meets the						
	organization meets the facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instruction	s

Schedule A (Form 990) 2022

#### 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (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						
Ũ	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
10	3 received from disqualified persons						
r	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.) ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2010	(a) 2020	(d) 2021	(a) 2020	
	Amounts from line 6	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
	Gross income from interest,						
102	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
Ľ	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired offer June 20 107E						
	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.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) orga	anization,
	check this box and stop here						
-	ction C. Computation of Publ						
15	Public support percentage for 2022 (			column (f))		15	%
16	Public support percentage from 2021					16	%
Se	ction D. Computation of Inve						
17						17	%
18	Investment income percentage from					18	%
19a	a 33 1/3% support tests - 2022. If the	-					l line 17 is not
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization quali	fies as a publicly s	supported organization	ation	
k	<b>33 1/3% support tests - 2021.</b> If the	•					
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	

### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 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")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in* **Part VI**.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No 1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A			GOSHEN	
Part IV	Suppor	ting Oi	rganizations <sub>(cont</sub>	inued)

1

			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? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			

	•		. ,		
or management of the	e supporting organi	ization was veste	ed in the same	persons that controlled or mana	aged
the supported organi	zation(s).				
Section D. All Type I	II Supporting C	Organization	S		

ĿΡ

		_	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 durin	g the	yea(see instructions	)
---	---	-------	----------------------	---

- a \_\_\_\_ The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c \_\_\_\_ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see 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*.

Yes No

		<u> </u>		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	U U		Part VI). See instructions.
Sect	All other Type III non-functionally integrated supporting organizations mu-		(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		
Sect	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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
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 L Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2022

GOSHEN HELP

Schedule A (Form 990) 2022 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Sch	edule A (Form 990) 2022 GOSHEN HELP
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting
Sec	tion D - Distributions
1	Amounts paid to supported organizations to accomplish exempt purposes
2	Amounts paid to perform activity that directly furthers exempt purposes of support
	organizations, in excess of income from activity
3	Administrative expenses paid to accomplish exempt purposes of supported organ
4	Amounts paid to acquire exempt-use assets
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part V
6	Other distributions (describe in Part VI). See instructions.
7	Total annual distributions. Add lines 1 through 6.
8	Distributions to attentive supported organizations to which the organization is res
	(provide details in Part VI) See instructions

**Current Year** 

# g Organizations (continued)

-					
1	Amounts paid to supported organizations to accomplish exe			1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	9		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	ns	(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: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
C	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:				
a	Excess from 2018				
b	Excess from 2019				
C	Excess from 2020				
d	Excess from 2021				
e	Excess from 2022				
				Sc	hedule A (Form 990) 2022

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

# Schedule B

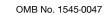
(Form 990)

Department of the Treasury Internal Revenue Service

#### Name of the organization

# **Schedule of Contributors**

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



2022

Employer identification number

47-5106845
------------

Organization type (check or	Jrganization type (check one):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set in the set in the parts unless the set in the se

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

#### Schedule B (Form 990) (2022)

Name of organization

GOSHEN HELP

Employer identification number

47-5106845

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STATE OF WYOMING 122 WEST 25TH STREET, 3RD FL CHEYENNE, WY 82002	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	GOSHEN COUNTY PO BOX 160 TORRINGTON, WY 82240	\$18,478.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll On Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of o	rganization		Employer identification number
GOSHE	N HELP		47-5106845
Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed	d.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		   \$	

Schedule B (Form 990) (2022)

# Schedule B (Form 990) (2022) Name of organization

ame of oi	rganization			Employer identification numb
	N HELP			47-5106845
art III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a)	through (e) and the following line ent	ry For organizations	
	completing Part III, enter the total of exclusively religious, c Use duplicate copies of Part III if additional	haritable, etc., contributions of <b>\$1,000 or I</b>	ess for the year. (Enter this info	. once.) \$
a) No. from				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
f		(e) Transfer of gif	t l	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tr	ansferor to transferee
		[		
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
Part I				
-				
		(e) Transfer of gif	t	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tr	ansferor to transferee
ľ				
a) No. from			(-1) D	
Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
		(e) Transfer of gif	t	
	Transferee's name, address, a		Polotionship of tr	ansferor to transferee
ŀ				
a) No. from				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held
ŀ		(e) Transfer of gif	t l	
ļ	Transferee's name, address, a	nd ZIP + 4	Relationship of tr	ansferor to transferee
		[		
		[		

**SCHEDULE D** 

Department of the Treasury

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(Form	990)
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Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information

OMB No. 1545-0047 **Open to Public** 

Name of the organization         Employe identification number           (COSHEN_HELP         Crganizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization asswered 'Ves' on Form 990, Part IV, lie 6.           1         Total number at end of year         (a) Donor advised funds         (b) Funds and other accounts           2         Aggregate value of ontributions to (during year)         (b) Funds and other accounts           3         Aggregate value of ontributions to (during year)         (b) Funds and other accounts           4         Aggregate value of ontributions to (during year)         (c) Non advised funds         (c) Tota number at end of year           5         Did the organization inform all organization inculture to donor or donor advisors in writing that grant funds can be used only for the benefit Of the donor or donor advisor, or an organization inform all organization inform all organization in the donor or donor advisor, or an organization inform all organization inform all organization inform all organization inform all proposes and or the benefit Of the donor or donor advisor, or an organization inform all organization inform all proposes and or the benefit Of the donor or donor advisor, or an organization inform all organization inform all organization inform all proposes and not assements.         Ves         No           Part III Conservation Easements.         Complete inform advisor for an organization inform all proposes and not assements.         Ves         No           2         Compate lines 2a through 2d if the organization (heeki a	interna	I Revenue Service GO to www.irs.gov/Form99	o for instructions and the latest inform		Inspection
organization answered 'Yes' on Form 980, Part IV, line 6.           1         Total number at end of year         (a) Donor advised funds         (b) Funds and other accounts           2         Aggregate value of contributions to (Juring year)		GOSHEN HELP			
1       Total number at end of year       (a) Donor advised funds       (b) Funds and other accounts         1       Total number at end of year       (a) grapsate value of contributions to (during year)       (b) Funds and other accounts         2       Aggregate value of contributions to (during year)       (b) Funds and other accounts       (c) Funds and other accounts         5       Did the organization is properly subject to the organization is exclusive legal control?       (c) Funds and other accounts         6       Did the organization is properly subject to the organization is exclusive legal control?       (c) Funds and other accounts         6       Did the organization is properly subject to the organization is exclusive legal control?       (c) Funds and other accounts         7       Particle order to the benefit of the organization is exclusive legal control?       (c) Funds and other accounts         8       Decrements led by the organization (for exclusive legal control?       (c) Funds and other accounts         9       Propses(valion of land for public use (for example, recreation or education)       Preservation of a conservation assements       (c) Funds and area         9       Proses(valion casements led) by the organization (for example, recreation or activitien included in (a)       (c) Conservation assements       (c) Conservation assements       (c) Conservation assements         1       Total number of conservation assements       (c) Conservation a	Pa			s or Ac	counts.Complete if the
1       Tetal number at end of year         2       Aggregate value of contributions to (during year)         3       Aggregate value of contributions to (during year)         4       Aggregate value of antisticons to (during year)         5       Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization is exclusive legal control?       Image: Segment and the organization is exclusive legal control?         6       Did the organization inform all grantese, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not to the benefit of the organization answered 'Yes' on Form 990, Part IV, line 7.         Particle proposely of conservation easements held by the organization answered 'Yes' on Form 990, Part IV, line 7.         Protection of natural habitat       Protection of a historically important land area         Protection of natural habitat       Protection of a conservation easements         2a       Degregate value easements       2a         1       Automation easements       2a         2       Did the organization held a qualified conservation contribution in the form of a conservation easements         2a       Did the organization have a write on low progenization have a write on low progenization have a write on low progenization have a write noil (a yead) affer dual to the did the Tax Year         3       Number of conservation easements is		organization answered "Yes" on Form 990, Part IV, lir			
2 Aggregate value of contributions to (during year) 4 Aggregate value of contributions to (during year) 4 Aggregate value at and of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 9 Part II Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization or education) Preservation of a land for public use (for example, recreation or education) Preservation of a confited historic structure Preservation of open space 2 Complete inse 2 attrough 2 of the organization held a qualified conservation contribution in the form of a conservation easement in the last day of the tax year. 1 The intervision Easements is called in (a) 2 Complete inters 2 attrough 2 of the organization held a qualified conservation contribution in the form of a conservation easement in cluded in (a) 2 Complete inters 2 attrough 2 of the organization held a qualified conservation contribution in the form of a conservation easement is cluded in (a) 2 Number of conservation easements is cluded in (a) (a) called attract advises and a contribution in the form of a conservation easement is included 3 Number of conservation easements included in (a) (a) called attract advises and a contribution in the organization during the tax year 3 Complete inthe National Plegister 4 Number of states where property subject to conservation easements in cluded 4 Number of states where property subject to conservation easements in cluded 5 Does the organization have a written policy regarding the periodic monitoring, inspectify, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitorin			(a) Donor advised funds	(b	) Funds and other accounts
Aggregate value of grants from (during year)     Aggregate value of grants from (during year)     Aggregate value at and of year     Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds     are the organization inform all donors, and donor advisors in writing that grant funds can be used only     for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring     impermissible pirvate benefits     Prepose(s) of conservation easements held by the organization answered 'Yes' on Form 990, Part IV, line 7.     Purpose(s) of conservation easements held by the organization (check all that apply).     Preservation of a not for the benefit of the donor or doucation'     Preservation of a certified historic structure     Preservation of acentified historic structure     Automber of conservation easements     a Total annober of conservation easements     a corflect historic structure included in (a)     Aumber of conservation easements     a certified historic structure included in (a)     Aumber of conservation easements     molution and (b) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	1	Total number at end of year			
Aggregate value at end of year     Decision or advisors in writing that the assets held in donor advised funds     are the organization inform all grantees, donors, and donor advisors in writing that the assets held in donor advised funds     are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only     for charable purposes and to for the benefit of the donor of a vary other purpose conterring     meperitesble pixels benefit?     Yee     No     Part II     Conservation Easements. Complete if the organization answered 'Yee' on Form 990, Part IV, line 7.     Purpose(s) of conservation easements held by the organization (check all that apply).     Protection of nature habitat     Protection of open space     Complete lines 2 attrivuol; 20 if the organization held a qualified conservation contribution in the form of a conservation easement in the last     day of the tax year.     Total number of conservation easements     Total annexed of a conservation easements     Total accessing esticited by conservation easements     Total accessing esticited by conservation easements     Total annexed or conservation easements in cludid in (a) acquired after July 25,2006, and not on a     historic structure isseements included in (a) ecquired after July 25,2006, and not on a     historic structure listed in the National Begister     Ves     Nome of osservation easements included in (a) ecquired after July 25,2006, and not on a     lad adviounteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the pariation regarding the pariation for section 1700/h(4)(6)(n)     and section 1700/h(4)(6)(n)	2	Aggregate value of contributions to (during year)			
5       Did the organization inform all donos and donor advisors in writing that the assets held in donor advised funds	3	Aggregate value of grants from (during year)			
are the organization's property, subject to the organization's exclusive legal control?       Yes       No         6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the organization answered 'Yes' on Form 990, Part IV, line 7.       No         Part III       Conservation assements. Complete if the organization (check all that apply).       Preservation of land for public use (for example, recreation or education)       Preservation of and for public use (for example, recreation or education)       Preservation of and for public use (for example, recreation or education)       Preservation of a conservation easements include a qualified conservation contribution in the form of a conservation easement on the last         2 Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements       2a         3 Total number of conservation easements       2a       2a         4 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year         4 Number of states where property subject to conservation easements in tock?       Yes       No         6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements and using the year       Yes       No         9 In Part XIVII, describe how the organization neporting unspec	4	Aggregate value at end of year			
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part III Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization divected in the apply). Protection of land for public use (for example, recreation or education) Proservation of a fart for public use (for example, recreation or education) Proservation of a centified historic structure Preservation of a truncil habitat Protection of a conservation easements in the last in the form of a conservation easement on the last day of the tax year. a Total annaber of conservation easements and entified issue structure included in (a) 2 complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total arceage restricted by conservation easements included in (a) 2 do conservation easements included in (c) acquired after July 25,2006, and not on a historic structure included in (a) 2 do conservation easements included in (c) acquired after July 25,2006, and not on a historic structure included in (a) inconservation easements during the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements included in (c) acquired after July 25,2006, and not on a set of the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year 7 Arrount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easements. Cliq) davose satisfy the requir	5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	ised fund	S
for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring		are the organization's property, subject to the organization's	exclusive legal control?		Yes No
Impermissible private benefit?       Yes       No.         Part II       Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, Ime 7.       Perservation of land for public use (for example, recreation or education)       Preservation of a historically important land area         Propose(s) of conservation easements held by the organization (check all that apply).       Preservation of a certified historic structure         Preservation of open space       Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.       Edd at the End of the Tax Year         Total acreage restricted by conservation easements       2a       2b         Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure isotation the National Register       2d         Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year       2d         Number of states where property subject to conservation easement is located       2d       No         Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year       Yes       No         Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements of section 170(h)(4)(B)(i)       Yes       No         Dese each conservation easement reported on line 2(a) above sati	6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used or	nly
Part II       Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.            Purpose(6) of conservation easements held by the organization (check all that apply).           Preservation of an for public use (for example, recreation or education)           Preservation of an tof or public use (for example, recreation or education)             Preservation of on fatural habitat           Preservation of a certified historic structure             Preservation of open space           Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements             Total number of conservation easements           Preservation of an easements             Total number of conservation easements           Preservation easements             O Number of conservation easements           Preservation easements             Number of conservation easements       modified, transferred, released, extinguished, or terminated by the organization during the tax             Preservation easements           Preservation easements             Does the organization have a written policy regarding the periodic monitoring, inspection, handling of         violations, and enforcement of the conservation easements             Complete if no example, approache easements             Does each conservation easements         pe		for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferri	ng
1       Purpose(s) of conservation easements held by the organization (check all that apply).       Preservation of a historically important land area         Preservation of land for public use (for example, recreation or education)       Preservation of a certified historic structure         Preservation of open space       Preservation of a certified historic structure         2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements on the last far of the Tax Year         a Total number of conservation easements       2a         b Total arcgage restricted by conservation easements       2a         c Number of conservation easements       2a         a Number of conservation easements       2a         a Number of conservation easements       2a         a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax         year       2d         3 Number of states where property subject to conservation easement is located		impermissible private benefit?			Yes No
Preservation of land for public use (for example, recreation or education)       Preservation of a natural habitat         Preservation of on space         2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.         a Total number of conservation easements       2a         b Total acreage restricted by conservation easements       2b         c Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register       2d         3 Number of states where property subject to conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register       2d         4 Number of states where property subject to conservation easements included in (c) acquired after July 25,2006, and enforcing conservation easements modified, transferred, released, extinguished, or terminated by the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year         6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year         7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements and balance sheet, and include, if applicable, the text of the foothote to the organization's financial statements that describes the organization's financial statements that describes the organization's financial statements that describes the organization's financial ese	Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, I	ine 7.
Preservation of natural habitat Preservation of natural habitat Preservation of natural habitat Preservation of a certified historic structure Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total arcage restricted by conservation easements Di total arcage restricted by conservation easements Di total arcage restricted by conservation easements Di total arcage restricted by conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Ver Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the foothote to the organization's financial statements that describes the organization elected, as permitted under FASB ASC 956, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public servic	1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).		
Preservation of open space     Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last     day of the tax year.     Total acreage restricted by conservation easements     Data acreage restricted by conservation easements and cardiad filter July 25,2006, and not on a     historic structure listed in the National Register     Data acreage restricted by the organization during the tax     year     Vear     Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax     year     Vear     Subset the organization have a written policy regarding the periodic monitoring, inspection, handling of     violations, and enforcement of the conservation easements it holds?     Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements with olds?     Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements     wear     Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements     wear     Does each conservation easements     the tot the footnote to the organization '' ves'     No     In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet works     of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public     service, provide in Part XIII the text of the footnote to its financial statement and balance sheet works     of art, historical treasures, or other similar assets held for publi		Preservation of land for public use (for example, recrea	ation or education) 🛛 Preservation o	f a histor	ically important land area
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements 6 Number of conservation easements on a certified historic structure included in (a) 2 Aumount of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 9 In Part XIII, describe how the organization reports conservation easements. Part III Organization answered 'Yes' on Form 90, Part V, line 8. 10 If the organization each as permitted under FASB ASC 956, nor torport in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the tax of the footnobe to the final assets field for public scribition, education, or research in furtherance of public service, provide in Part XIII the tax of the footnobe to t		Protection of natural habitat	Preservation o	f a certifi	ed historic structure
day of the tax year.       Held at the End of the Tax Year         a Total number of conservation easements       2a         b Total arcmader stricted by conservation easements       2b         c Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register       2d         3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year       2d         4 Number of states where property subject to conservation easement is located		Preservation of open space			
a Total number of conservation easements       2a         b Total acreage restricted by conservation easements       2b         c Number of conservation easements on a certified historic structure included in (a)       2c         d Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register       2d         3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year       2d         4 Number of states where property subject to conservation easement is located	2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	n of a co <u>r</u>	servation easement on the last
b       Total acreage restricted by conservation easements       2b         c       Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register       2d         3       Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year       2d         4       Number of states where property subject to conservation easement is located		day of the tax year.			Held at the End of the Tax Year
b       Total acreage restricted by conservation easements       2b         c       Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register       2d         3       Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year       2d         4       Number of states where property subject to conservation easement is located	а	Total number of conservation easements		Г	2a
c       Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register       2d         3       Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year       2d         4       Number of states where property subject to conservation easement is located	b				2b
d       Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register       2d         3       Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year       4         4       Number of states where property subject to conservation easement is located       5         5       Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?       1         6       Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year       7         7       Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year       1         8       Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(0)       1       Yes       No         9       In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization saccounting for conservation easements.       Yes       No         9       In Part XIII, describe how the organization answered "Yes" on Form 990, Part IV, line 8.       1       If the organization elected, as permitted under FASB ASC 958, not to re	с	Number of conservation easements on a certified historic str	ructure included in (a)	Г	2c
historic structure listed in the National Register       2d         3       Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	d			Γ	
<ul> <li>Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year</li></ul>					2d
<ul> <li>year</li> <li>Number of states where property subject to conservation easement is located</li> <li>Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?</li> <li>Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year</li> <li>Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year</li> <li>Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)</li> <li>and section 170(h)(4)(B)(ii)?</li> <li>Yes</li> <li>No</li> <li>In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements.</li> <li>Part IIII</li> <li>Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.</li> <li>Complete if the organization easer 'Yes' on Form 990, Part IV, line 8.</li> <li>If the organization elected, as permitted under FASB ASC 958, not report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.</li> <li>If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the following amounts relating to these items: <ul> <li>(i) Revenue included on Form 990, Part XIII, line 1</li> <li>(ii) Assets included in Form 990, Part XIII, li</li></ul></li></ul>	3				zation during the tax
<ul> <li>5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?</li> <li>6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year</li> <li>7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year</li> <li>8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?</li> <li>9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization is accounting for conservation easements.</li> <li>Part IIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.</li> <li>1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.</li> <li>b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.</li> <li>b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other</li></ul>		year			
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<ul> <li>service, provide in Part XIII the text of the footnote to its financial statements that describes these items.</li> <li>b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: <ul> <li>(i) Revenue included on Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> </ul> </li> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: <ul> <li>a Revenue included on Form 990, Part VIII, line 1</li> <li>\$</li></ul></li></ul>	1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	and bala	nce sheet works
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<ul> <li>(ii) Assets included in Form 990, Part X\$</li></ul>		(i) Revenue included on Form 990, Part VIII, line 1			\$
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a Revenue included on Form 990, Part VIII, line 1\$	2				
a Revenue included on Form 990, Part VIII, line 1\$					
	а		-		\$
	b				

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 99	0.
232051	09-01-22	

Sche	dule D (Form 990) 2022 GOSHEN	HELP					4	17-51	0684	5 ра	age <b>2</b>
Par	t III Organizations Maintaining C	collections of A	rt, Histo	rical Tre	easures, o	or Othe	er Simila	ır Asse	<b>ts</b> (contii	nued)	-
3	Using the organization's acquisition, accessi	on, and other record	ds, check a	iny of the f	ollowing tha	t make s	ignificant	use of its			
	collection items (check all that apply):		_								
а	Public exhibition	d	<b>I</b> [] Lo	an or exch	ange progra	am					
b	Scholarly research	e	e 🗌 Ot	her							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	in how they	/ further th	e organizati	on's exe	mpt purpo	se in Par	XIII.		
5	During the year, did the organization solicit of							_	-		-
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran		ete if the or	rganizatior	n answered '	'Yes" on	Form 990	, Part IV,	line 9, oi	r	
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod		2						1.		٦
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	blowing tab	pie:					Amoun	+	
									Amoun		
	Beginning balance										
	Additions during the year										
f	Ending balance										
	Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII.										1
Par											
		(a) Current year	(b) Prio	or year	(c) Two year	s back	(d) Three ye	ears back	(e) Four	r years	back
1a	Beginning of year balance										
	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur		ce (line 1g,	column (a	) held as:						
а	Board designated or quasi-endowment		_%								
	Permanent endowment	%									
с		%									
-	The percentages on lines 2a, 2b, and 2c sho	-									
3a	Are there endowment funds not in the posse	ession of the organiz	ation that a	are held ar	nd administe	red for th	ne		1	Yes	No
	organization by:								0.0	162	
	(i) Unrelated organizations								3a(i)		
h	(ii) Related organizations										
л Л	Describe in Part XIII the intended uses of the								30		
Par	t VI Land, Buildings, and Equipm			103.							
	Complete if the organization answere		0, Part IV, I	ine 11a. S	ee Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Ad	cumulate	d	( <b>d</b> ) Boo	k valu	e
		basis (investr	nent)	basis (	otner)	dep	preciation				
	Land										
	Buildings										
	Leasehold improvements			2	6,924.		10,05	.7	1	6,8	67
	Equipment			2	0,944.		10,05	,,,,	T	0,0	07.
	Other		V ochum-	(D) line 1	) ) )				1	6,8	67
Iota	. Add lines 1a through 1e. (Column (d) must e	qual Forni 990, Part	∧, coiumn	(D), ine T						5,0	57.

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
			Si your market value
<u>(1)</u>	<u> </u>		
(2)			
(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"	Description	110. See Form 990, Part A, line 15.	(b) Book value
			(b) DOOR value
<u>(1)</u>			
<u>(2)</u>			
(3)			
<u>(4)</u>			
(5)			
(6)			
(7)			
(8)			
(9)	- 15)		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e TTE OF TTT. See Form 990, Part X, line 25	
1.         (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25.)		

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

47-	-51	068	45	Page <b>4</b>
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Sche	edule D (Form 990) 2022 GOSHEN HELP		47-5106845	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial St	atements With Rever		
	Complete if the organization answered "Yes" on Form 990, Part IV,	ine 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
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	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines <b>2a</b> through <b>2d</b>		2e	
3	Subtract line 2e from line 1			
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		
с	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	<u>?.)</u>		
Pa	rt XII Reconciliation of Expenses per Audited Financial S	tatements With Expe	nses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV,	ine 12a.		
1	Total expenses and losses per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior yoar adjustments			
	Fhor year aujustments	2b		
c	Prior year adjustments Other losses			
	Other losses	2c		
	Other losses Other (Describe in Part XIII.)	2c 2d	2e	
c d	Other losses	2c 2d		
c d e	Other losses Other (Describe in Part XIII.)	2c 2d		
c d e 3	Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b>	2c 2d		
c d e 3	Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:	2c 2d 4a		

5	Total expenses.	Add lines <b>3</b> and <b>4c</b> .	(This must eq	gual Form 990	, Part I, line 18.	)
---	-----------------	------------------------------------	---------------	---------------	--------------------	---

## Part XIII Supplemental Information.

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.

SCHEDULE I	Grants and Other Assistance to Organizations,												
(Form 990)		Go	vernments, ar ete if the organizatio	nd Individua	ls in the Ŭn	ited States		20	122				
Department of the Treasury		Compl	ete il the organizatio	Attach to Forr		art iv, inie z i or zz.		Open	o Public				
Internal Revenue Service													
Name of the organizat	ion			_				Employer identificat					
	GOSHEN HE	LP						47-51	L06845				
Part I General Information on Grants and Assistance													
•	nization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection												
criteria used to a	riteria used to award the grants or assistance?												
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.													
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.													
			· · · · · · · · · · · · · · · · · · ·	1		(f) Method of							
.,	1 (a) Name and address of organization or government       (b) EIN       (c) IRC section (if applicable)       (d) Amount of cash grant       (e) Amount of noncash assistance       (f) Method of valuation (book, FMV, appraisal, other)       (g) Description of noncash assistance       (f)								i grant Ice				

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2022

Schedule I (Form 990) 2022

GOSHEN HELP

47-5106845

Page **2** 

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
HOUSING SERVICES	817	59,118.	0.		
HEALTH & SOCIAL DEVELOPMENT SERVICE	65	5,826.	0.		
CASE MANAGEMENT	27	8,551.	0.		
Part IV Supplemental Information. Provide the information rec			· · ·		
PART 1, LINE 2 - PROCEDURES FOR MC					
EACH CASH PAYMENT FOR RENT AND UTI					
CASE MANAGER WHO IS ASSIGNED TO TH	IE RECIPI	ENT. THE C	ASE MANAGE	R MEETS	
WITH THE INDIVIDUAL IN NEED AND PR	OVIES FI	NANCIAL CO	UNSELING.	A	
STATEMENT SHOWING THE BALANCE DUE	IS ALSO	OBTAINED F	ROM THE VE	NDOR FOR	
PROOF OF ACCOUNT BALANCE BEFORE PA	YMENT. T	HE PAYMENT	' IS MADE D	IRECTLY	
TO THE UTILITY COMPANY AND/OR LAND	LORD ON	BEHALF OF	THE RECIPI	ENT.	

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service
Name of the organization

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Employer identification number 47 - 5106845

GOSHEN HELP

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 IS REVIEWED IN DETAIL WITH THE EXECUTIVE DIRECTOR AND APPROVED BY

THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD MEMBERS ARE FAMILIAR WITH THE CONFLICT OF INTEREST POLICY AND WILL

CALL SUCH CIRCUMSTANCES INTO QUESTION WHEN KNOWN.

FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD OF DIRECTORS COMPLETES A PERFORMANCE EVALUATION OF THE EXECUTIVE

DIRECTOR ON AN ANNUAL BASIS. THE BOARD RECOMMENDS AND APPROVES COMPENSATION AND BENEFITS OF THE EXECUTIVE DIRECTOR.

FORM 990, PART VI, SECTION C, LINE 19:

DOCUMENTS ARE AVAILABLE UPON REQUEST AT THE GOSHEN HELP OFFICES.

#### 2022 DEPRECIATION AND AMORTIZATION REPORT

#### FORM 990 PAGE 10

#### 990

ond y	JRM 990 PAGE 10						330								
Asset No.	Description	Date Acquired	Method	Life	C o n v	ne Unadjusted <sup>o.</sup> Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation	
	MACHINERY & EQUIPMENT														
1	2 - 13.7 CU FT FREEZERS	07/08/20	SL	10.00	HY1	7 1,079.				1,079.	270.		108.	378.	
2	SWING GLASS DOOR FREEZER	08/20/20	SL	10.00	HY1	7 2,832.				2,832.	708.		283.	991.	
3	SLIDING GLASS DOOR REFRIGERATOR	08/20/20	SL	10.00	HY1	6,132.				6,132.	1,533.		613.	2,146.	
4	VERTICAL FILE CABINET	09/03/20	SL	10.00	HY1	7 1,155.				1,155.	289.		116.	405.	
5	CHEST FREEZER	12/10/20	SL	10.00	HY1	7 500.				500.	75.		50.	125.	
6	COMPUTERS	01/20/21	SL	5.00	HY1	7 4,319.				4,319.	1,296.		864.	2,160.	
7	WEBCAMS	01/21/21	SL	5.00	HY1	7 162.				162.	48.		32.	80.	
8	PRINTER	01/21/21	SL	5.00	HY1	7 210.				210.	63.		42.	105.	
9	PHONES	04/18/21	SL	5.00	HY1	7 74.				74.	22.		15.	37.	
10	SCANNERS	05/13/21	SL	5.00	HY1	916.				916.	275.		183.	458.	
11	HEADSETS	05/13/21	SL	5.00	HY1	7 218.				218.	65.		44.	109.	
12	JETPACKS	08/12/21	SL	5.00	HY1	7 1,319.				1,319.	396.		264.	660.	
13	OUTH PROGRAM LAPTOP	12/02/21	SL	5.00	HY1	7 700.				700.	70.		140.	210.	
14	YOUTH PROGRAM FURNITURE	12/02/21	SL	5.00	HY1	7 1,880.				1,880.	188.		376.	564.	
15	LOVESEAT	12/16/21	SL	5.00	HY1	7 1,820.				1,820.	182.		364.	546.	
16	LAPTOP & MOUSE	02/03/22	SL	5.00	HY1	7 909.				909.	91.		182.	273.	
17	VIDEO CONFERENCE CAMERA	03/17/22	SL	5.00	HY1	7 999.				999.	100.		200.	300.	

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(D) - Asset disposed

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

#### 2022 DEPRECIATION AND AMORTIZATION REPORT

#### FORM 990 PAGE 10

URM 330 FAGE 10							· · · · · · · · · · · · · · · · · · ·								
Asset No.	Description	Date Acquired	Method	Life	Corv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
18	DESKS	05/12/22	SL	5.00	ну	17	1,700.				1,700.	170.		340.	510.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						26,924.				26,924.	5,841.		4,216.	10,057
	* GRAND TOTAL 990 PAGE 10						,				,•	-,•		-,	,
	DEPR						26,924.				26,924.	5,841.		4,216.	10,057

228111 04-01-22